

# QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Bartow COUNTY.)

J. L. NEED of said State and County, having been presented as a witness in support of the application of William Kelly for pension under Section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? J. L. NEED, Sr. Cartersville Ga
2. Are you acquainted with William Kelly the applicant; if so how long have you known him? I got acquainted with him in the war
3. Where does he reside, and how long and since when has he been a resident of this State? On Cherokee Co. Ga. Has lived in this State since war
4. When, where and in what company and regiment did he enlist, and how do you know? On Spring of 1862, Co. E. 4th Reg. Ga vol
5. Were you a member of the same company and regiment? Samuel Co. H
6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? About three years. He was a good soldier. He was discharged at Greensboro N.C. at the Sumner in 1865
7. What property, effects or income has the applicant? (Give your means of knowledge.)

8. What property, effects or income did the applicant possess in 1896, 1897 and 1898, and what disposition, if any, did he make of same?

9. Has he conveyed away any of his property in the last three years, if so, what was it, and to whom?

10. What is the applicant's occupation and physical condition?

11. Is the applicant unable to support himself by labor of any sort, if so, why?

12. How was he supported during the years 1897 and 1898?

13. What portion of his support for these two years was derived from his own labor or income?

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code?

15. What interest have you in the recovery of a pension by this applicant?

Sworn to and subscribed before me, this 10 day of April 1899.

Gus W. Smith Ordinary.  
Bartow Co. Ga

Witness.

# AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

COUNTY.)

Personally came before me J. M. Bates and J. M. Bates, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully William Kelly, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

We find him suffering from a complication of troubles - diseased condition of bladder and kidney, enlarged liver, and a general debilitated condition of the system. He has indigestion and in every way his system is completely let down.

We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me this the 10 day of April 1899. J. M. Bates, M.D.  
Allen C. Coan Ordinary.

# ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cherokee COUNTY.)

I, Allen C. Coan, Ordinary in and for said County, hereby certify that the applicant William Kelly resides in said County, and has been a bona fide resident of this State since the 10 day of April 1899, and that the witnesses, viz: H. N. Addington and J. M. Bates M.D. are of trustworthy character, and that their statements are entitled to full faith and credit.

I further certify that before answering the foregoing questions the applicant and each witness took the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witness before same was signed.

I further certify that the tax digests of Cherokee County show that applicant returned for taxation in his name in 1897 No Dollars of property, and in 1898 No Dollars of property.

In my opinion the foregoing claim is made in good faith.

Witness my hand and seal of office, this 10 day of April 1899.

Allen C. Coan Ordinary.  
of Cherokee County.

# NOTE.

1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answer make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.

I certify that J. L. NEED is of his twenty Cherokee and that he understands the questions before answering them.

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, Wm. Kelley hereby authorize  
Wm. J. Wright of Atlanta Ga  
 to receive and receipt for the pension allowed, and request that he remit same to  
H. C. Burn, Esq. at Greenville Ga.  
 by check

Witness my hand and seal, this 5<sup>th</sup> day of Jan 1900.

William Kelley [L. S.]

Executed in presence of

H. C. Burn, Esq.

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, William Kelley hereby authorize  
H. C. Burn, Esq. of Cherokee County  
 to receive and receipt for the pension allowed and request that he remit same to  
me at Greenville Ga.  
 by \_\_\_\_\_

Witness my hand and seal, this 4<sup>th</sup> day of Jan 1901.

Wm. Kelley [L. S.]

Executed in presence of

J. H. Kelly

Kelley, William  
Cherokee Co.

CODE SEC. 184.  
 (For Those Already Enrolled.)

NO. 1888

INDIGENT

SOLDIER'S PENSION,

1900.

Name Wm. Kelley  
 County Cherokee

WARRANT ISSUED

January 24 1900.

JOHN W. LINDSEY,  
 Commissioner of Pensions.

WARRANT HANDED TO

Wright  
 Chas. W. Harrison, State Printer, Atlanta.

No data

Kelley, William  
Cherokee Co.

CODE SECTION 184  
 (For Those Already Enrolled.)

No. 8677

INDIGENT

SOLDIER'S PENSION.

1901.

Name William Kelley  
 County Cherokee

WARRANT ISSUED

2/13 1901.

JOHN W. LINDSEY,  
 Commissioner of Pensions.

WARRANT HANDED TO

Burn  
 Chas. W. Harrison, State Printer, Atlanta.

No data



# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears Wm. Kelley of Cherokee County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the        day of        1897; that he is 62 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of       ) during the war between the States, and served for the term of three years in Company 2, of 40 th Regiment of the 1st; that his physical condition is as follows: Noont disease & catarrh of the nose

that his property consists of the following items have no property

of the value of        Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1900. I have heretofore as a resident of Cherokee this county been allowed a pension for the year 1890

Sworn to and subscribed before me, this the William Kelley 12 day of Jan 1900. H. C. Burn Ordinary.

State of Georgia,

Cherokee County.

I, H. C. Burn Ordinary of said County, do certify that I am well acquainted with Wm. Kelley the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 12 day of Jan 1900.



H. C. Burn Ordinary Cherokee County.

NOTE.—The blank spaces must be filled.  
NOTE.—An Affidavit should not be attested before January 1st, 1900.

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears William Kelley of Cherokee County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the        day of        1897; that he is 62 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of       ) during the war between the States, and served for the term of 3 years in Company 2, of 40 th Regiment of the 1st; that his physical condition is as follows: has catarrh of nose & no trouble and is almost blind

that his property consists of the following items none

of the value of        Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1901. I have heretofore as a resident of Cherokee county been allowed a pension for the year 1890

Sworn to and subscribed before me, this the Wm. Kelley 14 day of Jan 1901. H. C. Burn Ordinary.

STATE OF GEORGIA,

Cherokee County.

I, H. C. Burn Ordinary of said County, do certify that I am well acquainted with Wm. Kelley the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 14 day of Jan 1901.



H. C. Burn Ordinary Cherokee County.

NOTE.—The blank spaces must be filled.  
NOTE.—An Affidavit should not be attested before January 1st, 1901.

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Chester County.

I, W. M. Kelly hereby authorize

A. B. Carr of Camden Ga

to receive and receipt for the pension allowed and request that he remit same to

me at Camden Ga

by \_\_\_\_\_

Witness my hand and seal, this 9 day of June 1902.

W. M. Kelly [L. S.]

Executed in presence of

J. D. Orr

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, W. M. Kelly hereby authorize

Mr. A. Wright of Atlanta Ga

to receive and receipt for the pension allowed and request that he remit same to

A. B. Carr at Camden Ga

by Cherokee

Witness my hand and seal, this 10 day of June 1903.

W. M. Kelly [L. S.]

Executed in presence of

A. B. Carr

CODE SECTION 124.

(FOR THOSE ALREADY ENROLLED.)

No. 3624

INDIGENT

SOLDIER'S PENSION

1902.

Name W. M. Kelly  
County Chester  
Co. E Regiment 40

WARRANT ISSUED

3/4 1902.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

only

Geo. W. Harrison, State Printer, Atlanta.

No date

Kelly, William  
Cherokee Co

CODE SECTION 124.

(FOR THOSE ALREADY ENROLLED.)

No. 4357

INDIGENT

SOLDIER'S PENSION

1903.

Name W. M. Kelly  
County Cherokee  
Co. E Regiment 40

WARRANT ISSUED

4/6 1903.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

W. M. Kelly

Geo. W. Harrison, State Printer, Atlanta.

No date



# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears W. M. Kelly of Cherokee County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever since the 1837 day of 1837; that he is 62 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company E, of 40th Regiment of Vol. Infantry; that his physical condition is as follows: best table blindness

that his property consists of the following items:

of the value of                      Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1902. I have heretofore as a resident of Cherokee county been allowed a pension for the year 1901

Sworn to and subscribed before me, this the 9 day of July, 1902.

A. C. Cannon Ordinary.

STATE OF GEORGIA,

Cherokee County.

I, A. C. Cannon Ordinary of said County, do certify that I am well acquainted with W. M. Kelly the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 9 day of July, 1902.



A. C. Cannon Ordinary Cherokee County.

NOTE.—The blank spaces must be filled.  
NOTE.—Affidavit should not be attested before January 1st, 1902.

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears W. M. Kelly of Cherokee County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever since the 1838 day of 1838; that he is 65 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 2 years in Company E, of 40th Regiment of Vol. Infantry; that his physical condition is as follows: batonak of the head & shoulders

that his property consists of the following items: no return

of the value of                      Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of Cherokee county been allowed a pension for the year 1902

Sworn to and subscribed before me, this the 10 day of August, 1903.

A. C. Cannon Ordinary.

STATE OF GEORGIA,

Cherokee County.

I, W. M. Kelly Ordinary of said County, do certify that I am well acquainted with W. M. Kelly the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 10 day of August, 1903.



A. C. Cannon Ordinary Cherokee County.

NOTE.—The blank spaces must be filled.  
NOTE.—Affidavit should not be attested before January 1st, 1903.

State of Georgia

Chester County

H. N. Addington of said State & County  
having been presented & as a witness in sup-  
port of the applicant William Kelly for pension  
under Section 1254 Code & after being duly sworn  
true answers to make to the following questions do swear  
& answer as follows

He has no property to amount to any thing  
I have known him for several years he  
is old infirm & not able to make a liv-  
ing by manual labor.

He has been a miller but is now un-  
able to do any thing

He was supported during the years 1897 &  
1898 by his friends

I have known him for 10 or 15 years &  
he has not had any property since,  
I know him

I don't suppose he could earn one tenth  
of his support by his own labor as he is very

infirm

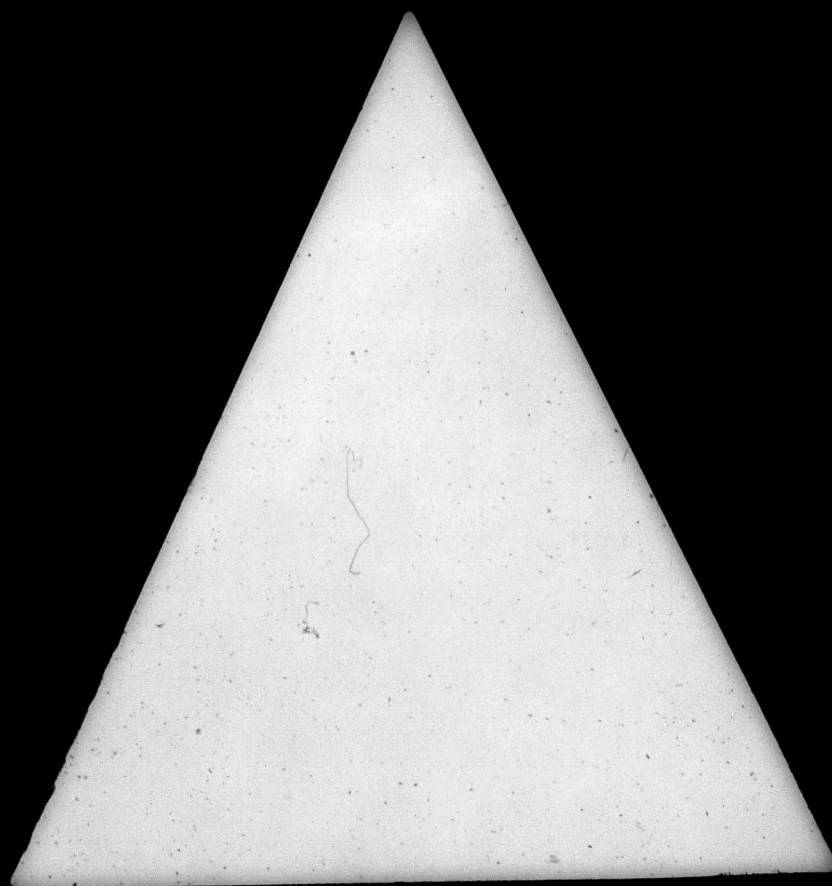
Sworn to and subscribed before  
me. April 10. 1899.

Allen C. Cassin Clerk.

H. N. Addington

Not Public Chester Co





POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, \_\_\_\_\_

of \_\_\_\_\_

do hereby authorize \_\_\_\_\_

to receive and receipt for the pension allowed, and request that he remit same to \_\_\_\_\_

at \_\_\_\_\_

day of \_\_\_\_\_

by \_\_\_\_\_

Witness my hand and seal, this \_\_\_\_\_

1901.

Executed in presence of \_\_\_\_\_

[L. S.]

No. \_\_\_\_\_

INDIGENT PENSION,

~~1901.~~

1902

Name Marion Kemp

County Cherokee

Co. 7th State Troop Reg't

State Troops

Approved \_\_\_\_\_ 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO \_\_\_\_\_

Ordinary will write Name of Applicant, Company and Regiment on back as indicated above.

Geo. W. Harrison, State Printer, Atlanta.

Kemp, Marion  
Cherokee Co.

6/17-1902



# POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, \_\_\_\_\_ of \_\_\_\_\_ hereby authorize \_\_\_\_\_ to receive and receipt for the pension allowed, and request that he remit same to \_\_\_\_\_ at \_\_\_\_\_ by \_\_\_\_\_

Witness my hand and seal, this \_\_\_\_\_ day of \_\_\_\_\_ 1901.

[L. S.]

Executed in presence of \_\_\_\_\_

INDIGENT PENSION,

1901.

Name *Marion Kemp*

County *Cherokee*

Co. *7th Cherokee Reg't*

Approved *John W. Lindsey* 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Ordinary will write Name of Applicant, Company and Regiment on back as indicated above.

Geo. W. Harrison, State Printer, Atlanta.

# Questions for Applicant.

STATE OF GEORGIA,

*Cherokee* County.

*Marion Kemp* of said State and County, desiring to avail himself of the Pension Act (Section 1254, Code), hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (give State, County and post office)  
*Marion Kemp, Cherokee County, Ga.*
2. How long and since when have you been a resident of this State? *Since Oct. 1864.*
3. When and where were you born? *Sumner, Ga. Oct. 1844.*
4. When and where and in what company and regiment did you enlist or serve? *6th Co. 1st Reg't of Sumners of 1863 comp. d. & 4th State Troops*
5. How long did you remain in such company and regiment? *Six months*
6. When and where was your company and regiment surrendered and discharged? *Discharged for six months & served the same term as discharged in Atlanta Ga. discharged in 1864.*
7. Were you present with your company and regiment when it was surrendered? *No*
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? *I was present*
9. How much can you earn (gross) per annum by your own exertions or labor? *Can earn anything*
10. What has been your occupation since 1865? *Business*
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? *Age & poverty*
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight?  
*Have been for four years failing very fast cannot do any labor*
13. What property, real or personal, or income, do you possess, and its gross value? *One cow, sheep and a small amount of household goods.*
14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899 and 1900 and what disposition, if any, by sale or gift, have you made of same? *None have stated*
15. In what County did you reside during those years, and what property did you then return for taxation?  
*Lived in Bartow Co. & Cherokee*
16. How were you supported during the years 1899 and 1900? *Have three daughters with me & they work as a farm & support me*
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *Have small amount of labor can't take cost.*
18. What was your employment during 1898 and 1899? What pay did you receive in each year?  
*Received me pay*
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? *Have wife & three daughters with me, no homestead*
20. Are you receiving any pension? If so, what amount and for what disability? *none*
21. Have you ever made an application for pension before? *none*
22. How many applications have you ever made and under what class? *none*

Sworn to and subscribed before me this the \_\_\_\_\_

day of *April* 1901

*Marion Kemp*

Applicant.

Ordinary,

County.

Every question must be answered.

## QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Cobb COUNTY.

J. W. Bennett, of said State and County, having been presented as a witness in support of the application of Marion Kemp for pension under Section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? J. W. Bennett  
Kennesaw Ga
  2. Are you acquainted with Marion Kemp, the applicant; if so, how long have you known him? 42 years
  3. Where does he reside, and how long and since when has he been a resident of this State? State of Georgia Cherokee County
  4. When, where and in what company and regiment did he enlist, and how do you know? Company A 7th Reg Ga State Troops enlisted as Sergeant at Dalton
  5. Were you a member of the same company and regiment? Yes
  6. How long did he perform regular military duty? Six months
  7. When and where was his command surrendered? Mustered out at Atlanta Ga in 1864
  8. Were you present when surrendered? Yes
  9. Was applicant present? Yes
  10. If he was not present, where was he? Present
- When did he leave his command? Mustered out For what cause? Mustered out  
By what authority he left? Enlisted for 6 months How do you know all of this?

Come under my personal knowledge

11. What property, effects or income has the applicant? (Give your means of knowledge.) none I am personally acquainted with the Applicant
12. What property, effects or income did the applicant possess in 1898, 1899, 1898, 1899 and 1900, and what disposition, if any, did he make of same? one mule one cow and calf said Applicant lost both of them
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? He has not
14. What is the applicant's occupation and physical condition? Farmer  
his Physical Condition is very Bad
15. Is the applicant unable to support himself by labor of any sort, if so, why? He is not
16. How was he supported during the years 1898, 1899 and 1900? By the help of his two daughts
17. What portion of his support for these three years was derived from his own labor or income? not more than one third
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? his is Physical Condition is very Bad and he is not able to do manual labor of any kind
19. What interest have you in the recovery of a pension by this applicant? none

Sworn to and subscribed before me, this 15th day of May 1902

John A. Kemp Ordinary. Witness.

I certify that J. W. Bennett is a bona fide resident of Cobb County of trustworthy character, whose statements are worthy of full faith and credit - John A. Kemp

## AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Cherokee COUNTY.

Personally came before me J. M. Bates and W. F. Coleman, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully Marion Kemp, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

We find that applicant is old and broken down being 75 years old. He has some trouble with his heart. His constitution is such that he can do but very little manual labor not sufficient to earn a support

They further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the 25 day of April 1902

J. M. Bates Ordinary.

J. M. Bates M.D.  
W. F. Coleman M.D.

## ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cherokee COUNTY.

I, J. A. Coleman Ordinary in and for said County, hereby certify that the applicant Marion Kemp resides in said County, and has been a bona fide resident of this State since the 1st day of Oct 1824, and that the witnesses, viz: J. M. Bates and W. F. Coleman

are of trustworthy character, and that their statements are entitled to full faith and credit.

I further certify that before answering the foregoing questions the applicant and each witness took the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witness before same was signed.

I further certify that the tax digests of Cherokee County show that applicant returned for taxation in his name in 1899 \$1.00 Dollars of property, and in 1900 \$1.00 Dollars of property.

In my opinion the foregoing claim is made in good faith.

Witness my hand and seal of office, this 16 day of April 1901.

J. A. Coleman Ordinary, of Cherokee County

### NOTE.

1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answer make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.



# POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County. }

I, Marion Kempf hereby authorize

Wm. A. Wright of Atlanta Ga.

to receive and receipt for the pension allowed and request that he remit same to

A. C. Barron Esq. at Benton Ga.

by check

Witness my hand and seal, this 2<sup>nd</sup> day of July 1903.

Marion Kempf [L. S.]

Executed in presence of

A. C. Barron Esq.

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County. }

Marion Kempf hereby authorize

W. J. Webb of

to receive and receipt for the pension allowed, and request that he remit same to

at

by

Witness my hand and seal, this 24 day of Jan 1907.

Marion Kempf [L. S.]

Executed in presence of

F. M. Blackwell

Kempf, Marion  
Cherokee Co

CODE SECTION 134.

(FOR THOSE ALREADY ENROLLED.)

No. 4359.

INDIGENT

SOLDIER'S PENSION

1902.

Name Marion Kempf

County Cherokee

Co. Ch. 4<sup>th</sup> Regiment State Troops

WARRANT ISSUED

2/16 1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

Ch. A. P.

Geo. W. Harrison, State Printer, Atlanta.

no date

Kempf, Marion  
Cherokee Co.

CODE SECTION 134.

(FOR THOSE ALREADY ENROLLED)

No. 6052

INDIGENT

SOLDIER'S PENSION

1907.

Name Marion Kempf

County Cherokee

Co. Ch. 4<sup>th</sup> Regiment 7

WARRANT ISSUED

1907.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

Ch. A. P.

Geo. W. Harrison, State Printer, Atlanta.

no date

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears Marion Kempf of Cherokee County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the \_\_\_\_\_ day of \_\_\_\_\_ 1877; that he is 44 years old and by occupation a Farmer that he enlisted in the military service of the Confederate States (or of the State of \_\_\_\_\_) during the war between the States, and served for the term of six months in Company A, of 7th Regiment of his State Troops; that his physical condition is as follows: Unable to do but very small amount of work

that his property consists of the following items Small amount of Personal Property

of the value of \$65 Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1900. I have heretofore as a resident of this claim was approved last year county been allowed a pension for the year 1 \_\_\_\_\_

Sworn to and subscribed before me, this the

2 day of May 1907.

A. C. Burren

Ordinary.

Marion Kempf

STATE OF GEORGIA,

Cherokee County.

I, A. C. Burren Ordinary of said County, do certify that I am well acquainted with Marion Kempf the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this \_\_\_\_\_

day of May 1907

A. C. Burren

Ordinary Cherokee

County.

NOTE.—The blank spaces must be filled.  
NOTE.—Affidavit should not be attested before January 1st, 1902.

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Cherokee County.

Personally appears Marion Kempf of Cherokee County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the \_\_\_\_\_ day of \_\_\_\_\_ 1877; that he is 76 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served for the term of 6 mos in Company A, of 7th Regiment of his State Troops; that his physical condition is as follows: Age and poverty

that his property consists of the following items: Nothing

of the value of Nothing Dollars. I am now earning by my labor, Nothing Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of Cherokee County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the

24 day of Jan 1907.

W. J. Webb

Ordinary.

State of Georgia,

Cherokee County.

I, W. J. Webb Ordinary of said County,

do certify that I am well acquainted with Marion Kempf the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal this \_\_\_\_\_

day of Jan 1907

W. J. Webb

Ordinary Cherokee County.

NOTE.—The blank spaces must be filled.  
NOTE.—Affidavit should not be attested before January 1st, 1907.



# POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, Marion Kemp hereby authorize  
Mr. A. Wright of Atlanta Ga  
to receive and receipt for the pension allowed and request that he remit same to  
J. C. Kemp only at Canton Ga.  
by check

Witness my hand and seal, this 4<sup>th</sup> day of July, 1904.

Marion Kemp [L. S.]

Executed in presence of

J. C. Kemp only

(FOR THOSE ALREADY ENROLLED.)

CODE SECTION 1254.

No. 5031

INDIGENT

**SOLDIER'S PENSION  
1904.**

Name Marion Kemp  
County Cherokee  
Co. A. Regiment 1<sup>st</sup>  
La State Troops  
WARRANT ISSUED  
7/8 1904.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO  
City  
Geo. W. Harrison, State Printer, Atlanta.

no date

Kemp, Marion  
Cherokee Co.

(FOR THOSE ALREADY ENROLLED.)

CODE SECTION 1254.

No. 5634

INDIGENT

**SOLDIER'S PENSION  
1905.**

Name Marion Kemp  
County Cherokee  
Co. A. Regiment 7

WARRANT ISSUED  
FEB 23 1905.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO  
City  
Geo. W. Harrison, State Printer, Atlanta.

no date

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, Marion Kemp hereby authorize  
W. J. Webb of Cherokee  
to receive and receipt for the pension allowed, and request that he remit same to  
me at A. C. Worth Co  
by \_\_\_\_\_

Witness my hand and seal, this 14<sup>th</sup> day of January, 1905.

Marion Kemp [L. S.]

Executed in the presence of

J. D. R.



# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears Marion Kemp of Cherokee County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 1827; that he is 76 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 6 months in Company 1, of 4th Regiment of State Troops; that his physical condition is as follows:

that his property consists of the following items: one cow & household goods

of the value of \$5.00 Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of Cherokee County been allowed a pension for the year 1903.

Sworn to and subscribed before me, this the

4 day of May 1904.

W. C. Carr

Ordinary.

STATE OF GEORGIA,

Cherokee County.

I, W. C. Carr Ordinary of said County, do certify that I am well acquainted with Marion Kemp the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal, this 4 day of May 1904.

W. C. Carr

Ordinary Cherokee County.



NOTE.—The blank spaces must be filled.

NOTE.—Affidavit should not be attested before January 1st, 1904.

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears Marion Kemp of Cherokee County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 1827; that he is 77 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 6 months in Company 1, of 7th Regiment of State Troops; that his physical condition is as follows: Age and poverty

that his property consists of the following items: nothing

of the value of nothing Dollars. I am now earning, by my labor, nothing Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Cherokee County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the

14 day of January 1905.

M. J. Webb

Ordinary.

STATE OF GEORGIA,

Cherokee County.

I, M. J. Webb Ordinary of said County, do certify that I am well acquainted with Marion Kemp the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal, this 14 day of January 1905.

M. J. Webb Ordinary Cherokee County.



NOTE.—The blank spaces must be filled.

NOTE.—Affidavit should not be attested before January 1st, 1905.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY. }

I, Marion Kemp hereby authorize

M. J. Webb of Canton Ga

to receive and receipt for the pension allowed, and request that he remit same to

\_\_\_\_\_ at \_\_\_\_\_

by \_\_\_\_\_

WITNESS my hand and seal, this 5 day of Jan 1906.

Marion Kemp [L. S.]  
mark

Executed in the presence of

F. C. Webb

Kemp Marion  
Cherokee County

Class Service 1254.  
(FOR THOSE ALREADY ENROLLED.)

No. 2943

INDIGENT  
SOLDIER'S PENSION  
1906.

Name Marion Kemp  
County Cherokee  
Co. A Regiment 7<sup>th</sup> Ga

WARRANT ISSUED  
FEB 1 1906.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO  
Webb

The Franklin Printing and Publishing Co., 201 N. Washington, Wash.

*no date*

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Cherokee County.

Personally appears Marion Kemp of Cherokee County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the \_\_\_\_\_ day of \_\_\_\_\_ 1828; that he is 78 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served for the term of 6 months in Company A, of 7th Regiment of Ga ~~not~~ State Troops, that his physical condition is as follows: Age and poverty

that his property consists of the following items: none

of the value of none Dollars. I am now earning by my labor, nothing Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1906. I have heretofore, as a resident of Cherokee County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the 2 day of Jan 1906. W. J. Mob Ordinary.

Marion Kemp  
Mar 12

State of Georgia,

Cherokee County.

I, W. J. Mob Ordinary of said County, do certify that I am well acquainted with Marion Kemp the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal, this 6 day of January 1906.

W. J. Mob Ordinary Cherokee County.



NOTE.—The blank spaces must be filled.  
NOTE.—Affidavit should not be attested before January 1st, 1906.



Given under my official signature and seal, this 5<sup>th</sup>  
day of January 1908.

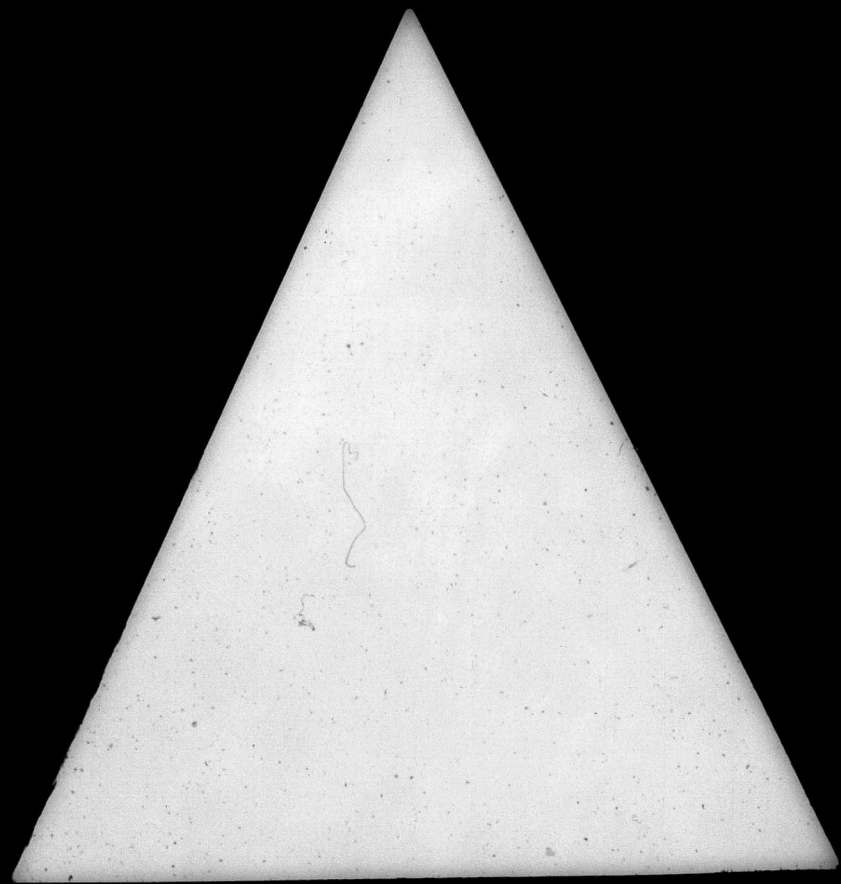


Ordinary Cherokee County.

NOTE.—The blank spaces must be filled.  
NOTE.—Affidavit should not be attested before January 1st, 1906.

Georgia Cherokee County  
this is to certify that I am personally  
acquainted with the Kemp applicant  
fore pension have lived near since  
1898 and know that the answers  
to the 11=12=13=14=15=16=17=18= and  
19 questions True and I further know  
that he is not able to support  
himself by his own labor and  
has no other means of support only  
that set forth in his Paper  
this the 9<sup>th</sup> day of June 1902

G. L. Smith J P  
of the 814<sup>th</sup> Dist & 16 of Cherokee County  
Georgia



# Ordinary's Certificate

STATE OF GEORGIA,

COUNTY

I, Q. M. Lindsey Ordinary of said County, do certify that I know Mrs. N. A. Kemp the applicant for pension. She

is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th November 1908; that I also know Q. M. Lindsey the witnesses who swear to the service of husband; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they both are truthful, trustworthy, and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 25 day of Aug 1917.  
(SEAL) Q. M. Lindsey Ordinary,  
Clarke County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "I, the Ordinary, do solemnly swear that the answers to the questions asked you shall give will be the truth. So help you God."  
2. Additional affidavits may be attached if blank spaces are insufficient.  
3. Affidavits must be made prior to January 1st, 1911, are entitled.  
4. All affidavits must be made before the Ordinary at the residence of the person to be sworn and certified by said Ordinary.  
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

## Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County Clarke  
Name Mrs. N. A. Kemp  
Widow of Henry M. Kemp  
Company Co.  
Regiment Phillips Legion Comd.  
Approved \_\_\_\_\_

E. R. O.  
1936

J. W. LINDSEY,  
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-20-1919



# Ordinary's Certificate

STATE OF GEORGIA,

County, }  
I, J. M. Seitzfield Ordinary of said County, do certify  
that I know Mrs. N. A. Kemp the applicant for pension. She  
is the person she represents herself to be and she is a bona fide continuing resident citizen of said County  
and was on the 4th November 1908; that I also know J. A. Sew  
the witness who swears to the service of husband; that both of them are now residents of said County and  
were duly sworn by me before signing the foregoing affidavits and that they both are truthful, trust-  
worthy, and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 25 day of Aug 1912.  
(SEAL) J. M. Seitzfield Ordinary,  
Cherokee County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words:  
"You do solemnly swear that you will true answers make to each of the questions asked you and the evidence  
you shall give will be the truth. So help you God."  
2. Additional affidavits may be attached if blank spaces are insufficient.  
3. Only widows who married prior to January 1st, 1881, are entitled.  
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by  
such Ordinary.  
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general  
reputation.

## Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County Cherokee  
Name Mrs. N. A. Kemp  
Widow of Henry M. Kemp  
Company L  
Regiment Phillips Legion Comd  
Approved \_\_\_\_\_

J. W. LINDSEY,  
Commissioner of Pensions.  
Evd Printing Co., State Printers, Atlanta.

E. P. O.  
1936

10-20-1919

# Application for Pension by a Widow Under Act of 1910 As Amended by Act of 1919

## Questions for Applicant

STATE OF GEORGIA,

County, }

Personally before me comes Mrs. N. A. Kemp of said State and County,  
and, after being duly sworn, says that she desires to apply for a pension allowed under the Act  
of 1910, as amended by Act of 1919, and submit testimony to make out the same, true answers makes to  
the following questions to-wit:

- What is your name, and where do you reside? N. A. Kemp, Woodstock, Ga.
- How long and since when have you been a continuing resident of the State of Georgia? All my life
- When, where and to whom were you married? Aug 1st 1867, Woodstock, Georgia, Henry M. Kemp
- Have you married since the death of first and soldier husband? No
- When, where and in what Company and Regiment did your husband enlist as a soldier in Con-  
federate Army or Georgia Militia? (State the arms and class of Service) Feb 1862 -  
at Woodstock Ga. Co. L. Phillips Legion Cavalry
- When and where did the commands of your husband surrender or discharge from the army? May 1865 - Johnston N. C.
- Was your husband personally present at the time of the surrender or discharge of this command? Yes
- If he was not present state clearly where he was?
- Where was his command when he left?
- For what cause did he leave his command?
- By whose authority did he leave his command?
- For how long was he granted leave of absence?
- What was his physical condition when he left his command?
- What effort did he make to return to his command?
- In what way was he prevented from going back to Command?
- Was he captured by the enemy at any time?
- If so, when and where captured and where held as a prisoner, and when and for what cause released?
- When and where did your first husband die?
- Were you residing together when he died?
- If not, how long had you resided apart?
- Are you now a widow?
- Have you or your husband heretofore been paid a pension by the State? No

If so, when and for what cause were you or your husband placed on the roll?

Sworn to and subscribed before me this the

25 day of Aug 1912

J. M. Seitzfield Ordinary

of Cherokee County.

(SEAL)

Mrs. N. A. Kemp

# Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA,

CHEROKEE COUNTY.

Personally before me comes J. A. Scott who, after being duly sworn, true answers to make to the following questions, answers as follows:

1. What is your name and where do you reside? J. A. Scott - Hamilton 42 Cherokee Co. Ga.
2. How long and since when have you known Henry M. Kemp applicant? Eighty years
3. How long and since when has she continuously resided in this State? (Give date.) Since ever since I have known her: 70 years
4. When and to whom was she married? Henry M. Kemp How do you know? He lived with me and she was his wife
5. How long and since when did you know Henry M. Kemp her husband? Eighty years
6. When and where did Henry M. Kemp the husband of applicant, die? Anniston, Alabama - Dec. 7, 1908
7. Were the applicant and her husband living together as husband and wife at the date of his death? Yes
8. If not, how long did they live apart before his death? None
9. When, where and in what Company and Regiment did Henry M. Kemp enlist? Feb. 1862 - Cherokee Co. Ga. Co. B. Phillips Legion
10. Were you a member of the same Company? Yes
11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? From 1862 till April 1865
12. When and where did his Command surrender, and was discharged? April 1865 - Anderson S. C.
13. Were you personally present when it was surrendered? Yes If not, where were you and how came you there?
14. Was the husband of applicant personally present at surrender? Yes If not where was he? When, where and for what cause did he leave Command? (Give date.) By whose authority did he leave his Command? And how long was he granted leave? How do you know all this?
15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command?
16. What effort did he make to return to his Command and how do you know, this? Of your own knowledge or how?

Sworn to and subscribed before me this the

25<sup>th</sup> day of Aug. 1907.

J. M. Sledge Ordinary of Cherokee County.

(SEAL)

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? -----

Sworn to and subscribed before me this the

25<sup>th</sup> day of Aug. 1927

J. M. Satterfield Ordinary  
of Cherokee County.

(SEAL)

certified copy of the marriage certificate of Henry J. Kemp and  
Nancy Adeline Evans

Georgia, Cherokee County

I hereby certify that Henry J. Kemp and Nancy Adeline Evans  
were joined in matrimony by me on the 25th day of Aug. 1927.

Amos Hasleton, M.

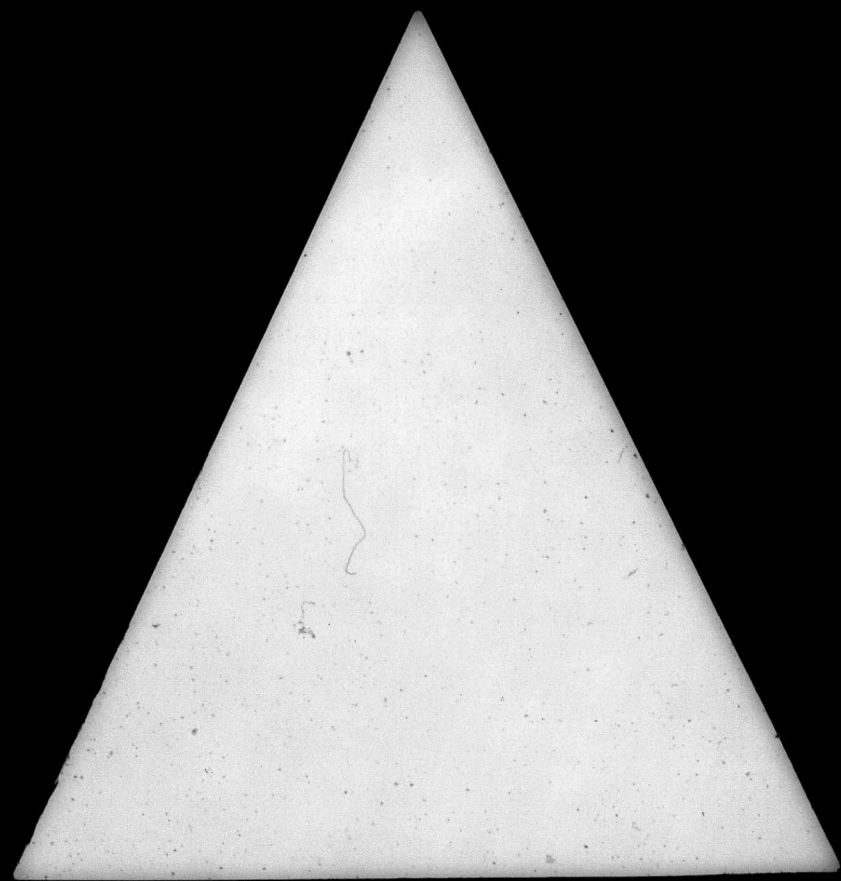
Recorded Dec. 7th 1927. James Gordon, Ord.

Office of Ordinary Cherokee County, Ga. Oct. 20th 1919.

I, J. M. Satterfield, Ordinary of the Clerk Court Ordinary,  
hereby certify that the within and foregoing is a true and correct  
copy of the marriage certificate of the above named parties as the  
same appears of record in this office.

J. M. Satterfield  
Ordinary & Clerk Court Ordinary.





Kemp, Sarah  
Cherokee County

ACT DEC. 18, 1901.

OK for 1908  
No.

## WIDOW'S PENSION,

1907

Mrs. Sarah Kemp

County of Cherokee

Widow of Marion Kemp

Warrant issued ..... 190 .....

and handed to .....

J. W. LINDSEY,  
Commissioner of Pensions.

Geo. W. Harrison, State Printer, Atlanta, Ga.

60 2011

## STATE OF GEORGIA, COUNTY: } POWER OF ATTORNEY.

I, \_\_\_\_\_ hereby authorize

to receive and receipt for the pension allowed and request that he remit same to me

Witness my hand and seal, this \_\_\_\_\_ day of \_\_\_\_\_ 190 \_\_\_\_\_

Executed in presence of

[Seal]

# POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY. }

I, \_\_\_\_\_ hereby authorize

of \_\_\_\_\_

to receive and receipt for the pension allowed and request that he remit same to \_\_\_\_\_

at \_\_\_\_\_

by \_\_\_\_\_

Witness my hand and seal, this \_\_\_\_\_ day of \_\_\_\_\_ 190 \_\_\_\_\_

[SEAL]

Executed in presence of \_\_\_\_\_

ACT DEC. 16, 1901.

OK for 1908  
No.

WIDOW'S PENSION,

1907

Mrs. Sarah Kemp

County of Cherokee

Widow of Marion Kemp

Warrant issued \_\_\_\_\_ 190 \_\_\_\_\_

and handed to \_\_\_\_\_

J. W. LINDSEY,

Commissioner of Pensions.

Geo. W. Harrison, State Printer, Albany, Ga.

1130 107

# WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

Personally came Mrs. Sarah Kemp

COUNTY OF Cherokee }

who says on oath she is the

widow of Marion Kemp

to whom, in the County of

Cherokee

State of Georgia

, she was married on the

6<sup>th</sup> day of December 1857, that she remained his wife up to the 9<sup>th</sup>

day of July 1907, at which time he died, and that she has not since married.

At the time of his death he was a resident of Cherokee County, in said State of

Georgia, and was on the Indigent pension roll of the State of Georgia, having been allowed

a pension of \$6.00 per annum on account of being a soldier in Company A.

7<sup>th</sup> Regiment, Ga. Volunteers or State Georgia

What affliction have you and how does it affect you? Paralysis renders

me unable to do any labor

What have you been doing to earn a support since 1st of January, 1900? nothing

What property or effects had you on 1st January, 1900? none except

a small amount of household

What have you acquired since, and what income have you now? nothing

What disposition have you made of any property since 1st January, 1900, and at what price and for what

purpose? none

Deponent further says that she is now a resident of Cherokee County, and has contin-

uously resided in the State of Georgia since the 18<sup>th</sup> day of her life

She applies for the pension provided by Act of the General Assembly, approved December 18, 1901.

Sworn to and subscribed before me, this 26<sup>th</sup> day of August 1907

Sarah Kemp

Ordinary of Cherokee County

W. J. Mott

Notar.—All blank spaces must be filled before signing.



# **AFFIDAVIT FOR THREE WITNESSES.**

STATE OF GEORGIA, } Personally came W. M. Hunt  
COUNTY OF Cherokee } and

known to me to be reputable and truthful person, who says on oath that from his own personal knowledge Mrs. Sarah Kemp who made the foregoing affidavit, is the widow of Marion Kemp who died in Cherokee County and State of Georgia on the 9 day of July 1907, and that she has not since married; that she became his wife on the 6 day of December 1837, and so remained up to the time of his death, and that she has resided in this State continuously since the all her life day of all her life 18  
With what affliction does she suffer? Paralysis

What property or income had she on 1st January, 1900? none except her household

What has she in her possession and control now? nothing

How was she supported in 1900 and 1901? her husband was alive then and drew a pension

I have no personal interest in the pension asked for W. M. Hunt

Sworn to and subscribed before me, this 26 day of August 1907  
W. J. Webb  
Ordinary Cherokee County, Georgia.

## **PHYSICIANS' AFFIDAVIT.**

STATE OF GEORGIA, } Personally came before me  
COUNTY OF Cherokee } J. A. Hughes M.D.

and J. M. Davis M.D., both of whom are known to me to be reputable physicians, who say on oath that they personally know Sarah Kemp mentioned in the foregoing affidavit, that she is permanently afflicted with (state disease and how it prevents her earning a support) by Paralysis which renders her unable to do unaided labor

Sworn to and subscribed before me, this 26 day of August 1907  
W. J. Webb  
Ordinary of Cherokee County.

## **CERTIFICATE OF ORDINARY OF THE COUNTY OF APPLICANT'S RESIDENCE.**

STATE OF GEORGIA, } I, W. J. Webb Ordinary,  
COUNTY OF Cherokee } in and for said County of Cherokee

State of Georgia, hereby certify that I am acquainted with Mrs. Sarah Kemp the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to me by reputable witnesses) that she resides in this County, and that she has resided in the State of Georgia continuously since the all her life day of all her life 18, and has not lived out of the State since that date. I also certify that the witnesses, to-wit: W. M. Hunt

and W. J. Webb whose testimony she presents to sustain her claim, are known to me to be truthful witnesses, entitled to full faith and credit as such, and that the full text of the affidavit was read to and understood by them before same was signed. I am fully satisfied that this claim is made in good faith, and I have caused the applicant and the witnesses to read or hear read the proofs they sign.

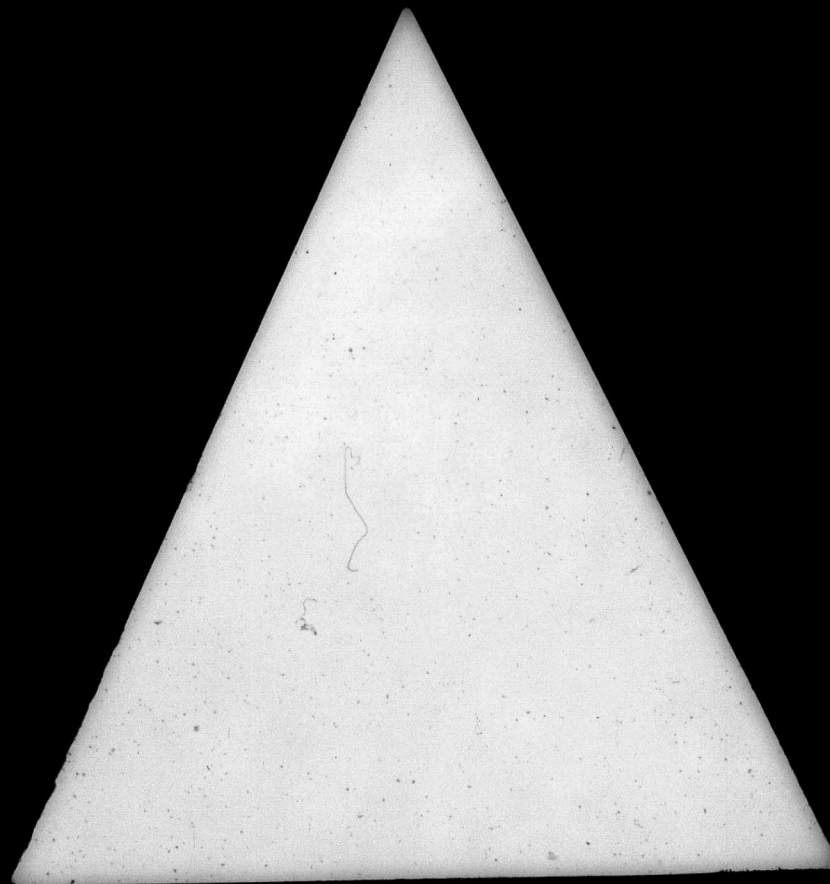
In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the 26 day of August 1907  
W. J. Webb  
Ordinary.

{ SEAL }

## **NOTES.**

The Pension is only payable to those widows whose husbands were on Pension Roll at the time of death. The marriage must have existed at the time husband was a soldier, and the widow must have remained unmarried since the death of such husband. Date of marriage is essential and must be submitted. Proofs by one witness and two physicians will be accepted when it is shown that the same cannot be furnished, but in all cases the best proof accessible will be required, and it is incumbent on the applicant to make out a clear case covering the above points. Affidavits must be made in presence of the Ordinary.

Ordinary of Cherokee County.



# Ordinary's Certificate

STATE OF GEORGIA,

Cherokee COUNTY.

I, M. M. Bellfield Ordinary of said County, do certify that I know Mrs. Elizabeth Kelly the applicant for pension. She

is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th November 1908; that I also know Mrs. Elizabeth Kelly

the witness who swears to the service of husband; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they both are truthful, trustworthy, and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 12 day of Aug 1912

(SEAL)

M. M. Bellfield Ordinary,  
County.

NOTES: 1. Before any questions are answered the Ordinary shall read applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God." 2. Additional statements may be attached if blank spaces are insufficient. 3. Affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary. 4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary. 5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

## Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County Cherokee  
Name Elizabeth Kelly  
Widow of James H. Kelly  
Company Proffords Brigade  
Regiment Johnsons  
Approved \_\_\_\_\_

J. W. LINDSEY,  
Commissioner of Pensions.

Dryd Printing Co., State Printers, Atlanta.

10-30-1920

10-20-1919

Pension off  
1/14-1920  
Desapproved  
for the reason  
applicant failed  
to state any effort  
made of her  
in any form  
want in value  
husband enlisted  
in service  
by voluntary  
effort for Pension  
based on credit  
a statement  
J. W. Lindsey  
Comm of Pension



# Ordinary's Certificate

STATE OF GEORGIA,

Cherokee COUNTY.

I, J. M. Sledge Ordinary of said County, do certify that I know Mrs Elizabeth Kelly the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th November 1908; that I also know W. T. Chandler the witness who swears to the service of husband; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they both are truthful, trustworthy, and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 12 day of Aug 1922.  
(SEAL) J. M. Sledge Ordinary,  
County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."  
2. Additional affidavits may be attached if blank spaces are insufficient.  
3. Only widows who married prior to January 1st, 1881, are entitled.  
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.  
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

## Widow's Pension

Under Act 1910—As Amended by Act of 1919.

County Cherokee  
Name Elizabeth Kelly  
Widow of James H. Kelly  
Company 10th Georgia Brigade  
Regiment Johnson's  
Approved \_\_\_\_\_

J. W. LINDSEY,  
Commissioner of Pensions,  
Bent Printing Co. Sales Printers, Atlanta.  
10-30-1920  
10-20-1922

# Application for Pension by a Widow Under Act of 1910 As Amended by Act of 1919

## Questions for Applicant

STATE OF GEORGIA,

Cherokee COUNTY.

Personally before me comes Mrs Elizabeth Kelly of said State and County, and, after being duly sworn, says that she desires to apply for a pension allowed under the Act of 1910, as amended by Act of 1919, and submit testimony to make out the same, true answers makes to the following questions to-wit:

1. What is your name, and where do you reside? Mrs Elizabeth Kelly, Canton Ga
2. How long and since when have you been a continuing resident of the State of Georgia? All my life
3. When, where and to whom were you married? Nov. 5" 1874; Canton Ga  
James H. Kelly
- a. Have you married since the death of first and soldier husband? No
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service) Aug. 1864; Jasper - Pickens County Ga. 10th Georgia Brigade Johnson's Reg.
5. When and where did the commands of your husband surrender or discharge from the army? May 5" 1865 Kingston Ga
6. Was your husband personally present at the time of the surrender or discharge of this command? No
7. If he was not present state clearly where he was? \_\_\_\_\_
8. Where was his command when he left? \_\_\_\_\_
- a. For what cause did he leave his command? \_\_\_\_\_
- b. By whose authority did he leave his command? \_\_\_\_\_
- c. For how long was he granted leave of absence? \_\_\_\_\_
- d. What was his physical condition when he left his command? \_\_\_\_\_
- e. What effort did he make to return to his command? \_\_\_\_\_
- f. In what way was he prevented from going back to Command \_\_\_\_\_
- h. Was he captured by the enemy at any time? \_\_\_\_\_
- i. If so, when and where captured and where held as a prisoner, and when and for what cause released? \_\_\_\_\_
- j. When and where did your first husband die? Nov. 1872 Canton Ga
- k. Were you residing together when he died? No
- l. If not, how long had you resided apart? \_\_\_\_\_
- m. Are you now a widow? Yes
9. Have you or your husband heretofore been paid a pension by the State? No

If so, when and for what cause were you or your husband placed on the roll? \_\_\_\_\_

Sworn to and subscribed before me this the

12 day of Aug 1922.  
J. M. Sledge Ordinary  
of Cherokee County.

(SEAL)

Mrs Elizabeth Kelly

Elizabeth Kelly  
Cherokee Co. Ga  
11/4 1920

Pension Office  
11/4 1920  
Desappened  
for the reason  
Applicant failed  
to state any other  
source of income  
in any manner  
and in value  
husband's estate  
was derived  
by voluntary  
affidavit  
present on  
a statement  
of the  
Commissioner

# Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA,

Cherokee COUNTY.

Personally before me comes W. F. Chamberlain who, after being duly sworn, true answers to make to the following questions, answers as follows:

1. What is your name and where do you reside? W. F. Chamberlain
2. How long and since when have you known James H. Kelly applicant? all my life 69 yrs
3. How long and since when has she continuously resided in this State? (Give date.) all her life 65 years
4. When and to whom was she married? James H. Kelly How do you know? James H. Kelly
5. How long and since when did you know James H. Kelly her husband? since 1864
6. When and where did James H. Kelly the husband of applicant, die? Cherokee Nov. 15, 1887
7. Were the applicant and her husband living together as husband and wife at the date of his death? Yes
8. If not, how long did they live apart before his death? 7 yrs
9. When, where and in what Company and Regiment did James H. Kelly enlist? Jan 7, 1864 - 28th Co. 8th Regt.
10. Were you a member of the same Company? Yes
11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? from Nov. 1864 till May 24, 1865
12. When and where did his Command surrender, and was discharged? May 4, 1865, Hampton Va.
13. Were you personally present when it was surrendered? Yes If not, where were you and how came you there?
14. Was the husband of applicant personally present at surrender? Yes If not where was he? When, where and for what cause did he leave Command? (Give date.) By whose authority did he leave his Command? And how long was he granted leave? How do you know all this?
15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command?
16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how?

Sworn to and subscribed before me this the

12th day of Aug. 1922.

J. M. Gallagher Ordinary  
of Cherokee County.

(SEAL)



# Ordinary's Certificate

STATE OF GEORGIA,

Cherokee COUNTY.

I, Jacob Mussey Ordinary of said County, do certify that I know Mrs. E. J. Kelley the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th November 1908; that I also know G. W. Chaullee the witness who swears to the service of husband; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they both are truthful, trustworthy, and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 17 day of Oct 1921

(SEAL)

Jacob Mussey Ordinary,  
Cherokee County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."  
2. Additional affidavits may be attached if blank spaces are insufficient.  
3. Only widows who married prior to January 1st, 1881, are entitled.  
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.  
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

## Application for Pension by a Widow Under Act of 1910 As Amended by Act of 1919

### Questions for Applicant

STATE OF GEORGIA,

Cherokee COUNTY.

Personally before me comes Mrs. E. J. Kelley of said State and County, and, after being duly sworn, says that she desires to apply for a pension allowed under the Act of 1910, as amended by Act of 1919, and submit testimony to make out the same, true answers makes to the following questions to-wit:

1. What is your name, and where do you reside? Mrs. E. J. Kelley
2. How long and since when have you been a continuing resident of the State of Georgia? all my life
3. When, where and to whom were you married? Geo. W. Kelley Canton Ga 1876
- a. Have you married since the death of first and soldier husband? No
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) Co. B Johnson's Reg
5. When and where did the commands of your husband surrender or discharge from the army? Kingston Ga May 1865
6. Was your husband personally present at the time of the surrender or discharge of this command? Yes
7. If he was not present state clearly where he was? No
8. Where was his command when he left?
- a. For what cause did he leave his command?
- b. By whose authority did he leave his command?
- c. For how long was he granted leave of absence?
- c. What was his physical condition when he left his command?
- f. What effort did he make to return to his command?
- g. In what way was he prevented from going back to Command
- h. Was he captured by the enemy at any time?
- i. If so, when and where captured and where held as a prisoner, and when and for what cause released?
- j. When and where did your first husband die? 1899 at Canton Ga
- k. Were you residing together when he died? Yes
- l. If not, how long had you resided apart?
- m. Are you now a widow? Yes
9. Have you or your husband heretofore been paid a pension by the State? No

Sworn to and subscribed before me this the

17 day of Oct 1921

Jacob Mussey Ordinary  
of Cherokee County.

(SEAL)

*Handwritten notes and stamps:*  
 1920  
 No Applicant  
 KILBY, E. J. (Mrs.)  
 19 Widows Pension  
 Under Act 1910 - Renewed by Act of 1919  
 County Cherokee  
 Name Mrs. E. J. Kelley  
 Widow of James H. Kelley  
 County Cherokee  
 Regiment Johnson's Reg  
 Approved John W. Linder  
 Commissioner of Pensions  
 11-20-21  
 Does not name  
 command & what Johnson's  
 Co.  
 J. W. LINDER,  
 Commissioner of Pensions  
 1876  
 10/20-1921  
 Pension office  
 11/26-1921  
 Disapproved  
 for the reason  
 that no claim  
 for Pension  
 for service in  
 Co. B Johnson's  
 Reg.



Questions for Witnesses

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA,

Fulton

COUNTY, GEORGIA

Personally before me comes Geo W. Chumblee who, after being duly sworn, true answers to the following questions, answers as follows:

1. What is your name and where do you reside? Geo W. Chumblee

130 E. 1st St. Atlanta, Ga

2. How long and since when have you known Mrs E. J. Kelly applicant?

all her life

3. How long and since when has she continuously resided in this State? (Give date.)

all her life

4. When and to whom was she married? John H. Kelly, Canton, Ga 1896 How do you know? lived by them

5. How long and since when did you know John H. Kelly her husband? Since Aug 1896

6. When and where did John H. Kelly the husband of applicant, die? Near Canton, Ga - 1899

7. Were the applicant and her husband living together as husband and wife at the date of his death?

Yes

8. If not, how long did they live apart before his death?

Were they divorced? No

9. When, where and in what Company and Regiment did John H. Kelly enlist? Aug 1894 - Canton, Ga Co B. Johnson Reg

10. Were you a member of the same Company? No

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? Until Surrender

12. When and where did his Command surrender, and was discharged? Kingston, Ga April 1865

13. Were you personally present when it was surrendered? No If not, where were you? Detail Service and how came you there? Officer

14. Was the husband of applicant personally present at surrender? Yes If not where was he? When, where and for what cause did he leave Command? (Give date.) By whose authority did he leave his Command? And how long was he granted leave?

information given me by my brother W. B. Chumblee who was with him

15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command?

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how?

Sworn to and subscribed before me this the

4 day of Nov 1911  
Arthur R. Mayhew Ordinary  
of Fulton County.  
(SEAL)

G. W. Chumblee

Cherokee  
Jno. W. Collins  
Commissioner of Pensions  
Atlanta, Ga.

State Capital,  
September 15th, 1920.

Hon. Jno. W. Collins,  
Canton, Georgia.

My dear Friend:

I am in receipt of your letter of the 15th instant, making inquiry as to why the application for pension made by Mrs. Elizabeth Kilby was disapproved.

The law requires that the application and the testimony of the witness thereto must show dates of enlistment and discharge, and that at least six months of actual military service must have been made by the soldier. Mrs. Kilby's application gives the date of her husband's enlistment as August 1864. Her witness, Mr. W. F. Chamlee gives the date of enlistment as November 1864, which leaves less than six months to be served before the end of the war, the war having ended, officially, April 26th, 1865.

The company and regiment in which Mr. Kilby served is not given. To say, as is stated in the application, that Mr. Kilby served in Wofford's Brigade, Johnson's Regiment, is entirely too general.

Mr. Chamlee himself made just such a general statement of his service when he applied for a pension last fall. He afterward amended his application and proof by an affidavit setting out that he enlisted Sept. 12th, 1864, under Captain B. F. McCollum in Cherokee County, in Co. "A", and was later transferred to Co. "F", under Captain Tom Wofford, when several companies were consolidated as the 12th Ga. Regiment of Cavalry under Col. Jeff Johnston, Lieut. Col. B. F. McCollum and Major Robert Graham, and that he served in said 12th Ga. Cavalry until the end of the war. Mr. Geo. W. Evans made an affidavit also reciting the foregoing facts and that he knew of his own knowledge that Mr. Chamlee served from the time of his enlistment until the end of the war, and was duly paroled at Kingston, Ga.

Mr. Chamlee, Mrs. Kilby's witness, was, evidently, with Mr. Kilby through the period of his service and should be able to make the necessary supplementary proof.

I suggest that you prepare an affidavit for Mrs. Kilby to swear to before the Ordinary of Cherokee County, setting forth the dates of Mr. Kilby's enlistment and discharge, and giving the details of his command as was given in the case of Mr. Chamlee, and that you also prepare an affidavit for Mr. Chamlee to sign before the Ordinary giving the information contained in the affidavit you will make for Mrs. Kilby herself to sign. If you will make these affidavits sufficiently detailed and make them show as much as six months' service on the part of Mr. Kilby, it seems that the papers should be complete.

If Mr. Kilby did not serve as much as six months in the Army prior to April 26th 1865, then she would come in for a pension under the law passed by the last General Assembly, provided her husband's command was sufficiently described as suggested, but

Jno. W. Collins  
ATTORNEY AT LAW

Canton, Georgia Sept. 13th, 1920.

Hon. W. Sam Askew,  
Atlanta, Georgia.

My dear friend:-

Mrs. Elizabeth Kilby, widow of James H. Kilby, exhibited a letter to me the other day from the Pension Commissioner informing her that her application for pension had been disapproved for the reason that the length of service did not appear.

Mrs. Kilby is a near neighbor of mine and of course I am anxious to do anything for that I can. If you will be so kind as to return her application to me I will seek to have the proper information supplied at once. She informs me that Mr. Frank Chamlee of this place is her only witness and that he and her husband served in the same company during the Civil War. If you have any suggestions to offer in this connection I shall be very glad to have them.

Hope you are getting along nicely and enjoying the very best of health. I am,

Yours very truly

Jno. W. Collins



*Cherokee*  
Jno. W. Lindsey  
Commissioner of Pensions  
Atlanta, Ga.

State Capitol,  
September 15th, 1920.

Hon. Jno. W. Collins,  
Canton, Georgia.

My dear Friend:

I am in receipt of your letter of the 15th instant, making inquiry as to why the application for pension made by Mrs. Eliza-beth Kilby was disapproved.

The law requires that the application and the testimony of the witness thereto must show dates of enlistment and discharge, and that at least six months of actual military service must have been made by the soldier. Mrs. Kilby's application gives the date of her husband's enlistment as August 1864. Her witness, Mr. W. F. Chamlee gives the date of enlistment as November 1864, which leaves less than six months to be served before the end of the war, the war having ended, officially, April 26th, 1865.

The company and regiment in which Mr. Kilby served is not given. To say, as is stated in the application, that Mr. Kilby served in Wofford's Brigade, Johnson's Regiment, is entirely too general.

Mr. Chamlee himself made just such a general statement of his service when he applied for a pension last fall. He afterward amended his application and proof by an affidavit setting out that he enlisted Sept. 18th, 1864, under Captain B. F. McCollum in Cherokee County, in Co. "A", and was later transferred to Co. "B", under Captain Tom Wofford, when several companies were consolidated as the 12th Ga. Regiment of Cavalry under Col. Jeff Johnston, Lieut. Col. B. F. McCollum and Major Robert Graham, and that he served in said 12th Ga. Cavalry until the end of the War. Mr. Geo. W. Evans made an affidavit also reciting the foregoing facts and that he knew of his own knowledge that Mr. Chamlee served from the time of his enlistment until the end of the War, and was duly paroled at Kingston, Ga.

Mr. Chamlee, Mrs. Kilby's witness, was, evidently, with Mr. Kilby through the period of his service and should be able to make the necessary supplementary proof.

I suggest that you prepare an affidavit for Mrs. Kilby to swear to before the Ordinary of Cherokee County, setting forth the dates of Mr. Kilby's enlistment and discharge, and giving the details of his command as was given in the case of Mr. Chamlee, and that you also prepare an affidavit for Mr. Chamlee to sign before the Ordinary giving the information contained in the affidavit you will make for Mrs. Kilby herself to sign. If you will make these affidavits sufficiently detailed and make them show as much as six months' service on the part of Mr. Kilby, it seems that the papers should be complete.

If Mr. Kilby did not serve as much as six months in the Army prior to April 26th 1865, then she would come in for a pension under the law passed by the last General Assembly, provided her husband's command was sufficiently described as suggested, but

Jno. W. Lindsey  
Commissioner of Pensions  
Atlanta, Ga.

2.

in such case, she could not be paid a pension for 1920 but would be put on the rolls to be paid first in 1921.

Let me know how you come out in the matter. If there is anything further that I can do for you, let me know.

Assuring you of my sincere desire to serve you in any way at any time, and with my very kindest regards,

Always your friend,

*W. S. Lindsey*

GEORGIA, CHEROKEE COUNTY.

Personally before me, the undersigned officer who is authorized by law to administer oaths, came A. N. McClure, who, after being duly sworn deposes and says that he was personally acquainted with James H. Kilby and knew him personally during the year 1864. He further says that according to his personal knowledge and best recollection that the said James H. Kilby enlisted in the Confederate Army in the latter part of September, or the first part of October, 1864, and that he served more than six months in said Confederate Army. Deponent says that he saw the said James H. Kilby with his command near his home in Pickens County, Georgia, frequently during the early fall of 1864, but that he is unable to recall the Co. to which he belonged, or the exact date of his enlistment. Not being absolutely positive as to the exact date of his enlistment, but deponent says that the said James H. Kilby did enlist as above set out in the latter part of September or the first part of October, 1864, and that he did contribute more than six months' service in the Army.

*A. N. McClure*  
Deponent

Sworn to and subscribed before me,  
this 18th, day of September, 1920.

*C. J. Henderson*  
N. P. J. P.



STATE OF GEORGIA.  
COUNTY OF FULTON.

Personally before the undersigned authority now comes  
GEORGE W. CHAMBLEE, who upon oath says:

That he knows Mrs. Elizabeth Kilby and knew her husband  
James H. Kilby, deceased; that he knows of his own personal knowledge  
that the said James H. Kilby enlisted in McCollum's Company, Joe Brown's  
in August 1864  
Pete, and later served and surrendered with the 12th Ga. Reg., under the  
same command. Affiant states further that while he was placed on detail  
duty in September 1864, he never left said regiment and saw the said  
James H. Kilby constantly in service from the date of his enlistment in  
August 1864 to the surrender at Kingston, Ga., in April 1865

Sworn to and subscribed before me  
this October 18, 1920.

Arthur R. M. S. S. S.  
C C ORDINARY FULTON CO., GA.

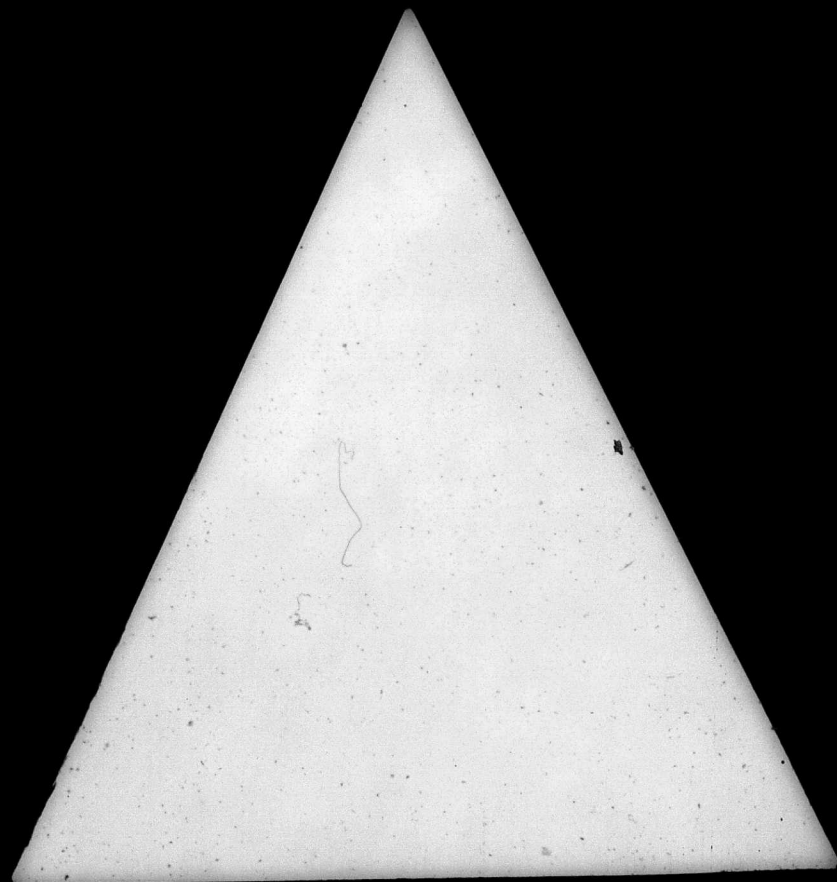
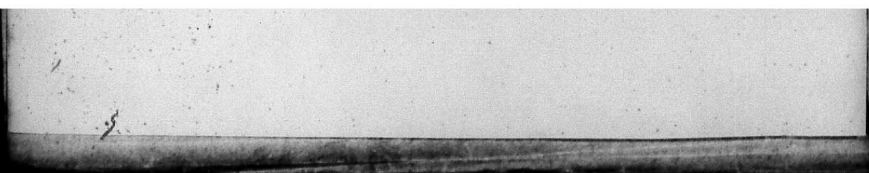
W. G. Chamblee

Mrs. E. J. Kilby - Cherokee  
widow of James H. Kilby  
Co. C. Johnson's Regiment

witness not a member of same  
Co. and regiment, obtains informa-  
tion from Brother <sup>W. G. Chamblee</sup> who was with him.

W. G. Chamblee  
Co. A - then Co. B. 12th Regt. Ga.  
Cavalry - Wofford's Brigade

J. M. S. S. S.



# Ordinary's Certificate

STATE OF GEORGIA,

COUNTY,

I, Wm. A. King Ordinary of said County, certify that I know the applicant W. A. King for pension is the person he represents himself to be and resides in said county. That I also know W. A. King the witness swearing to the service, that they are both residents of said county and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 23<sup>rd</sup> day of May 1917.

of Cherokee County, }  
(SEAL)

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you give shall be true and correct." 2. Additional affidavits may be attached if deemed proper. 3. All affidavits must be made before the Ordinary of the county in which the applicant or witness resides and must be certified by such Ordinary.

J. W. LINDSEY,  
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

9/26-1917

King, Alexander  
Cherokee  
County, Ga.  
No. 949

## Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County Cherokee  
Name Alexander King  
Company B  
Regiment 4<sup>th</sup> M. Reserve  
Approved \_\_\_\_\_

Enl. May 20, 64.  
11 Recd. Dec. 31, 1864.  
72

Not here application  
filed.



# Ordinary's Certificate

STATE OF GEORGIA,

Cherokee COUNTY.

I, J. M. Salligill Ordinary of said County, certify that I know the applicant A. A. King for pension is the person he represents himself to be and resides in said county. That I also know J. R. Simpson the witness swearing to the service; that they are both residents of said county and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 29 day of Aug 1919.

J. M. Salligill Ordinary  
of Cherokee County.

(SEAL)

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you give shall be the whole truth. So help you God."  
2. Additional affidavits may be attached if blank spaces are insufficient.  
3. All affidavits must be made before the Ordinary of the county in which the applicant or witness resides and must be certified by such Ordinary.

No. 914  
Confederate  
Soldier's Application  
Under Act 1910—As Amended by Act of 1919.  
County Cherokee  
Name Alexander King  
Company G  
Regiment 4th Ga. Heavy  
Approved \_\_\_\_\_

J. W. LINDSEY,  
Commissioner of Pensions.

Byrd Printing Co. State Printing, Atlanta.

# Application for Soldier's Pension Under Act 1910

Amended by Act 1919

## Questions For Applicants to Answer

STATE OF GEORGIA,

Cherokee COUNTY.

Alexander King of said State and County, hereby applies for the pension provided by Act of 1910, as amended by Act of 1919, to Confederate Soldiers, and submits his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? (Give County and Post-office) Alexander King Orange Co. Cherokee
2. How long and since when have you been a continuous resident citizen of this State? 24 yrs. see my life
3. Did you enlist in the Army of the Confederate States or in the organized militia of this State from 1861 to 1865? Yes
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) 1864. Atlanta Ga. Co. 4th Reg.
5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge) 12 months - 1864 to 1865
6. When and where was your Company and Regiment surrendered or discharged from the Service? May 1865 - Memphis Ala.
7. Were you actually present with your command when it was surrendered or discharged? Yes
8. If you were not actually present, state specifically and clearly where you were I was in Atlanta with Parsons Company.
  - a. Where was your command when you left it? Andersonville Ga.
  - b. When did you leave the command? May 1865
  - c. For what cause did you leave? I was transferred home.
  - d. By whose authority did you leave? Lieutenant - Surgeon or Commanding Officer
  - e. For how long was your leave granted? In what way? 20 days
  - f. Why did you not return to your command after leave expired? I could not get to my command, and I got home by train.
  - g. In what way were you prevented? By the train.
  - h. What effort did you make to return? I started to my command and found I was not there.
  - i. Were you captured during the war? No
  - j. If so, when, and where? In what prison were you held and when were you released?
9. Are you drawing a pension of any amount from this State or the United States? Yes
10. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? No

Sworn to and subscribed before me, this the

15 day of Aug 1919.

J. M. Salligill Ordinary  
of Cherokee County.

(SEAL)

# Questions for Witness as to Service

STATE OF GEORGIA,

Cherokee COUNTY.

J. M. Simpson of said State and County is hereby presented as a witness in support of the application of Alex. King for the pension provided by the Act of 1910, as amended by the Act of 1919 in said State, and, after being sworn true answers to make to the questions propounded, answers as follows:

1. What is your name and where do you reside? J. M. Simpson  
Holly Springs, N.C. Cherokee
2. How long and since when have you known since 1894 = 25 years the applicant?  
since 1894 = 25 years
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State, and how do you know? Orange, N.C. Cherokee County  
I live in same County
4. When, where and in what Company and Regiment did Alex. King enlist during war from 1861 to 1865? (Give date and place.) May 1864, Suffolk, Va.  
1st N.C. Inf. Regt.
5. How did you obtain your information of this Service? I was with him  
I joined same Co. H. 4th N.C. Inf.
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date) 10 months
7. When and where was his command surrendered or discharged (give date and place) May 1865, Kentucky, Ark.
8. Were you personally present at the surrender? Yes
9. If not, where were you and how came you there?
10. Was the applicant personally present with his command at surrender? No
11. If not where was he and how came him there? He was on picket line
12. When did he leave his command? Spring 7, 1865 Where was his command when he left it? Andersonville, Ga. For what cause did he leave? on furlough
- By whose authority did he leave? Commanding Officer and how long was he granted leave? to test him How do you know all that you have stated to be true? If of your own knowledge, tell clearly and specifically. I was with him from May 1864 till Spring 1865 he was furloughed home before he returned on picket line
13. In what way was he prevented from returning to his command? Command was gone
- How do you know? I was with command
14. What effort did he make to return to his command and how do you know? to test him
15. Was applicant captured as a prisoner. No If so, when and where? In what prison was he held? and when released

Sworn to and subscribed before me, this the

28th day of Aug 1922

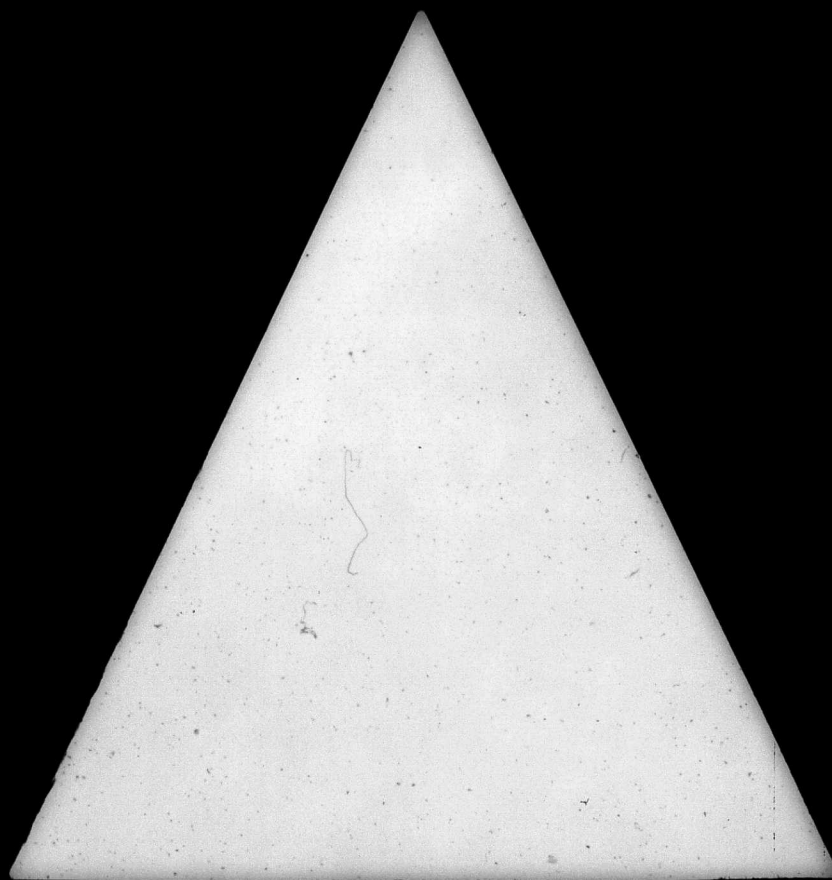
J. M. Saltfield Ordinary  
of Cherokee County.

(SEAL)

(SEAL)

[illegible]





King, Amanda E.  
Apr 1912  
Cherokee Co

+ No.....

# Widow's Pension

UNDER ACT 1910.

County Cherokee

Name Amanda E. King

Widow of Jos H. King

Wafford, Ky.

(militia)

J. W. LINDSEY,  
Commissioner of Pensions.

Chas. F. Byrd, State Printer.

11/6/11 ENTERED ROSTER OFFICE

Application for Pension by a Widow Under Act of 1910.--Questions for Applicant.

STATE OF GEORGIA,

Cherokee County.

Personally before me comes Annanda E. King of said State and County, and after being duly sworn, on oath says that she desires to apply for a pension allowed under the Act of 1910, and submit testimony to make out the same, true answers makes to the following questions to wit:

1. What is your name, and where do you reside? Annanda E. King, Milledgeville Ga
2. How long and since when have you been a continuing resident in the State of Georgia? Since 1859.
3. When, where and to whom were you married? Jan. 27, 1867, Milledgeville Ga. to J. M. King
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service) Sept. 1st 1864, at Cherokee Co. Ga. Camp 6, McCaskey Reg. 10th Ga. Brig. Cavalry Western
5. When and where did the Commands of your husband surrender or discharge from the Army? May 12, 1865, at Benning Ga.
6. Was your husband personally present at the time of the surrender or discharge of this Command? Yes.  
If he was not present state clearly where he was? He was present.
8. Where was his Command when he left?  
a. For what cause did he leave his command?  
b. By whose authority did he leave his Command?  
c. For how long was he granted leave of absence?  
e. What was his physical condition when he left his Command?  
f. What effort did he make to return to his command?  
g. In what way was he prevented from going back to Command?  
h. Was he captured by the enemy at any time? No.  
i. If so, when and where captured and where held as a prisoner, and when and for what cause released?  
j. When and where did your husband die? Nov. 23, 1910, Milledgeville Ga.  
k. Were you residing together when he died? Yes.  
l. If not, how long had you resided apart?  
9. What property of any description did you own, hold or control for your use and its cash value, Nov. 4, 1908. (State same by items.) Nothing.  
10. What property of any kind have you sold or given away since Nov. 4, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.) None.  
11. What property of any description of any value have you now? Cash \$200, Hogs 800  
Give list and cash value? 100 acres of land Val \$400  
12. What are your annual earnings or income and their value? Eighty dollars.  
13. Have you heretofore been paid a pension by the State? No.  
If so, when and for what cause were you struck from the Roll? No.

Sworn to and subscribed before me this the...

21 day of Aug 1911

N. J. Neale Ordinary.

of Cherokee County.

Widow's Pension

UNDER ACT 1910.

No. \_\_\_\_\_

King Annanda E.  
Sept 1st 1910  
Cherokee Co

County

Cherokee

Name

Annanda E. King

Widow of

Jos. M. King

Widow of

J. W. LINDSEY,  
Commissioner of Pensions.

Chas. F. Boyd, State Printer.

11/6 ENTERED POSTER OFFICE



**Questions for the Witnesses as to Service of Husband and Marriage.**

STATE OF GEORGIA,

Cherokee County.

Personally before me comes W. F. Chamble who after being duly sworn true answers to make, to the following questions, answers as follows:

1. What is your name and where do you reside? W. F. Chamble, Cherokee Co Ga.
2. How long and since when have you known Amanda E. King applicant? about 14 years
3. How long and since when has she continuously resided in this State? (Give date.) about 14 years
4. When and to whom was she married? Jan. 27, 1867 How do you know? General information
5. How long and since when did you know Jos. M. King her husband? over 50 years
6. When and where did Jos. M. King the husband of Applicant die? Nov. 23, 1906, Cherokee Co Ga.
7. Where the Applicant and her husband living together as husband and wife at the date of his death? yes
8. If not, how long did they live apart before his death? —

Were they divorced? no

9. When, where and in what Company and Regiment did Jos. M. King enlist? About Sept. 1st 1864, Cherokee Co Ga, Comp. 6, McCollum's Regt, Wofford's Brig. (Cavalry)

10. Were you a member of the same Company? yes

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? from May 12, 1865

12. When, and where did his Command surrender, and was discharged? May 12, 1865 at Kingston Ga

13. Were you personally present when it was surrendered? yes If not where were you — and how came you there? —

14. Was the husband of applicant personally present at surrender? yes If not where was he? — when, where and for what cause did he leave Command? (Give date.) never left By whose authority did he leave his Command? — and how long was he granted leave? — How do you know all this? Personal knowledge

15. For what cause, if you know of your own knowledge was he prevented from returning to his Command? —

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? —

Sworn to and subscribed before me this the 21st day of Aug 1911 by W. F. Chamble Ordinary, of Cherokee County.

**AFFIDAVIT OF TWO FREEHOLDERS.**

STATE OF GEORGIA,

Cherokee County.

Personally before me comes Olivia Fincher who on oath says that they are freeholders of said County and that they know Amanda E. King of said County and know what property she owned on 4th Nov. 1908, and its cash value to be as set out by Schedule (A) as follows: Myself as part of that family  
Her husband had a small out of pocket at that time

Notes and accounts due —  
Total —

Schedule (B).  
We know the property sold or given away since Nov. 4th 1908 its cash value to be as follows:

Personal property Disposal of none  
Money, Notes and accounts —

Schedule (C).  
We also know what property she has now in her possession, use and control to wit:

1.00 Acres of land...worth \$ 3.50  
1 Horses and Mules —  
1 Cows and Hogs 2.50  
Other property Home hold 30  
Income and earnings 50  
Total Value of all property and effects \$ 44.50

Sworn and subscribed before me this the 22 day of Aug 1911 by Olivia Fincher Ordinary, of Cherokee County.

**ORDINARY'S CERTIFICATE.**

STATE OF GEORGIA,

Cherokee County.

I W. F. Chamble Ordinary of said County do certify that, I know Amanda E. King the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was in the 4th Nov. 1908.

That I also know W. F. Chamble the witness who swears to the service of husband, and Olivia Fincher the Applicant who are freeholders. That all of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they all, are truthful, trustworthy, and their statements are entitled to full faith and credit.

That the Tax Returns for W. King Returned for Tax is for 1908 \$ 4.80 for 1910 \$ 2.00 By W. King  
Sworn under my hand and official seal of office this 22 day of Aug 1911

1911 W. F. Chamble Ordinary, of Cherokee County

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."  
2. Additional affidavits may be attached if blank spaces are insufficient.  
3. All affidavits must be made before the Ordinary.  
4. Only widows who married prior to first January 1870, are entitled.  
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

King, Amanda (Mrs.)  
For Cherokee County

1927

**Application for Pension  
Due Deceased Pensioner**

(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

Jack Massey Ordinary  
For Amanda King  
Date of Death Oct 28 1928  
Amount \$ 240.00 \$100.00

Approved and ordered paid

John W. Clark  
JOHN W. CLARK  
22-4-24 Commissioner of Pensions.

Ordinary: Fill out above in full and send this blank to Pension Department for approval. Do not pay out the money until the approved blank is in your hands giving you authority to do so. Send back to the Pension Department with your receipted payrolls to be permanently filed with them. Do not keep this application in your office.

Georgia--Cherokee County.

I, F.M. Blackwell, Clerk of the Court of Ordinary of said County, and custodian of the records of said county, do hereby certify that the within or foregoing is a true copy of the marriage record of Jos. W. King and Amanda E. Puckett as appears of record in my office by reference to marriage records, Book, D, page 304., and is the whole of such record. Witness my hand and official signature this Nov. 3rd 1927.

F. M. Blackwell  
Clerk Court of Ordinary.

MARRIAGE LICENSE

OF

AND

Issued \_\_\_\_\_ 19\_\_\_\_  
and Recorded on Page \_\_\_\_\_ Book \_\_\_\_\_  
of Marriage Licenses.  
Ordinary.

1928

**Application for Pension  
Due Deceased Pensioner**

(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

*Frank Massey* Ordinary  
For *Annandale King*

Date of Death *Dec 28* 192*8*

Amount *\$ 270.00* *\$100.00*

Approved and ordered paid

*John W. Clark* *K.*  
JOHN W. CLARK,  
22-4-24 Commissioner of Pensions.

Ordinary: Fill out above in full and send this blank to Pension Department for approval. Do not pay out the money until the approved blank is in your hands giving you authority to do so. Send back to the Pension Department with your receipted payroll to be permanently filed with them. Do not keep this application in your office.

*J. M. Blackwell*  
Clerk Court of Ordinary.

MARRIAGE LICENSE

OF

AND

19

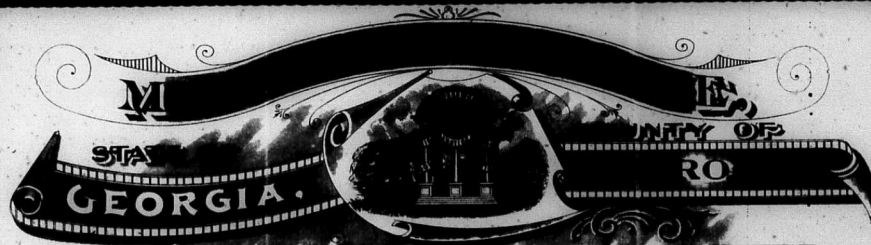
Issued

and Recorded on Page Book

of Marriage License.

Ordinary.





TO ANY JUDGE, JUSTICE OF THE PEACE, OR MINISTER OF THE GOSPEL.

*You are hereby authorized to join*  
*Joseph W. King and Arnda E. Puckett*  
*in the Holy State of Matrimony according to the Constitution and*  
*Laws of this State and for so doing this shall be your License.*  
*And you are hereby required to return this License to me with your*  
*Certificate hereon of the fact and date of the Marriage.*

*Given under my hand and seal this 22<sup>nd</sup> day of*  
*January, 1867* *W. R. D. Moss* (L.S.)  
Ordinary.

STATE OF GEORGIA ~~CERTIFICATE~~ CHEROKEE COUNTY

*I Certify that Joseph W. King and Armanda E. Puckett*  
*were joined in Matrimony by me this 27 day of Jan.*  
*1867.* *Anderson H. Baird*

*Recorded Jan. 31 - 1867*  
*W. R. D. Moss* Ordinary.

*W. J. Mahan Jr.*

STORE PHONE 184

RESIDENCE PHONE 300-445

Cartersville, Ga.

2/9, 1929

M.

*for funeral expenses*  
IN ACCOUNT WITH  
**JACKSON FURNITURE COMPANY**  
SUCCESSORS TO E. M. JACKSON & SONS  
FURNITURE AND UNDERTAKING  
22 WEST MAIN STREET

We Expect Payment in Full Promptly.

Interest 7 per cent Charged After 60 Days

12/29/28 Cochet	175	00
3 Dues	17	50
2 Blank Ring	17	50
3 Bone		75
	210	75

I solemnly swear that the above  
and foregoing account is rendered for  
services in the funeral expenses of  
Amanda King, who died without owning  
sufficient property to pay this bill.

*Jackson Furniture Co.*  
*W. B. Johnson*

Sworn to and subscribed before me.

this 9th day of March, 1929.

*R. M. Gaines*  
Ordinary.

TERMS:

*Barton & Co.*

\$100.00

Canton, Ga. June 12, 1929

Received of

*J. M. Massey Ordinary**One Hundred*

Dollars,

*On Funeral Expense**Mrs. Amanda King*

*J. M. Massey*  
*J. L. Jackson*

## Application for Pension Due to a Deceased Pensioner

(To Be Paid to the Ordinary for Expenses of Funeral and Last Illness)

(Under Act Approved August 15, 1904)

GEORGIA, *Cherokee* County.

Personally before me, the Ordinary of said County, comes

*A. L. Jennings* of said County, who, after being sworn, on oath  
says that he knew *Amanda King* of said County, and that said Pensioner  
was on the Pension Roll of said County at the time of death, which occurred in *Cherokee*  
County, in this State, on the *28th* day of *December*, 192*8*,  
and that pensioner left no widow surviving, and no estate of any value sufficient to pay these funeral  
expenses, which amounted to the sum of \$*210.75* per sworn statements fully and completely  
ITEMIZED hereto attached.

Sworn to and subscribed before me,

*J. M. Massey*, Ordinary  
*Cherokee* County

(Seal of Ordinary)

*A. L. Jennings*

## CERTIFICATE OF ORDINARY

GEORGIA, *Cherokee* County.

I, *J. M. Massey*, Ordinary of said County, do certify  
that I personally know *A. L. Jennings*, who is a resident  
citizen of said County, and that said person is of truthful and trustworthy character, entitled to full  
faith and credit; that I also knew *Amanda King* while in life and that this was  
the same person whose name appears on the Pension Roll of *Cherokee* County, and  
was paid a Pension of *Two Hundred* (\$*200.00*) Dollars  
in said County for 192*8*, and I now believe said pensioner to be dead; and that the instructions at the  
foot of this voucher have been carefully observed in making up this voucher and the bills which are at-  
tached hereto.

Given under my hand and official seal, this *23* day of *Feb.*, 192*9*.

(Seal of Ordinary)

*J. M. Massey*, Ordinary  
*Cherokee* County

## INSTRUCTIONS:

- 1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 2nd. Each account must be sworn to before the Ordinary, and in the following form. (Do not use the terms: "just, true, due, unpaid," etc.)  
"The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of *Amanda King*, who died without owning sufficient property to pay this bill.
- 3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached hereto to this blank, after this blank has been properly completed as indicated.
- 4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 5th. Return this application, and attached bills, with your final settlement, to the Pension Department.
- 6th. Ordinary should see that the back of this blank, when folded, is filled out.

*Thy L. S. Jackson*

INSTRUCTIONS:

1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.

2nd. Each account must be sworn to before the Ordinary, and in the following form. (Do not use the terms: "just, true, due, unpaid," etc.)

"The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of *Amanda K. K. K.*, who died without owning sufficient property to pay this bill.

3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.

4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.

5th. Return this application, and attached bills, with your final settlement, to the Pension Department.

6th. Ordinary should see that the back of this blank, when folded, is filled out.

G. M. JACKSON & SONS  
FURNITURE, STOVES AND UNDERTAKING

"The Firm that Appreciates your Business"

Store Phone 164

Residence 298

Chattanooga, Tenn. 1927

Name

Address

CREDIT AND RECEIPT

By Cash Received on Account

*One hundred and 100.00*

CHECK for Goods Returned  
as follows:

DEPT.

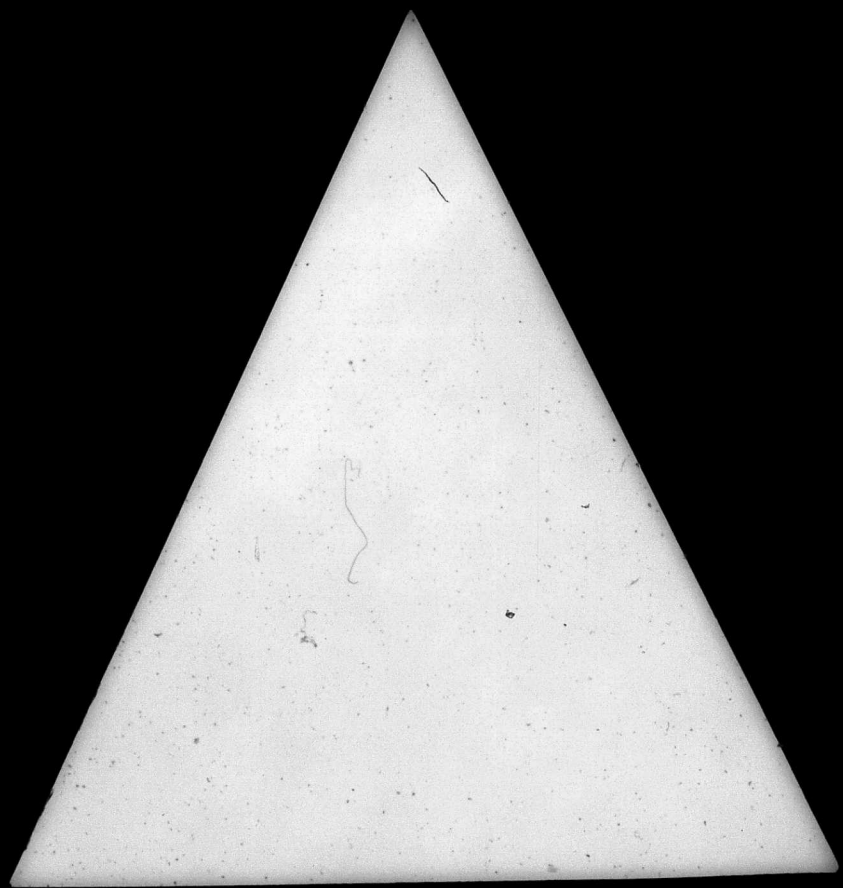
CLERK

D. K.

KEEP THIS RECEIPT

At any time you desire to verify our record of your account, this receipt will assist us in tracing each transaction.





Form No. 5.  
**POWER OF ATTORNEY.**  
**STATE OF GEORGIA.**

Know all Men by these Presents, That I, Elizabeth King County, }  
of Charlottesville, Va. }  
County, in said State, do hereby appoint: Francis W. King }  
of Charlottesville } my true and lawful attorney in fact, for  
me and in my name, to receive and receipt for whatever amount of money I may be entitled  
to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing  
affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may  
be issued by the Governor, or for any sum of money which may be coming to me for the reason  
aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this  
28 day of April 1891

Executed in the presence of us:

James A. Patterson  
Orville Patterson

**DIRECTIONS.**

If allowed, send amount by \_\_\_\_\_ to  
me at \_\_\_\_\_, and oblige.



Elizabeth King  
Charlottesville County

1891.

No. 2872

**Widows' Pension**

PAID TO

Mrs. Elizabeth King

OF

Charlottesville

COUNTY.

**\$100.00.**

Warrant Issued

1891

AND HANDED TO

# POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA.

*Cherokee* County.

Know all Men by these Presents, That I, *Elizabeth King* of *Cherokee* Co. *Ga.*

County, in said State, do hereby appoint *Francis M. King* of *Cherokee* Co. *Ga.* my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *25* day of *May* 1891.

Executed in the presence of us:

*James A. Patterson*

*John Patterson*

DIRECTIONS.

If allowed, send amount by \_\_\_\_\_ to me at \_\_\_\_\_, and oblige,



Widows' Pension  
PAID TO—  
*Elizabeth King*  
—OF—  
*Cherokee* COUNTY.  
\$1000.00  
Warrant Issued  
AND HANDED TO  
1891  
Geo. W. Harrison, State Printer Atlanta.

# Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA.

County of *Cherokee*

In person came before me, the undersigned Ordinary

in and for the County of *Cherokee*

Mrs. *Elizabeth King*, who being sworn according to law, says under

oath that she is the widow of *Abraham K. King*, who was a soldier in

the service of the Confederate States, and served as a member of Company *C*, of the

*2nd* Regiment of *5th* Volunteers; that he enlisted in said

service on or about the \_\_\_\_\_ day of \_\_\_\_\_ 1861, and was in the

*Confederate* Army up to *2nd of July* 1864 That while in the

Army, he was on the \_\_\_\_\_ day of \_\_\_\_\_ 1864, (See Note No. 1)

in the Virginia army was contracted a case

of Cronie Disease of which said disease

he died on the 2nd day of February

1864 in Barlow County in the State

of Georgia

Deponent further swears that she was the wife of said deceased soldier during his term of service in

the Army, and that she has never married since his death; that she became his wife on the \_\_\_\_\_ th

day of *August* 1830, and that she has resided in Georgia continuously since the

\_\_\_\_\_ day of \_\_\_\_\_ 1834; that Georgia is her home, and was such

on the 23d day of December, 1890, and since said date she has not lived in any other State or locality.

Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of

the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February

15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this, the \_\_\_\_\_ day of *April* 1891.

*Occiano M. Patterson* Ordinary.

NOTE 1. State in blank above the date of the death of the husband, and how, and when, and where he died. And in case his death resulted from disease, state how the disease is known positively to have resulted from the service of the soldier in the Army and not from any other cause.



# Affidavit for Three Witnesses.

Form No. 2.

STATE OF GEORGIA,

County of Gordon

Jas. W. Hill Sr

and John Hill

(each known to said Attesting Officer as truthful,

reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge,

Mrs. Elizabeth King, of the County of Cherokee,

State of Georgia, is the widow of Abraham B. King, who was a soldier in

Company 2nd of the 2nd Regiment of Georgia Volunteers.

That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or

about the 1862 day of May 1862. That while in said service, or by

reason of said service in the Army, he lost his life as follows:

John Hill swears that he was personally acquainted with said Abraham B. King, before he enlisted, and knew personally of his enlistment in the service as above stated, that he saw him when he came home from the army sick, that in a short time thereafter he heard of his death from persons in the neighborhood who knew of his death, and that said King has never been heard from since.

J. T. Edwards swears that he lived a neighbor to said King, and was well acquainted with him before he enlisted and knows personally of his enlistment in the service as above stated, he does not know personally of his death, but that he has heard the neighbors speak of his death, and knows that he has never been heard of alive since the war.

J. W. Hill, Sr. swears that he was personally acquainted with said Abraham B. King, that said Abraham B. King enlisted in the army as above stated as a substitute for him, the said J. W. Hill, Sr. and that he the said Hill was present when he was examined and mustered into the service, he further swears that he saw said King, when he came home from the army sick, and furnished him a horse to ride from the town of Pasadena where he got off the train to his home in the County, that in a short time thereafter he heard from the neighbors that he was dead, and that said King has never been heard from since.

We further swear that Mrs. Elizabeth King was the wife of said soldier during the service, and that she has not intermarried since his death, and that she resides in Cherokee County of the State of Georgia.

Sworn to and subscribed before me, this, the 18th day of May 1891.

W. H. Black Ordinary.

J. T. Edwards  
Jas. W. Hill Sr  
John Hill

# Certificate of Ordinary of the County of Applicant's Residence.

Form No. 3.

STATE OF GEORGIA,

County of Cherokee

Elizabeth King

State of Georgia, hereby certify that I am acquainted with Mrs. Elizabeth King

the applicant for a pension in this case, and know, from my own knowledge, or from positive proof

presented to me by reputable witnesses, that she resides in this County, and that she resided in the

State of Georgia on December 23d, 1890, and has not lived out of the State since that date. (I also

certify that the witnesses whose testimony she presents to sustain her claim are known to me to be

truthful witnesses, entitled to full faith and credit as such.) I am fully satisfied that this claim is made in

good faith, and that I have caused the applicant and the witnesses to read or hear read the proofs they sign.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 18th day of May 1891.

W. H. Harrison Ordinary.

W. H. Harrison Ordinary.

W. H. Harrison Ordinary.

W. H. Harrison Ordinary.

W. H. Harrison Ordinary.

W. H. Harrison Ordinary.

W. H. Harrison Ordinary.

W. H. Harrison Ordinary.

W. H. Harrison Ordinary.

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W. H. Harrison Ordinary.

W. H. Harrison Ordinary.

W. H. Harrison Ordinary.

W. H. Harrison Ordinary.

W. H. Harrison Ordinary.

# NOTES.

The pension is only payable to certain classes of widows.  
Those whose husbands were killed in service.  
Those whose husbands died in the army of wounds or disease contracted in the service.  
Those whose husbands went to the army and have never been heard from since the war.  
Those whose husbands were wounded in the army and have since died from the direct effects of the wounds.

Those whose husbands contracted disease in the service, and who after the war, died of the disease caused by the service. The disease directly causing the death.

No widow is entitled unless she was the wife of the soldier during the war, and has never remarried.

The law does not provide for any one living out of the State of Georgia, or who did not live in the State at the date of the Act.

The facts to establish a claim must be substantiated by the testimony of three witnesses who personally know of the enlistment of the husband and his death and the immediate cause of the death.

Widows who have married since the service of their husbands in the army are not entitled. There is no need of employing a lawyer or other agent to attend to these claims. The Department will furnish full and specific instructions, and give ample opportunity to every claimant.

If witnesses live in another County from that wherein applicant resides, they must go before the Ordinary and testify. The attestation of a Justice of the Peace or Notary will not answer.

Fill out Power of Attorney authorizing some one who can call at Treasurer's office in Atlanta and receive the money, to receipt for same.

Fill out the "directions" below Power of Attorney, so that your Agent will know where and how to send the money.

By order of the Governor.

W. H. HARRISON,  
Sec. Ex. Department.

Certificate of Ordinary of the County of Applicant's Residence.

Form No. 2.

STATE OF GEORGIA, County of Cherokee

I, Allen C. Brown Ordinary in and for said County of Cherokee State of Georgia, hereby certify that I am acquainted with Mrs. Elizabeth King the applicant for a pension in this case, and know, from my own knowledge, (or from positive proof presented to me by reputable witnesses), that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of Charles W. King deceased, and as such has heretofore been allowed a pension for the year ending February 15th 1892.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 25th day of January 1893.

(SEAL)

Allen C. Brown Ordinary.

POWER OF ATTORNEY.

Form No. 3.

STATE OF GEORGIA, Cherokee County.

KNOW ALL MEN BY THESE PRESENTS, That I, Elizabeth King of Cherokee County, in said State, do hereby appoint Allen C. Brown my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

In Witness Whereof, I have hereunto set my hand and seal, this 25th day of January 1893.

Executed in the presence of us:

Allen C. Brown  
Allen C. Brown

DIRECTIONS.

Send amount by \_\_\_\_\_ to me at \_\_\_\_\_, and oblige \_\_\_\_\_

Done at \_\_\_\_\_, State of Georgia, this \_\_\_\_\_ day of \_\_\_\_\_, 1893.

Warrant Issued  
AND HANDED TO  
Allen C. Brown  
1893

—OF—  
Elizabeth King  
County.

—PAID TO—  
for year ending February 15th, 1893.  
Elizabeth King

Widow's Pension,

25th 613

1893.

FOR THOSE HERETOFORE PAID.  
King Elizabeth  
Cherokee County

Certificate of Ordinary of the County of Applicant's Residence.

Form No. 2.

STATE OF GEORGIA, County of Cherokee

I, Allen C. Brown Ordinary in and for said County of Cherokee State of Georgia, hereby certify that I am acquainted with Mrs. Elizabeth King the applicant for a pension in this case, and know, from my own knowledge (or from positive proof presented to me by reputable witnesses), that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of Charles W. King deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1893.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 25th day of January 1894.

(SEAL)

Allen C. Brown Ordinary.

POWER OF ATTORNEY.

Form No. 3.

STATE OF GEORGIA, Cherokee County.

KNOW ALL MEN BY THESE PRESENTS, That I, Elizabeth King of Cherokee County in said State, do hereby appoint Allen C. Brown my true and lawful attorney in fact, for me, and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

In Witness Whereof, I have hereunto set my hand and seal, this 25th day of January 1894.

Executed in the presence of us:

Allen C. Brown  
Allen C. Brown

DIRECTIONS.

Send amount by \_\_\_\_\_ to me at \_\_\_\_\_, and oblige \_\_\_\_\_

Done at \_\_\_\_\_, State of Georgia, this \_\_\_\_\_ day of \_\_\_\_\_, 1894.

Warrant Issued  
AND HANDED TO  
Allen C. Brown  
1894.

—OF—  
Elizabeth King  
County.

—PAID TO—  
for year ending February 15th, 1894.  
Elizabeth King

Widow's Pension,

25th 613

1894.

FOR THOSE HERETOFORE PAID.  
King Elizabeth  
Cherokee



## For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Cherokee*

Personally comes Mrs.

*Elizabeth King*

who being sworn, says on oath, that she is a bona fide resident of said County of

*Cherokee*

State of Georgia, and that she has resided in said State

continuously ever since 18\_\_ That she is the Widow of

*Abraham B. King*

who was a Soldier in Company

of the *2nd* Regiment of *Georgia Volunteers*Volunteers, that he enlisted in said Regiment on or about the month of *February*1865 and served in the Army up to *the latter part* 1865 That he lost hislife on the *21st* day of *December* 1864 (State herefull particulars of the husband's death, when, where and from what cause.) (*That said**deceased husband was shot down in such place as**since found his command, which was in the State**of Georgia at the time he reached his home in Boston**and he has since lived in that State and has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not*

Sworn to and subscribed before me, this

26 day of *December* 1893.*Allen C. Henry* Ordinary.Post-office *Acworth Ga.*

## For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Cherokee*

Personally comes Mrs.

*Elizabeth King*

who being sworn, says on oath, that she is a bona fide resident of said County of

*Cherokee*

State of Georgia, and that she has resided in said State

continuously ever since 1864 That she is the Widow of

*A. B. King*

who was a Soldier in Company

of the *2nd*Regiment of *Georgia*Volunteers, that he enlisted in said Regiment on or about the month of *February*1864 and served in the Army up to *the latter part* 1864 That he lost hislife on the *21st* day of *December* 1864 (State herefull particulars of the husband's death, when, where and from what cause.) (*That said**deceased husband was shot down in such place as**since found his command, which was in the State**of Georgia at the time he reached his home in Boston**and he has since lived in that State and has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not**been in Georgia since that time and he has not*

Sworn to and subscribed before me, this

25 day of *January* 1894.*A. C. Henry* Ordinary.

Post-office

*Acworth Ga.*

WIDOWS' PENSION

LOOSE HEREFORE PAID

RECEIVED TO

RECEIVED

CONFIRM

1894



Certificate of Ordinary of the County of Applicant's Residence.

Form No. 2

STATE OF GEORGIA, County of Cherokee

I, A. C. Corn Ordinary in and for said County of

State of Georgia, hereby certify that I am acquainted with Mrs. Elizabeth King the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to me by reputable witnesses), that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of Abraham R. King deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1894.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 13<sup>th</sup> day of January 1895.

{ SEAL } A. C. Corn Ordinary.

POWER OF ATTORNEY.

Form No. 3

STATE OF GEORGIA, Cherokee County.

KNOW ALL MEN BY THESE PRESENTS, That I, Elizabeth King of Cherokee

County in said State, do hereby appoint F. N. King of Cherokee County my true and lawful attorney in fact, for me, and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 12 day of January 1895. Elizabeth King [L. S.]

Executed in the presence of us:

A. C. Corn Ordinary  
W. H. Corn

DIRECTIONS.

Send amount by \_\_\_\_\_ to \_\_\_\_\_, and oblige me at \_\_\_\_\_

King, Elizabeth  
Cherokee Co.  
FOR THOSE HERETOFORE PAID.  
1895.  
No. 2614  
WIDOW'S PENSION,  
for year ending February 15th, 1895.  
—PAID TO—  
Elizabeth King  
—OF—  
Cherokee County.  
widow of Abraham R. King  
WARRANT ISSUED  
524  
AND PAID TO  
1895.  
Geo. W. Harrison, State Printer.

Certificate of Ordinary of the County of Applicant's Residence.

Form No. 2

STATE OF GEORGIA, County of Cherokee

I, A. C. Corn Ordinary in and for said County of

State of Georgia, hereby certify that I am acquainted with Mrs. Elizabeth King the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to me by reputable witnesses), that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of Abraham R. King deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1895.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the 13<sup>th</sup> day of January 1895.

{ SEAL } A. C. Corn Ordinary.

POWER OF ATTORNEY.

Form No. 3

STATE OF GEORGIA, Cherokee County.

I, Elizabeth King hereby authorize F. N. King of Cherokee County to receive and receipt for the pension paid hereon and request that he remit same to me at \_\_\_\_\_

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 12<sup>th</sup> day of January 1895.

Elizabeth King [L. S.]

Executed in the presence of

A. C. Corn Ordinary  
W. H. Corn

King, Elizabeth  
Cherokee County  
FOR THOSE HERETOFORE PAID.  
1896.  
No. 3239  
WIDOW'S PENSION,  
for year ending February 15th, 1896.  
PAID TO  
Elizabeth King  
—OF—  
Cherokee County.  
widow of Abraham R. King  
WARRANT ISSUED  
524  
AND PAID TO  
1896.  
Geo. W. Harrison, State Printer.

# For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cherokee

Personally Comes Mrs.

Elizabeth King

who being sworn, says on oath, that she is a bona fide resident of said county of

Cherokee

State of Georgia, and that she has resided in said State

continuously ever since

18

That she is the Widow of

Abraham B. King

who was a Soldier in Company

6

of the 2nd

Regiment of Georgia

Volunteers, that he enlisted in said Regiment on or about the month of July

1863 and served in the Army up to

July

1864

That he lost his

life on the

day of

18

(State here

full particulars of the husband's death, when, where and from what cause.) (

Said, Newbond died in Hospital at Bigston Ga  
died with bone, Sincak

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1820, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this

12

day of January 1895.

A. B. Conn

Ordinary.

Post-office

Elizabeth King  
mark

# For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cherokee

Personally Comes Mrs.

Elizabeth King

who being sworn, says on oath, that she is a bona fide resident of said county of

Cherokee

State of Georgia, and that she has resided in said State

continuously ever since about

1830

That she is the Widow of

Abraham B. King

who was a Soldier in Company

6

of the 2nd

Regiment of Ga.

Volunteers, that he enlisted in said regiment on or about the month of July

1862 and served in the Army up to

1864

That he lost his

life on the

day of

18

(State here

full particulars of the husband's death, when, where and from what cause.) (

he taken Chasms Sincak & was sent home on  
funeral & July the 1st 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1820, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Cherokee County for the year ending February 15th, 1890, and now apply for the pension provided by law for the year ending February 15th, 1896.

Sworn to and subscribed before me, this

third

day of January

1896.

A. B. Conn

Ordinary.

Post-office

Elizabeth King  
mark



## Certificate of Ordinary of the County of Applicant's Residence.

STATE OF GEORGIA, County of Cherokee

I, A. L. Latham Ordinary in and for said County of Cherokee State of Georgia, hereby certify that I am acquainted with Mrs. Elizabeth King the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to me by reputable witness,) that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of Abraham B. King deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1896.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this 21<sup>st</sup> day of Dec 1897.

A. L. Latham

Ordinary.

Form No. 3.

## POWER OF ATTORNEY.

STATE OF GEORGIA, Cherokee County.

I, Elizabeth King hereby authorize F. M. King of Cherokee County to receive and receipt for the pension paid hereon and request that he remit same to me at Pagewood.

In Witness Whereof, I have hereunto set my hand and seal, this 21<sup>st</sup> day of Dec 1897.

Elizabeth King [L. S.]

Executed in the presence of

A. L. Latham, Ordinary

## POWER OF ATTORNEY.

State of Georgia, Cherokee County.

I, Elizabeth King hereby authorize F. M. King of Cherokee to receive and receipt for the pension paid hereon and request that he remit same to me at me.

In Witness Whereof, I have hereunto set my hand and seal, this 21<sup>st</sup> day of Jan 1898.

Elizabeth King [L. S.]

Executed in the presence of

A. L. Latham, Ordinary  
F. M. King

STATE OF GEORGIA, Cherokee County.

I, Elizabeth King hereby authorize F. M. King of Cherokee County to receive and receipt for the pension paid hereon and request that he remit same to me at Pagewood.

In Witness Whereof, I have hereunto set my hand and seal, this 21<sup>st</sup> day of Dec 1897.

Elizabeth King [L. S.]

Executed in the presence of

A. L. Latham, Ordinary

For These Heretofore Paid.

1898.

No. 3575

WIDOW'S PENSION,

For year ending February 15th, 1898.

PAID TO

Mrs. Elizabeth King

OF

Cherokee County,Widow of Abraham B. King

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

2/18 1898.

AND HANDED TO

F. M. King

GEO. W. HARRISON, STATE PRINTER, ATLANTA

WIDOW'S PENSION,

for year ending February 15th, 1897.

PAID TO

Mrs. Elizabeth King

OF

Cherokee County.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

2/16 1897.

AND HANDED TO

F. M. King

GEO. W. HARRISON, STATE PRINTER, ATLANTA



## For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Cherokee*

Personally Comes Mrs.

*Elizabeth King*

who being sworn, says on oath, that she is a bona fide resident of said county of *Cherokee* State of Georgia, and that she has RESIDED in said State continuously ever since *about* 1851 That she is the Widow of *Abraham B. King* who was a Soldier in Company *b* of the *2d* *Ca* Regiment of *Ca* *Vol* Volunteers, that enlisted in said regiment on or about the month of *Feb* 1863 1863 and served in the Army up to *Feb* 1864 That he lost his life on the *day* of *Feb* 1864 (State here

full particulars of the husband's death, when, where and from what cause.) *Taken abroad*  
*direct in the fall of 1864 and died in Oct. 1864*  
*on Feb 1st 1864 from the effects of a base illness*

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1850, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of *Cherokee* County for the year ending February 15th, 1896, and now apply for the pension provided by law for the year ending February 15th, 1897.

Sworn to and subscribed before me, this *21st* day of *Dec* 1897.  
*A. C. Burn* Ordinary.

*Elizabeth King*  
 Post-office

## For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Cherokee*

Personally Comes Mrs.

*Elizabeth King*

who, being sworn, says on oath, that she is a bona fide resident of said county of *Cherokee* State of Georgia, and that she has RESIDED in said State continuously ever since *about* 1826 That she is the Widow of *Abraham B. King* who was a Soldier in Company *b* of the *2d* *Ca* Regiment of *Ca* *Vol* Volunteers, that he enlisted in said regiment on or about the month of *Feb* 1863 1863 and served in the Army up to *Feb* 1864 That he lost his life on the *day* of *Feb* 1864 (State here

full particulars of the husband's death, when, where and from what cause.) *Said Husband died in Feb 1864 with*  
*Cherokee Disease*

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1820.

I have been allowed a pension as a resident of *Cherokee* County for the year ending February 15th, 1897, and now apply for the pension provided by law for the year ending February 15th, 1898.

Sworn to and subscribed before me, this *18th* day of *Jan* 1898.  
*A. C. Burn* Ordinary.

*Elizabeth King*  
 Post-Office

State of Georgia,

*Cherokee* County.

I *A. C. Burn* Ordinary of said County, certify that I am well acquainted with Mrs. *Elizabeth King* who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the *18th* day of *Jan* 1898.

Given under my official signature and seal this the *18th* day of *Jan* 1898.

Official  
 Seal.

*A. C. Burn*  
 Ordinary of *Cherokee* County.

POWER OF ATTORNEY.

State of Georgia,

Cherokee County. }

I, Elizabeth King hereby authorize E. H. King  
of Cherokee County

to receive and receipt for the pension paid hereon and request that he remit same to

me at Payson Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 12<sup>th</sup>

day of Jan, 1899.

Elizabeth King [L. S.]

Executed in presence of

A. B. Cunningham  
of the King

King Elizabeth  
Cherokee County  
For Those Heretofore Paid.

1899.

NO. 317C

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAID TO

Mrs. Elizabeth King

OF

Cherokee County

Widow of A. B. King

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

1899.

2/6  
AND HANDLED TO

E. H. King

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

# For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

Personally Comes Mrs.

County of CherokeeElizabeth King

who, being sworn, says on oath, that she is a bona fide resident of said county of

State of Georgia, and that she has resided in said State continuously ever since. 1856 That she is the Widow of

A. B. King who was a soldier in Company6 of the 2 Regiment of CoVolunteers, that he enlisted in said regiment on or about the month of Feb1861 and served in the Army up to Feb 1864 That he lost hislife on the 1st day of Feb 1864 (State here

full particulars of the husband's death, when, where and from what cause.)

Died with chronic disease Feb 1st 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1850.

I have been allowed a pension as a resident of County for the year ending February 15th, 1898, and now apply for the pension provided by law for the year ending February 15th, 1899.

Sworn to and subscribed before me, this 17 day of June 1899. Elizabeth King  
A. B. Carr Ordinary. Post-Office Mont

State of Georgia,

I A. B. CarrCherokee County.

Ordinary of said County, certify that I am well acquainted

with Mrs. Elizabeth King who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she

has continuously resided in this State since the day of 1856

Given under my official signature and seal this the 17 day of June 1899.A. B. CarrOrdinary of Cherokee County.{ Official  
Seal }



# POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, Elizabeth King hereby authorize  
A. B. Carr of Cherokee County  
to receive and receipt for the pension paid hereon and request that he remit same to  
me at Canton Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 6<sup>th</sup>  
day of May 1901.

Executed in presence of

F. M. King

Elizabeth King [L. S.]

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, Elizabeth King hereby authorize  
A. B. Carr of Cherokee County  
to receive and receipt for the pension paid hereon, and request that he remit same to  
me at Canton Ga

In Witness Whereof, I have hereunto set my hand and seal, this 18<sup>th</sup>  
day of May 1902.

Executed in presence of

F. M. King

Elizabeth King [L. S.]

King, Elizabeth  
Cherokee County

To Those Heretofore Paid.

**1901.**  
Gordon Co. 1900

No. 7478

**WIDOW'S PENSION,**

For year ending February 15th, 1901.

PAID TO

Mrs. Elizabeth King

OF

Cherokee County.

Widow of A. B. Carr

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

5/12 1901,

AND HANDED TO

Carr

Geo. W. Harrison, State Printer, Atlanta, Ga.

King, Elizabeth  
Cherokee County  
To Those Heretofore Paid

**1902.**

No. 1858

**WIDOW'S PENSION,**

For year ending Dec. 31, 1902.

PAID TO

Mrs. Elizabeth King

OF

Cherokee County,

Widow of A. B. Carr

Co. B Regiment 24<sup>th</sup> Mass.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

3/4 1902

AND HANDED TO

only

Geo. W. Harrison, State Printer, Atlanta, Ga.

STATE OF GEORGIA

Personally Comes With

FOR WIDOWS HERETOFORE ALLOWED PENSIONS

1902

FOR WIDOWS HERETOFORE ALLOWED PENSIONS

## For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cherokee

Personally Comes Mrs.

Elizabeth King

who, being sworn, says on oath, that she is a bona fide resident of said County of Cherokee State of Georgia, and that she has RESIDED in said State continuously ever since 1825. That she is the Widow of Abraham B. King who was a soldier in Company C of the Second Regiment of La Volunteers, that he enlisted in said regiment on or about the month of Feb 1863 and served in the Army up to Feb 1864. That he lost his life on the 1st day of Feb 1864. (State here particulars of the husband's death, when, where and from what cause) Died in Feb 1864 with Chancie's Canker

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1860.

I have been allowed a pension as a resident of Landon County for the year ending February 15th, 1900, and now apply for the pension provided by law for the year ending February 15th, 1901.

Sworn to and subscribed before me, this 8<sup>th</sup> day of May 1901. A. B. Curran Ordinary.

Elizabeth King  
marked  
Post Office

State of Georgia,

Cherokee County,I A. B. Curran Ordinary of said County, certify that I am well acquainted

with Mrs. Elizabeth King, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 8<sup>th</sup> day of May 1825.

Given under my official signature and seal, this the 8<sup>th</sup> day of May 1901.

Official Seal.

A. B. Curran  
Ordinary of Cherokee County.

## For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cherokee

PERSONALLY COMES MRS.

Elizabeth King

who, being sworn, says on oath, that she is a bona fide resident of said County of Cherokee State of Georgia, and that she has RESIDED in said State continuously ever since about 1846. That she is the Widow of A. B. King who was a soldier in Company C of the 2<sup>d</sup> Regiment of La Volunteers, that he enlisted in said regiment on or about the month of Feb 1863, and served in the Army up to Feb 1864. That he lost his life on the 1<sup>st</sup> day of Feb 1864. (State here particulars of the husband's death, when, where and from what cause) Died with Chancie's Canker

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1860.

I have been paid a pension as a resident of Cherokee County for the year ending December 31, 1901, and now apply for the pension provided by law for the year ending December 31, 1902.

Sworn to and subscribed before me, this 13<sup>th</sup> day of May 1902. A. B. Curran Ordinary.

Elizabeth King  
marked  
Post-Office

State of Georgia,

Cherokee County,I A. B. Curran Ordinary of said County, certify that I am well

acquainted with Mrs. Elizabeth King, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 1826 day of May 18.

Given under my official signature and seal, this the 13<sup>th</sup> day of May 1902.

Official Seal.

A. B. Curran  
Ordinary of Cherokee County.

NOTE.—All blank spaces must be filled.  
Voucher and affidavit must bear date after January 1st, 1902.

# БОМБЕК ОҒИ УЛЛОВИЕРА

**NOTE.**—All blank spaces must be filled.  
Voucher and affidavit must bear date after January 1st, 1902.



STATE OF GEORGIA.

*Cherokee* County.

I, *Will P. Harrison*

Ordinary of said county,

do certify that I am well acquainted with *Wm King* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county.

Given under my official signature and seal, this *5<sup>th</sup>* day of *March*, 1892.

*Will P. Harrison*

Ordinary, *Cherokee*

County.

STATE OF GEORGIA

COMMISSIONER OF THE LAND OFFICE

*King, W. M.*  
*Cherokee Co.*  
No. *1300*

SOLDIER'S PENSION.  
1892.

FOR THE YEAR ENDING OCTOBER 30, 1890.

Name *W M King*

County *Cherokee*

Disability *Hand Wounded*

Amount, \$ *50*

Entered on record *March 4* 1892.

W. H. HARRISON,  
Secretary of Executive Department.

AGENT.

*W A Wright*

Geo. W. Harrison, State Printer, Atlanta, Ga.

STATE OF GEORGIA.  
For Applicants Not Otherwise Allowed Pensions.

# STATE OF GEORGIA,

Cherokee County.

I, Orin Postman Ordinary of said county,

do certify that I am well acquainted with Orin Postman the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county.

Given under my official signature and seal, this 5<sup>th</sup> day of March 1892.

Orin Postman

Ordinary Cherokee County.

King & M. Cherokee Co.  
No. 1300

## SOLDIERS' PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 31, 1892.

Name	<u>Orin Postman</u>
County	<u>Cherokee</u>
Disability	<u>Hand Wound</u>
Amount, \$	<u>50</u>
Entered on record	<u>March 7</u> 1892.
W. H. HARRISON, Secretary of Executive Department.	
AGENT. <u>W. H. Wright</u> Gen. W. Harrison, State Printer, Atlanta, Ga.	

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

Know all Men by these Presents, That I Orin Postman

of Cherokee County, State of Georgia, do hereby appoint

of Cherokee County, my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit, hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this

5<sup>th</sup> day of March 1892.

Orin Postman [s.]

Executed in the presence of us

Orin Postman

Send money to me as follows, by Orin Postman to Orin Postman

of Cherokee County, Georgia.

to Seaworth P. O.

Cherokee County, Georgia.

1892.

1893.

Application for Allowance

No. 4405

For the Year Ending October 31, 1892.

Applicant, Orin Postman

County, Cherokee

Amount, 50

Date of Warrant, 3/7

Entered on record, 3/17 1892.

Secretary of Executive Department.

WARRANT HANDED

Orin Postman

Gen. W. Harrison, State Printer, Atlanta, Ga.

No. 4405

1893.

King & M.

STATE OF GEORGIA.

For Applicants Heretofore Allowed Pensions.



# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

*Cherokee* County.

PERSONALLY appears *F. M. King* of *Cherokee* County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of Georgia, and has been such continuously since the *15th* day of *July*, 1864; that he enlisted in the military service of the Confederate States (or of the State of \_\_\_\_\_) during the war between the States, and served as a *Sergeant* in Company *14th*, of *14th* Regiment of *Georgia* Volunteers *Thomas*'s Brigade; that whilst engaged in such military service at the battle of *Pellissippi* in the State of *Mississippi*, on the *15th* day of *March*, 1865, he was wounded as follows: *by sharp shot in the head, in the left temple, which penetrated his brain, heeled; the shot still in the head, wound gives a constant discharge of matter; pain, wounds renders dependent unable to labor*

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1892. I have heretofore been allowed a pension of

*Five* Dollars for *1892* 1891

Sworn to and subscribed before me this the *5th* day of *March*, 1892. *F. M. King*

*W. B. Williams* Ordinary.  
NOTE.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability.

## POWER OF ATTORNEY.

STATE OF GEORGIA,

*Cherokee* County.

Know all Men by these Presents, That I, *F. M. King* of *Cherokee* County, in said State, do hereby appoint *W. B. Williams* my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this *5th* day of *March*, 1892. *F. M. King* [L. S.]

Executed in the presence of us: *W. B. Williams* *S. S. Dupree*

DIRECTION.  
Send money to me as follows, by *Express* to *Acworth* P. O. *Acworth* County, Georgia. *F. M. King*

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

*Cherokee* County.

PERSONALLY appears *F. M. King* of *Cherokee* County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the *15th* day of *July*, 1864; that he enlisted in the military service of the Confederate States (or of the State of \_\_\_\_\_) during the war between the States, and served as a *Sergeant* in Company *14th*, of *14th* Regiment of *Georgia* Volunteers *Thomas*'s Brigade; that whilst engaged in such military service at the battle of *Pellissippi* in the State of *Mississippi*, on the *15th* day of *March*, 1865, he was wounded as follows: *by sharp shot in the head, in the left temple, which penetrated his brain, heeled; the shot still in the head, wound gives a constant discharge of matter; pain, wounds renders dependent unable to labor*

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1893. I have heretofore been allowed a pension of

*Five* dollars, for *1892* 1891 1890 1891 1892

Sworn to and subscribed before me, this, the *14th* day of *March*, 1893. *F. M. King*

*Allen B. Beam* Ordinary.  
NOTE.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA,

*Cherokee* County.

I, *Allen B. Beam* Ordinary of said County, do certify that I am well acquainted with *F. M. King* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this County.

I further certify that before the foregoing affidavit was made, and power of attorney was signed, is a true and correct copy of the original of the said affidavit and power of attorney, and that the signatures thereon are genuine.  
Given under my official signature and seal, this *14th* day of *March*, 1893.

*Allen B. Beam* Ordinary *Cherokee* County.

STATE OF GEORGIA  
POWER OF ATTORNEY



# POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

Know all Men by these Presents, That I,

of

County, State of Georgia, do hereby appoint

of my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of 1894.

[L. S.]

Executed in the presence of us

## DIRECTIONS.

Send money to me as follows, by

to P. O.

County, Georgia.

# POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

KNOW ALL MEN BY THESE PRESENTS, That I,

of

County, State of Georgia, do hereby appoint

of my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate States (or of this State) as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of 1895.

[L. S.]

Executed in presence of us

## DIRECTIONS.

Send money to me as follows, by

to

P. O.

County, Georgia.

(For Those Already Enrolled.)

No. 452

**Soldier's Pension.**

**1894.**

Name *E. M. King*

County *Cherokee*

Disability *Shall wound*

Amount *\$50.*

1894.

*W. H. HARRISON,*

Secretary Executive Department.

WARRANT HANDLED TO

*Applicant*

Gen. W. Harrison, State Printer, Atlanta.

*No data*

(For Those Already Enrolled.)

No. 361

**SOLDIER'S PENSION.**

**1895.**

Name *E. M. King*

County *Cherokee*

Disability *Dead*

Amount *\$12.00*

1895.

*W. H. HARRISON,*

Secretary Executive Department.

WARRANT HANDLED TO

*Applicant*

Gen. W. Harrison, State Printer, Atlanta.

*No data*

## For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

*Cherokee* County. }

PERSONALLY appears *F. M. King* of *Cherokee*

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the *7*

day of *July* 18*76*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Sarge* in Company *17*, of *14*th Regiment of *Georgia* Volunteers, *Thomas*'s Brigade; that whilst engaged in such military service at the battle of *Petersburg Va* in the State of *Virginia*, on the *30* day of *March* 1865, he was wounded as follows: *in the Left Tempel By gun*

*Shot Entering Left Tempel a Bout two inches a Bone The Bone ranging Down & Lodging near the Lobe of the Ear where the Ball Still Remains causing a Huming Sore all the time with peribulbly disab. Am from down any kind of work & gives me pain all the time*

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1894. I have heretofore been allowed a pension of

*Fifty* dollars, for the year 1894

Sworn to and subscribed before me, this, the

*Fifty* day of *March* 1894.

*D. L. Corns, Clerk*

NOTE—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA, }

*Cherokee* County. }

I, *D. L. Corns* Ordinary of said County,

do certify that I am well acquainted with *F. M. King* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this *Fifty*

day of *March* 1894.



Ordinary *Cherokee* County.

## For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

*Cherokee* County. }

Personally appears *F. M. King* of *Cherokee*

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the *7*

day of *July* 18*76*; that he enlisted in the military service of the Confederate States (or of the State of ) during the war between the

States, and served as a *Sargeant* in Company *17*, of *14*th Regiment of *Georgia* Volunteers, *Thomas*'s Brigade; that whilst engaged in such military service at the battle of *Petersburg Va* in the State of *Virginia*, on the *30* day of *March* 1865, he was

wounded as follows: *By gunshot in Left Tempel*

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26th, 1895. I have heretofore been allowed a pension of

*Fifty* dollars, for the year 1895

Sworn to and subscribed before me, this, the

*31* day of *January* 1895.

*D. L. Corns, Clerk*

NOTE—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA, }

*Cherokee* County. }

I, *D. L. Corns* Ordinary of said County,

do certify that I am well acquainted with *F. M. King* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this *31*

day of *January* 1895.



Ordinary *Cherokee* County.



# POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, \_\_\_\_\_ hereby authorize \_\_\_\_\_

of \_\_\_\_\_

to receive and receipt for the pension paid hereon and request that he remit same to

by \_\_\_\_\_

at \_\_\_\_\_

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this \_\_\_\_\_

day of \_\_\_\_\_ 1890.

[L. S.]

Executed in presence of \_\_\_\_\_

# POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, \_\_\_\_\_ hereby authorize \_\_\_\_\_

of \_\_\_\_\_

to receive and receipt for the pension paid hereon and request that he remit same to

by \_\_\_\_\_

at \_\_\_\_\_

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this \_\_\_\_\_

day of \_\_\_\_\_ 1897.

[L. S.]

Executed in presence of \_\_\_\_\_

(For Those Already Enrolled.)

No. 2381

**SOLDIER'S PENSION.**

**1896.**

Name H. M. King  
County Cherokee  
Disability Abolished  
Amount, \$ 500 Dollars  
2/3 1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

King, H. M.  
ACK OF 2 OCT. 1897.  
(For Those Already Enrolled.)

Geo. W. Harrison, State Printer, Atlanta.

no date

King, H. M.  
Cherokee County  
ACK OF 2 OCT. 1897.  
(For Those Already Enrolled.)

No. 2381

**INVALID**

**SOLDIER'S PENSION.**

**1897.**

Name H. M. King  
County Cherokee  
Disability  
Amount, \$ 500  
3/2 1897.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

King, H. M.  
ACK OF 2 OCT. 1897.  
(For Those Already Enrolled.)

Geo. W. Harrison, State Printer, Atlanta.

no date



# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }  
Cherokee County. }

Personally appears H. M. King of Cherokee County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the 1st day of July 1866; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Sergeant in Company B, of 14th Regiment of Ca Volunteers, Thomas's Brigade; that whilst engaged in such military service in the State of Virginia, on the 30th day of March 1865, he was wounded, injured or diseased as follows:

By gunshot entering Left temple near the ear  
causing some & lasting near the back of the jaw  
Ball still remaining causing a running sore  
giving applicant considerable trouble & pain

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1896. I have heretofore as a resident of Said county been allowed a pension of fifty dollars, for the year 1895.

Sworn to and subscribed before me, this, the Third day of January 1896. } H. M. King  
A. C. Burr Ordinary

Note—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA, }  
Cherokee County. }

I, A. C. Burr Ordinary of said County, do certify that I am well acquainted with H. M. King the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this Third day of January 1896.



A. C. Burr  
Ordinary of Cherokee County.

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }  
Cherokee County. }

Personally appears H. M. King of Cherokee County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the 1st day of July 1866; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Sergeant in Company B, of 14th Regiment of Georgia Volunteers, Thomas's Brigade; that whilst engaged in such military service in the State of Ca, on the 30th day of March 1865, he was wounded, injured or diseased as follows:

Ball entering Left temple which wound has  
never healed since went to the hospital

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1897. I have heretofore under said law as a resident of Cherokee county been allowed an invalid pension of fifty Dollars, for the year 1896.

Sworn to and subscribed before me, this, the 3rd day of Dec 1897, } H. M. King  
A. C. Burr POST OFFICE

Note—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA, }  
Cherokee County. }

I, A. C. Burr Ordinary of said County, do certify that I am well acquainted with H. M. King the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 3rd day of December 1897.



A. C. Burr  
Ordinary of Cherokee County.

# POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, \_\_\_\_\_ hereby authorize \_\_\_\_\_

of \_\_\_\_\_

to receive and receipt for the pension paid hereon and request that he remit same to

by \_\_\_\_\_

at \_\_\_\_\_

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this \_\_\_\_\_

day of \_\_\_\_\_ 1898.

[L. S.]

Executed in presence of \_\_\_\_\_

ACT OF 31 OCT. 1882.

(For Those Already Enrolled.)

No. 1486

INVALID

SOLDIER'S PENSION.

1898.

Name *F. M. King*

County *Charleston*

Disability *Wound received*

Amount, \$ *52.00*

*2/10* 1898.

RICHARD JOHNSON,  
Commissioner of Pensions.

WARRANT HANDLED TO

*affek*

Geo. W. Harrison, State Printer, Atlanta.

*No data*

STATE OF GEORGIA,

County. }

I, \_\_\_\_\_ hereby authorize \_\_\_\_\_

of \_\_\_\_\_

to receive and receipt for the pension paid hereon and request that he remit same to

by \_\_\_\_\_

at \_\_\_\_\_

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this \_\_\_\_\_

day of \_\_\_\_\_ 1899.

[L. S.]

Executed in presence of \_\_\_\_\_

CODE SECTION 154

(For Those Already Enrolled.)

No. *1362*  
*So Enrolled 1900*

INVALID

SOLDIER'S PENSION.

1899.

Name *F. M. King*

County *Charleston*

Disability *Wound received*

Amount, \$ *52.00*

*2/10* 1899.

RICHARD JOHNSON,  
Commissioner of Pensions.

WARRANT HANDLED TO

*affek*

Geo. W. Harrison, State Printer, Atlanta.

*No data*



# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears F. M. King of Cherokee County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the 7<sup>th</sup> day of July 1876; that he enlisted in the military service of the Confederate States (or of the State of \_\_\_\_\_) during the war between the States, and served as a Sergeant in Company B, of 14th Regiment of Co Volunteers, Thomas's Brigade; that whilst engaged in such military service in the State of Ga, on the 10<sup>th</sup> day of March 1865, he was wounded, injured or diseased as follows:

By gunshot entering Left temple some 2 inches above the ear passing down & leaving near Lock of jaw where Ball still remains in Road

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1898. I have heretofore under said law as a resident of Cherokee county been allowed an invalid pension of

Eighty Dollars, for the year 1897.

Sworn to and subscribed before me, this, the 7<sup>th</sup> day of Jan 1898. POST-OFFICE

A. C. Burr Ordinary  
NOTE—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA,

Cherokee County.

I, A. C. Burr Ordinary of said County, do certify that I am well acquainted with F. M. King the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 10<sup>th</sup> day of Jan 1898.



A. C. Burr  
Ordinary Cherokee County.

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears F. M. King of Cherokee County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the 7<sup>th</sup> day of July 1876; that he enlisted in the military service of the Confederate States (or of the State of \_\_\_\_\_) during the war between the States, and served as a Sergeant in Company B, of 14th Regiment of Co Volunteers, Thomas's Brigade; that whilst engaged in such military service in the State of Ga, on the 10<sup>th</sup> day of March 1865, he was wounded, injured or diseased as follows:

Gunshot in Left temple Ball remaining in the Road now causing separation all the time

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1899. I have heretofore under said law as a resident of Cherokee County been allowed an invalid pension of

Eighty Dollars, for the year 1898.

Sworn to and subscribed before me, this, the 7<sup>th</sup> day of Jan 1899. POST-OFFICE

A. C. Burr Ordinary  
NOTE—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Cherokee County.

I, A. C. Burr Ordinary of said County, do certify that I am well acquainted with F. M. King the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 10<sup>th</sup> day of Jan 1899.



A. C. Burr  
Ordinary Cherokee County.



# POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, F. M. King, hereby authorize

A. B. Cannon, Acting of Cherokee County

to receive and receipt for the pension paid hereon and request that he remit same to

me by

at Cherokee

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 15

day of May, 1901.

F. M. King [L. S.]

Executed in presence of

A. B. Cannon, Acting

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, F. M. King, hereby authorize

A. B. Cannon, Acting of Cherokee County

to receive and receipt for the pension paid hereon and request that he remit same to

me by

at Cherokee

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 15

day of May, 1901.

F. M. King [L. S.]

Executed in presence of

A. B. Cannon, Acting

CODE SECTION 120

(For Those Already Enrolled.)

From 2/4/69 to 2/4/1900

DISABLED

SOLDIER'S PENSION.

1901.

Name F. M. King  
County Cherokee  
Disability Wound & maimed  
Amount, \$ 50.00

2/12 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Corn  
Geo. W. Harrison, State Printer, Atlanta.

No data

CODE SECTION 120

(FOR THOSE ALREADY ENROLLED.)

No. 2114

DISABLED

SOLDIER'S PENSION.  
1902.

Name F. M. King  
County Cherokee  
Co. A. Regiment 10th  
Disability Wound & maimed  
Amount, \$ 50.00

2/4 1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Corn  
Geo. W. Harrison, State Printer, Atlanta.

No data

STATE OF GEORGIA

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

STATE OF GEORGIA

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,  
Cherokee County.

Personally appears H. M. King of Cherokee County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 2<sup>nd</sup> day of July 1836; that he enlisted in the military service of the Confederate States (or of the State of \_\_\_\_\_) during the war between the States, and served as a sargeant in Company B, of 14<sup>th</sup> Regiment of Co Volunteers, Thomas's Brigade; that whilst engaged in such military service in the State of Fla, on the 30<sup>th</sup> day of March 1865, he was wounded, injured or diseased as follows:

Burnshot striking left temple causing  
absorption which continues to present time

Deponent makes application for the pension to which he is entitled for year ending October 26th, 1901. I have heretofore under said law as a resident of Borden County been allowed an invalid pension of Five Dollars, for the year 1900.

Sworn to and subscribed before me, this the 5<sup>th</sup> day of June 1901, Postoffice \_\_\_\_\_

A. C. Burr, Ordng

NOTE.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,  
Cherokee County.

I, A. C. Burr Ordinary of said County, do certify that I am well acquainted with H. M. King the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 5<sup>th</sup>

day of June 1901.

A. C. Burr  
Ordinary Cherokee County.



# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,  
Cherokee County.

Personally appears F. M. King of Cherokee County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 2<sup>nd</sup> day of July 1836; that he enlisted in the military service of the Confederate States (or of the State of \_\_\_\_\_) during the war between the States, and served as a Sargeant in Company B, of 14<sup>th</sup> Regiment of Co Volunteers, Thomas's Brigade; that whilst engaged in such military service in the State of Fla, on the 30<sup>th</sup> day of Mar 1865, he was wounded, injured or diseased as follows:

Burnshot striking left temple

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1902. I have heretofore, under said law, as a resident of Cherokee County, been allowed an invalid pension of Five Dollars, for the year 1901.

Sworn to and subscribed before me, this the 15<sup>th</sup> day of June 1902, Post-office \_\_\_\_\_

A. C. Burr, Ordng

NOTE.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,  
Cherokee County.

I, A. C. Burr Ordinary of said County, do certify that I am well acquainted with F. M. King the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 15<sup>th</sup> day of June 1902.



A. C. Burr  
Ordinary Cherokee County.

NOTE.—Fill all blanks and of Company and Regiment.  
NOTE.—All vouchers and affidavits must bear date after January 1, 1902.

БОМЕР ОВ АЛЛОВИЕА



# POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County. }

I, F. M. King hereby authorize

Mr. S. Wright of Atlanta Ga.

to receive and receipt for the pension paid hereon and request that he remit same to

S. B. Curran & Co. by check at Boston Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 2<sup>nd</sup>

day of Jan 1903.

F. M. King [L. S.]

Executed in presence of

S. B. Curran & Co.

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County. }

I, F. M. King hereby authorize

Mr. S. Wright of Atlanta Ga.

to receive and receipt for the pension paid hereon, and request that he remit same to

S. B. Curran & Co. by check at Boston Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 2<sup>nd</sup>

day of Jan 1904.

F. M. King [L. S.]

Executed in presence of

S. B. Curran & Co.

CODE SECTION 350.  
(FOR THOSE ALREADY ENROLLED.)

No. 2215.

DISABLED

SOLDIER'S PENSION  
1903.

Name F. M. King  
County Cherokee  
Co. K Regiment 14 th Regt  
Disability Dead, & Alarmed  
Amount, \$ 510 00  
2/16 1903.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDLED BY  
Chas. G. Co.  
Geo. W. Harrison, State Printer, Atlanta.

No date

CODE SECTION 350.  
(FOR THOSE ALREADY ENROLLED.)

No. 2267.

DISABLED

SOLDIER'S PENSION  
1904.

Name F. M. King  
County Cherokee  
Co. G Regiment 14 th Regt  
Disability Dead, & Alarmed  
Amount, \$ 510 00  
FEB 18 1904.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDLED TO  
Chas. G. Co.  
Geo. W. Harrison, State Printer, Atlanta.

No date



# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears H. M. King of Cherokee County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of 1876; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Sergeant in Company AK of 14th Regiment of GA Volunteers, Thomas's Brigade; that whilst engaged in such military service in the State of GA, on the 30th day of March 1865, he was wounded, injured or diseased as follows:

Burnshot in left temple, causing  
an ulcer of the nose which still exists

considerable trouble

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1903. I have heretofore, under said law, as a resident of Cherokee County, been allowed an invalid pension of Fifty Dollars, for the year 1902.

Sworn to and subscribed before me, this the 21th day of May, 1903. } H. M. King  
W. C. Carr Ordry Post-office

NOTE.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Cherokee County.

I, W. C. Carr Ordinary of said County, do certify that I am well acquainted with H. M. King the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 21th day of May, 1903.

W. C. Carr  
Ordinary Cherokee County.



NOTE.—Fill all blanks and of Company and Regiment.  
NOTE.—All vouchers and affidavits must bear date after January 1, 1903.

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears H. M. King of Cherokee County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of 1876; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Sergeant in Company K of 14th Regiment of GA Volunteers, Thomas's Brigade; that whilst engaged in such military service in the State of GA, on the 30th day of March 1865, he was wounded, injured or diseased as follows:

Burnshot in head and temple

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1904. I have heretofore, under said law, as a resident of Cherokee County, been allowed an invalid pension of Fifty Dollars, for the year 1903.

Sworn to and subscribed before me, this the 9th day of May, 1904. } H. M. King  
W. C. Carr Ordry Post-office

NOTE.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Cherokee County.

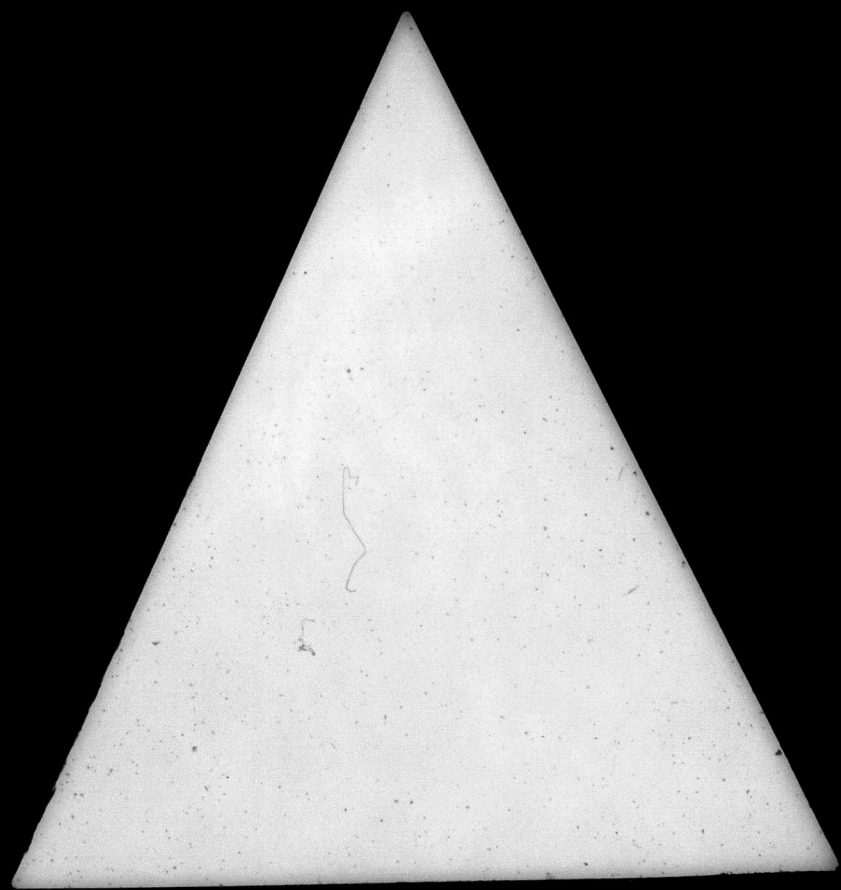
I, W. C. Carr Ordinary of said County, do certify that I am well acquainted with H. M. King the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal, this 9th day of May, 1904.

W. C. Carr  
Ordinary Cherokee County.



NOTE.—Fill all blanks and of Company and Regiment.  
NOTE.—All vouchers and affidavits must bear date after January 1, 1904.



Kinnett, A.E.

Kinnett

Cherokee

No. 929

APPLICATION FOR ALLOWANCE

FOR YEAR ENDING OCT. 31, 1909.

FOR

Left Arm Disabled

Applicant A. E. Kinnett

County Cherokee

Amount 50

Date of Warrant July 27/

Entered on Record

July 27 1909

SECRETARY EXECUTIVE DEPARTMENT

applicant

EX-1012



*Kimmetts, A. L.*  
*Kimmetts*  
*Cherokee Co.*

No. 929

APPLICATION FOR ALLOWANCE

FOR YEAR ENDING, OCT. 26, 1888.

FOR  
*Left Arm Disabled*  
*Applicant A. L. Kimmetts*

County *Cherokee*  
Amount *50*

Date of Warrant *July 27*

Entered on Record,  
*July 27 1889*

Subscribed before me,  
*W. B. Coleman*  
Ordinary

*Applicant*

STATE OF GEORGIA.

*Cherokee* County.  
PERSONALLY appears *A. L. Kimmetts* *Cherokee* county,  
State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resi-  
dent of said State, and has been such continuously since the \_\_\_\_\_ day of  
*December* 1863; that he enlisted in the military service of the Confederate  
States (or of the State of *Georgia*) during the war between the States, and  
served as a *Private* in Company *B*, of *24*th Regiment of  
*Georgia* Volunteers *Sumner's* Brigade; that whilst engaged  
in such military service, at the battle of *Kennesaw* in the  
State of *Georgia*, on the *25*th day of *June* 1864, he was  
wounded as follows: *Gun shot wound of left elbow*  
*joint, carrying away the head of the radius &*  
*both condyles of the humerus of that arm*  
*rendering the arm useless*

Deponent desires to participate in the benefits of the Act, approved October 24, 1887,  
and the Act amendatory thereof, approved Dec. 24, 1888, and makes application for the  
allowance to which he is entitled for the year ending Oct. 26, 1889.

Sworn to and subscribed before me, this *A. L. Kimmetts*  
the *15*th day of *February* 1889

*William W. Patterson*  
Ordinary  
NOTE.—State fully nature of wound or character of disease which causes the disability, and explain particularly  
the extent of the disability.

STATE OF GEORGIA.

*Cherokee* County.  
PERSONALLY comes before me *W. B. Coleman* Ordinary of said  
county, *W. B. Coleman* and *W. B. Coleman*, both known to  
me as reputable physicians of said county, who, being severally sworn, say on oath that they  
have carefully examined *A. L. Kimmetts* and after such examination  
say that the applicant has been injured as follows: *Gun shot wound of*  
*left elbow joint, carrying away the head of the*  
*radius & both condyles of the humerus of that*  
*arm, rendering the arm useless*

Sworn to and subscribed before me, this *John M. Fink*  
*15*th day of *February* 1889 *W. B. Coleman M. D.*

*William W. Patterson*  
ORDINARY.  
NOTE.—The physicians will state fully the extent of the wound, and then give facts to show the extent of the  
disability resulting therefrom.

STATE OF GEORGIA,

*Cherokee* County.

I, *Oeliam M. Putnam* Ordinary of said county, do certify that I am well acquainted with *Adolphus L. Richmond* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county. I also certify that the foregoing witnesses, to-wit:

are persons of respectability, and that their statements are worthy of full credit and belief. I further certify that before whom the foregoing affidavits were made and power of attorney was signed, is a of said county, and that the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 15<sup>th</sup> day of *February* 1887

*Oeliam M. Putnam*

Ordinary, *Cherokee* County.

POWER OF ATTORNEY

STATE OF GEORGIA,

*Cherokee* County.

KNOW ALL MEN BY THESE PRESENTS, That I,

of county, in said State, do hereby appoint of my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

In witness whereof I have hereunto set my hand and seal, this 15<sup>th</sup> day of 1887

(L. S.)

Executed in the presence of us:

DIRECTION:

Send money to me as follows, by to P. O. County, Georgia.

NOTES.

1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physician, and followed by a plain statement of fact showing the extent of the disability. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.
2. The law makes no allowance for an arm or leg, unless the arm or leg has been rendered substantially and essentially useless.
3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of life, etc." There is no qualification to the clause of the Act in reference to the arm or leg, but the limb must for all purposes be "substantially and essentially useless."
4. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."
5. If application is for loss of fingers or toes the proofs must be made to show the number, and points where amputated.
6. If papers are returned for correction, and amendments are added to any of the affidavits, the amendments must be made under oath before an officer, and the proofs must show that the amendments have been duly sworn to.
7. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.



STATE OF GEORGIA,

*Cherokee* County.

I, *O. M. Putnam* Ordinary of said county, do certify that I am well acquainted with *A. L. Kinnett* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county.

I further certify that *James L. Jordan* before whom the foregoing affidavits were made and power of attorney was signed, is a *Clerk Supr. Court* of said county, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this *4<sup>th</sup>* day of *Feb'y* 189*2*

*O. M. Putnam*

Ordinary *Cherokee* County.

STATE OF GEORGIA,

*Cherokee* County.

I, *O. M. Putnam* Ordinary of said County, do certify that I am well acquainted with *Alphonsus L. Kinnett* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this County.

I further certify that *James L. Jordan* before whom the foregoing affidavits were made and power of attorney was signed, is a *Clerk of the Superior Court* of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this *10* day of *February* 189*1*.

*O. M. Putnam*

Ordinary *Cherokee* County.

*Kinnett, A. L.*  
*Cherokee Co.*  
*Kinnett, A. L.*  
**1890.**

No. *368*

APPLICATION FOR ALLOWANCE.

FOR THE YEAR ENDING OCTOBER 31, 1890.

*Left Arm & Leg*

Applicant *A. L. Kinnett*

County, *Cherokee*

Amount, *50*

Date of warrant, *July 6*

Entered on record

*July 6* 189*0*

*M. H. A.*

WARRANT HANDLED TO

*No additional data*

*O. Kinnett*

*Kinnett, A. L.*  
*Cherokee Co.*

**1891.**

*Kinnett, A. L.*  
*Cherokee Co.*

1891.

No. *2925*

Application for Allowance

FOR THE YEAR ENDING OCTOBER 31, 1891.

FOR

*Arm & Leg*

Applicant *A. L. Kinnett*

County, *Cherokee*

Amount, *50*

Date of Warrant, *July 7*

Entered on record *July 7* 189*1*

*W. H. A.*

WARRANT HANDLED TO

*No additional data*

*O. Kinnett*

Geo. W. Harrison, State Printer, Atlanta, Ga.



# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

*Cherokee* County. }  
PERSONALLY appears *A. L. Kimmitt* of *Cherokee* county, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has been such continually since the *24<sup>th</sup>* day of *December* 1864; that he enlisted in the military service of the Confederate States (or of the State of ) during the war between the States, and served as a *private* in Company *B*, of *34<sup>th</sup>* Regiment of *Georgia* Volunteers *Cummins*'s Brigade; that whilst engaged in such military service, at the battle of *Kennesaw Mt.* in the State of *Georgia*, on the *22<sup>nd</sup>* day of *June* 1864, he was wounded as follows: *gun shot wound left elbow joint rendering the joint stiff & thereby useless.*

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1890. I have heretofore been allowed a pension of *Twenty* dollars.

Sworn to and subscribed before me, this the

*4<sup>th</sup>* day of *February* 1890

*James L. Jordan* [L. S.]

NOTE.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability.

## POWER OF ATTORNEY.

STATE OF GEORGIA

*Cherokee* County. }

KNOW ALL MEN BY THESE PRESENTS, That I,

*A. L. Kimmitt*

of *Cherokee*

county, in said State, do hereby appoint

of *Eastern Georgia*

*B. P. Kimmitt* my true and lawful attorney in fact, for me and in my name, to receive and receipt for what ever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this

*24<sup>th</sup>* day of *February* 1890

*A. L. Kimmitt* [L. S.]

Executed in the presence of us:

*James L. Jordan* [L. S.]  
*John L. Evans*

DIRECTION.

Send money to me as follows, by

to

P. O.

County, Georgia.

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

*Sherokee* County. }

PERSONALLY appears *Adolphus L. Kimmitt* of *Sherokee* County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the *25<sup>th</sup>* day of *December* 1862; that he enlisted in the military service of the Confederate States (or of the State of ) during the war between the States, and served as a *Private* in Company *K*, of *34<sup>th</sup>* Regiment of *Georgia* Volunteers *Cummins*'s Brigade; that whilst engaged in such military service at the battle of *Kennesaw* in the State of *Georgia*, on the *22<sup>nd</sup>* day of *June* 1864, he was wounded as follows: *a gun shot in the left elbow joint causing the arm to be stiff and paralyzed away or otherwise rendering it useless.*

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1891. I have heretofore been allowed a pension of *Twenty* dollars, for 1889 & 1890.

Sworn to and subscribed before me, this, the

*10<sup>th</sup>* day of *February* 1891.

*Adolphus L. Kimmitt*

NOTE.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

## POWER OF ATTORNEY.

STATE OF GEORGIA,

*Sherokee* County. }

Know all Men by these Presents, That I, *Adolphus L. Kimmitt*

of *Sherokee* County, State of Georgia, do hereby appoint

*Benjamin H. Brister* of *Sherokee* County

of *State of Georgia* my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this

*10<sup>th</sup>* day of *February* 1891.

*Adolphus L. Kimmitt* [L. S.]

Executed in the presence of us:

*Oak Pasture, Sherokee*

Send money to me as follows, by

to

P. O.

County, Georgia.

# STATE OF GEORGIA.

*Cherokee* County.

I, *Wm. P. Harrison* Ordinary of said county,

do certify that I am well acquainted with *A. L. Harrison* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county.

Given under my official signature and seal, this *18* day of *March* 1892.

*Wm. P. Harrison*

Ordinary, *Cherokee* County.

# POWER OF ATTORNEY.

## STATE OF GEORGIA.

*Cherokee* County.

Know all Men by these Presents, That I *A. L. Harrison* of *Cherokee* County, State of Georgia, do hereby appoint *A. L. Harrison* my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit, hereby authorizing my said attorney to receipt in my name for any money that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *18* day of *March* 1892.

*A. L. Harrison*

Executed in the presence of us:

*Wm. P. Harrison*

*Wm. P. Harrison* Ordinary of said County.

Send money to me as follows, by

STATE OF GEORGIA to P. O.

County, Georgia.

More state this notice of receipt of money...

*Kinnett, W. L.*  
*Cherokee Co.*

No. *2711*

**SOLDIER'S PENSION.**

1892.

FOR THE YEAR ENDING OCTOBER 31, 1892.

Name *A. L. Kinnett*

County *Cherokee*

Disability *Dis. Arm*

Amount \$ *50*

Entered on record *Mch 21* 1892.

W. H. HARRISON,  
Secretary of Executive Department.

AGENT:  
*C. F. Chandler*

Geo. W. Harrison, State Printer, Atlanta, Ga.

*Kinnett, W. L.*

1893.

*Cherokee Co.*

No. *466*

**Application for Allowance**

Applicant, *A. L. Kinnett*

County, *Cherokee*

Amount, *50*

Date of Warrant, *Apr 18*

Entered on record, *Apr 18* 1893.

WARRANT HARRISON

*C. F. Chandler*

Geo. W. Harrison, State Printer, Atlanta, Ga.

Sworn to and subscribed before me this *18* day of *March* 1892.

Witness my hand and seal, this *18* day of *March* 1892.

Notary Public for the State of Georgia.

## STATE OF GEORGIA.

For Applicants Heretofore Allowed Pensions.



# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County,

PERSONALLY appears

Adolphus L. Kinnett

of Cherokee County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of Georgia, and has been such continuously since the 24<sup>th</sup> day of December 1865; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company B, of 54<sup>th</sup> th Regiment of Georgia Volunteers Apennin's Brigade; that whilst engaged in such military service at the battle of Kennesaw in the State of Georgia on the 27<sup>th</sup> day of June 1864, he was wounded as follows: By a shot in the left arm in the elbow joint rendering the arm substantially and essentially useless.

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1892. I have heretofore been allowed a pension of

Twenty Dollars for 1892-1893

Sworn to and subscribed before me this the

A. L. Kinnett

20<sup>th</sup> day of March 1892.

Ordinary

Note.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability.

## POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County,

Know all Men by these Presents, That I,

Adolphus L. Kinnett

County, in said State, do hereby appoint Benny P. Cassler of Cherokee County, my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 20<sup>th</sup> day of March 1892.

A. L. Kinnett [L. S.]

Executed in the presence of us:

Ordinary  
James H. Kelly

DIRECTION.

Send money to me as follows, by

to P. O. County, Georgia.

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County,

PERSONALLY appears

Adolphus L. Kinnett

County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the 24<sup>th</sup> day of December 1865; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company B, of 54<sup>th</sup> th Regiment of Georgia Volunteers Apennin's Brigade; that whilst engaged in such military service at the battle of Kennesaw in the State of Georgia on the 27<sup>th</sup> day of June 1864, he was wounded as follows: By a shot in the left arm in the elbow joint rendering the arm substantially and essentially useless.

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1893. I have heretofore been allowed a pension of

Twenty dollars, for 1892-1893

Sworn to and subscribed before me, this the

A. L. Kinnett

20<sup>th</sup> day of March 1893.

Ordinary

Note.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

## STATE OF GEORGIA.

Cherokee County,

I, Adolphus L. Kinnett

Ordinary of said County,

do certify that I am well acquainted with Adolphus L. Kinnett the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this County.

Further certify that Adolphus L. Kinnett is a bona fide citizen and resident of said State, and has resided therein continuously ever since the 24<sup>th</sup> day of December 1865; that he enlisted in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

Given under my official signature and seal, this 20<sup>th</sup> day of March 1893.

A. L. Kinnett

Ordinary Cherokee County.

## STATE OF GEORGIA.

POWER OF ATTORNEY.



# POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

Know all Men by these Presents, That I,

*Adolphus L. Kinnitt*

of *Cherokee*

County, State of Georgia, do hereby appoint

*B. F. Brainerd*

of *Cherokee*

County, State of Georgia, my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *28th* day of *February*, 1894.

*Adolphus L. Kinnitt*

Executed in the presence of us

*A. C. Burr*

## DIRECTIONS

Send money to me as follows, by

*Cherokee*

to *B. F. Brainerd* P. O.

County, Georgia. *B. F. Brainerd*

# POWER OF ATTORNEY.

STATE OF GEORGIA,

*Cherokee* County.

KNOW ALL MEN BY THESE PRESENTS, That I, *A. L. Kinnitt* of *Cherokee*

County, State of Georgia, do hereby appoint *B. F. Brainerd*

of *Cherokee* County, my true and lawful attorney in fact, for

me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate States (or of this State) as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *28th* day of *Feb*, 1895.

*A. L. Kinnitt*

Executed in presence of us

*A. C. Burr*

## DIRECTIONS.

Send money to me as follows, by

to \_\_\_\_\_ P. O.

County, Georgia.

(For Those Already Enrolled.)

No. *395*  
**Soldier's Pension.**  
**1894.**

Name *Adolphus L. Kinnitt*  
County *Cherokee*  
Disability *Discharge from*  
Amount, \$ *50.00*

*19.25*  
*Secretary Executive Department.*

WARRANT HANDED TO

*at*

Geo. W. Harrison, State Printer, Atlanta.

*No data*

(For Those Already Enrolled.)

No. *860*  
**SOLDIER'S PENSION.**  
**1895.**

Name *A. L. Kinnitt*  
County *Cherokee*  
Disability *and*  
Amount, \$ *60.00*

*3/4*  
**RICHARD JOHNSON,**  
*Secretary Executive Department.*

WARRANT HANDED TO

*at*

Geo. W. Harrison, State Printer, Atlanta.

*No data*

*Mr Kinnitt will have to go to some authority before he can legally sign Kinnitt's name.*

*Kinnitt, Adolphus L. Cherokee*

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

*Cherokee* County. }

PERSONALLY appears *Adolphus Kinnett* of *Cherokee*

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the *24<sup>th</sup>* day of *December* 1863; that he enlisted in the military service of the Confederate States (or of the State of ) during the war between the States, and served as a *private* in Company *B*, of *64th* Regiment of *Georgia* Volunteers, *Cummins*'s Brigade; that whilst engaged in such military service at the battle of *Kennesaw* in the State of *Georgia*, on the *22<sup>nd</sup>* day of *June* 1864, he was wounded as follows: *a gunshot in the left elbow joint shattering the bone stillpinning joint and causing it to perish or shrink thereby rendering it useless*

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1894. I have heretofore been allowed a pension of

*fifty* dollars, for the year 1893

Sworn to and subscribed before me, this, the *Adolphus Kinnett*

*30* day of *February* 1894, }

*J. C. Corn, Ordinary*

NOTE—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA, }

*Cherokee* County. }

I, *J. C. Corn* Ordinary of said County,

do certify that I am well acquainted with *Adolphus Kinnett* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this *30<sup>th</sup>*

day of *February* 1894.



*J. C. Corn*

Ordinary *Cherokee* County.

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

*Cherokee* County. }

Personally appears *A. L. Kinnett* of *Cherokee*

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of 1854; that he enlisted in the military service of the Confederate States (or of the State of ) during the war between the States, and served as a *Private* in Company *B*, of *34<sup>th</sup>* Regiment of *Georgia* Volunteers, *Cummins*'s Brigade; that whilst engaged in such military service at the battle of *Kennesaw Mountain* in the State of *Georgia*, on the *22<sup>nd</sup>* day of *June* 1864, he was wounded as follows: *gunshot in left elbow causing disability of said arm*

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26th, 1895. I have heretofore been allowed a pension of

*fifty* dollars, for the year 1893

Sworn to and subscribed before me, this, the *A. L. Kinnett*

*31<sup>st</sup>* day of *Feb* 1895, }

*J. C. Corn, Ordinary*

NOTE—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA, }

*Cherokee* County. }

I, *J. C. Corn* Ordinary of said County,

do certify that I am well acquainted with *A. L. Kinnett* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this *31<sup>st</sup>* day of *February* 1895.



*J. C. Corn*

Ordinary *Cherokee* County.



# POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County. }

I, A. L. Kennett hereby authorize R. F. Carleton  
of Cherokee County

to receive and receipt for the pension paid hereon and request that he remit same to

at Barton Co.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 12th  
day of Feb, 1896.

A. L. Kennett [L. S.]

Executed in presence of us

S. C. Carr

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County. }

I, A. L. Kennett hereby authorize R. F. Carleton  
of Cherokee County

to receive and receipt for the pension paid hereon and request that he remit same to

at Barton Co.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 12th  
day of Feb, 1897.

A. L. Kennett [L. S.]

Executed in presence of

S. C. Carr

Kennett, Adolphus L.

to Cherokee Co.

ACT OF 31 OCT. 1887.

(For Those Already Enrolled.)

No. 3369

**SOLDIER'S PENSION.**

**1896.**

Name A. L. Kennett

County Cherokee

Disability Disabled arm

Amount, \$50.00 Dollars

4/14 1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

att

Geo. W. Harrison, Secretary of Pension.

no data

Kennett, Adolphus L.

Cherokee County

ACT OF 31 OCT. 1887.

(For Those Already Enrolled.)

No. 2883

**INVALID**

**SOLDIER'S PENSION.**

**1897.**

Name Adolphus L. Kennett

County Cherokee

Disability Left arm

Amount, \$50.00

1897.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

att

Geo. W. Harrison, Secretary of Pension.

no data



# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears Adolphus L. Kennett of Cherokee County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 25 day of Dec 1863; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company B, of 44th Regiment of Georgia Volunteers, Dumming's Brigade; that whilst engaged in such military service in the State of Georgia, on the 22nd day of June 1863, he was wounded, injured or diseased as follows:

Got gun shot in the left elbow joint  
causing it to shrink or perish or  
way rendering it useless

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1896. I have heretofore as a resident of Cherokee county been allowed a pension of \$5.00 dollars, for the year 1895.

Sworn to and subscribed before me, this, the 17th day of July, 1896. } Adolphus L. Kennett

A. C. Brown Ordinary  
Note—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA,

Cherokee County.

I, A. C. Brown Ordinary of said County, do certify that I am well acquainted with A. L. Kennett the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 17th day of July, 1896.



A. C. Brown  
Ordinary Cherokee County.

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears Adolphus L. Kennett of Cherokee County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 25 day of December 1863; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company B, of 44th Regiment of Georgia Volunteers, Dumming's Brigade; that whilst engaged in such military service in the State of Georgia, on the 22 day of June 1863, he was wounded, injured or diseased as follows:

One gun shot in the left elbow joint  
causing it to shrink or perish or  
rendering it useless to for manual  
labor to concerned

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1897. I have heretofore under said law as a resident of Cherokee county been allowed an invalid pension of \$5.00 Dollars, for the year 1896.

Sworn to and subscribed before me, this, the 17th day of July, 1897. } Adolphus L. Kennett

A. C. Brown Ordinary  
Note—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA,

Cherokee County.

I, A. C. Brown Ordinary of said County, do certify that I am well acquainted with Adolphus L. Kennett the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 17th day of July, 1897.



A. C. Brown  
Ordinary Cherokee County.

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, A. L. Kinnett hereby authorize W. A. Gosley  
of Atlanta Ga

to receive and receipt for the pension paid hereon and request that he remit same to  
by cash  
at Atlanta Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 26<sup>th</sup>  
day of Feb 1898.

A. L. Kinnett [L. S.]

Executed in presence of

A. B. Cunningham

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, A. L. Kinnett hereby authorize W. A. Gosley  
of Atlanta Ga

to receive and receipt for the pension paid hereon and request that he remit same to  
by cash  
at Atlanta Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 26<sup>th</sup>  
day of Jan 1899.

A. L. Kinnett [L. S.]

Executed in presence of

A. B. Cunningham

Kinnett A. L.  
A. B. Cunningham

ACT OF 31 OCT. 1867.

(For Those Already Enrolled.)

No. 3307

INVALID

SOLDIER'S PENSION.

1898.

Name A. L. Kinnett  
County Cherokee  
Disability Amputation  
Amount, \$ 50.00  
3/11 1898.

RICHARD JOHNSON,  
Commissioner of Pensions.

WARRANT HANDED TO  
W. A. Gosley  
SEC. W. HARRISON, STATE PRINTER, ATLANTA.

No data

Kinnett A. L.  
A. B. Cunningham

CODE SECTION 126.

(For Those Already Enrolled.)

No. 1741

INVALID

SOLDIER'S PENSION.

1899.

Name A. L. Kinnett  
County Cherokee  
Disability Disability  
Amount, \$ 50.00  
2/15 1899.

RICHARD JOHNSON,  
Commissioner of Pensions.

WARRANT HANDED TO  
W  
SEC. W. HARRISON, STATE PRINTER, ATLANTA.

No data



# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

charleston County.

Personally appears A. L. Kinnett of charleston County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the day of 1864; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company B, of 14th Regiment of Volunteers, Hamming's Brigade; that whilst engaged in such military service in the State of Georgia, on the 22 day of June, 1864, he was wounded, injured or diseased as follows:

Wounded in Left Elbow joint

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1898. I have heretofore under said law as a resident of charleston county been allowed an invalid pension of

Twenty Dollars, for the year 1897

Sworn to and subscribed before me, this, the 24 day of July, 1898. A. L. Kinnett POST-OFFICE

A. L. Kinnett  
NOTE—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA,

charleston County.

I, A. L. Kinnett Ordinary of said County, do certify that I am well acquainted with A. L. Kinnett the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 24 day of July, 1898.



A. L. Kinnett  
Ordinary charleston County.

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

charleston County.

Personally appears A. L. Kinnett of charleston County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the day of 1864; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company B, of 14th Regiment of Volunteers, Hamming's Brigade; that whilst engaged in such military service in the State of Georgia, on the 22 day of June, 1864, he was wounded, injured or diseased as follows:

Wounded in Left Elbow joint in both arms  
he is there by June 1864

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1899. I have heretofore under said law as a resident of

charleston County been allowed an invalid pension of

Twenty Dollars, for the year 1898

Sworn to and subscribed before me, this, the 24 day of January, 1899. A. L. Kinnett POST-OFFICE

A. L. Kinnett  
NOTE—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

charleston County.

I, A. L. Kinnett Ordinary of said County, do certify that I am well acquainted with A. L. Kinnett the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 24 day of January, 1899.



A. L. Kinnett  
Ordinary charleston County.



# POWER OF ATTORNEY:

STATE OF GEORGIA,

Cherokee County.

I, A. L. Kinneth hereby authorize W. H. Wright of Atlanta Ga.

to receive and receipt for the pension paid hereon and request that he remit same to

A. L. Kinneth by check

at Atlanta Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 11<sup>th</sup>

day of Jan 1900.

A. L. Kinneth [L. S.]

Executed in presence of

A. L. Kinneth

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, A. L. Kinneth hereby authorize

A. L. Kinneth of Atlanta Ga.

to receive and receipt for the pension paid hereon and request that he remit same to

A. L. Kinneth by check

at Atlanta Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 25<sup>th</sup>

day of Jan 1901.

A. L. Kinneth [L. S.]

Executed in presence of

A. L. Kinneth

Kinneth, A. L.  
Cherokee  
CODE SECTION 120.  
(For Those Already Enrolled.)

No. 3075

INVALID

SOLDIER'S PENSION.

1900.

Name A. L. Kinneth

County Cherokee

Disability disabled arm

Amount, \$ 50

Warrant issued Mar 13 1900.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDLED TO

Wright  
Geo. W. Harrison, State Printer, Atlanta.

No data

(For Those Already Enrolled.)

No. 2465

DISABLED

SOLDIER'S PENSION.

1901.

Name A. L. Kinneth

County Cherokee

Disability Disabled arm

Amount, \$ 50.00

Warrant issued 2/12 1901.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDLED TO

Wright  
Geo. W. Harrison, State Printer, Atlanta.

No data

STATE OF GEORGIA

For Applicants Heretofore Allowed Pensions.

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears A. L. Kinnett of Cherokee County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State and County, and has resided therein continuously ever since the 25 day of December 1863; that he enlisted in the military service of the Confederate States (or of the State of \_\_\_\_\_) during the war between the States, and served as a Private in Company B, of 84 th Regiment of Ga Volunteers, Sumner's Brigade; that whilst engaged in such military service in the State of Ga, on the 21 day of June 1864, he was wounded, injured or diseased as follows:

at a near hammer saw Mountain & burst state  
in Left Elbow joint

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1900. I have heretofore under said law as a resident of Cherokee County been allowed an invalid pension of Eight Dollars, for the year 1899.

Sworn to and subscribed before me, this the A. L. Kinnett 11<sup>th</sup> day of January 1900. POST OFFICE

A. L. Kinnett

NOTE.—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Cherokee County.

I, A. L. Kinnett Ordinary of said County, do certify that I am well acquainted with A. L. Kinnett the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 11 day of Jan 1900.



A. L. Kinnett  
Ordinary Cherokee County.

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears A. L. Kinnett of \_\_\_\_\_ County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the 25 day of Dec 1863; that he enlisted in the military service of the Confederate States (or of the State of \_\_\_\_\_) during the war between the States, and served as a Private in Company B, of 84 th Regiment of Ga Volunteers, Sumner's Brigade; that whilst engaged in such military service in the State of Ga, on the 21 day of June 1864, he was wounded, injured or diseased as follows:

burst state in Left Elbow joint

Deponent makes application for the pension to which he is entitled for year ending October 26th, 1901. I have heretofore under said law as a resident of Cherokee County been allowed an invalid pension of Eight Dollars, for the year 1899.

Sworn to and subscribed before me, this the A. L. Kinnett 26<sup>th</sup> day of Jan 1901. Postoffice

A. L. Kinnett

NOTE.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Cherokee County.

I, A. L. Kinnett Ordinary of said County, do certify that I am well acquainted with A. L. Kinnett the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 25 day of Jan 1901.



A. L. Kinnett  
Ordinary Cherokee County.



# POWER OF ATTORNEY.

STATE OF GEORGIA

Cherokee County.

I, A. L. Kennett

hereby authorize

W. C. Brown, Esq.

of Cherokee County

to receive and receipt for the pension paid hereon and request that he remit same to

me by check at San Francisco

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 1st

day of May 1903.

STATE OF GEORGIA

A. L. Kennett [L. S.]

Executed in presence of

W. C. Brown, Esq.

CODE SECTION 136.  
(FOR THOSE ALREADY ENROLLED.)

No. 2112

DISABLED

SOLDIER'S PENSION  
1902.

Name A. L. Kennett

County Cherokee

Co. D Regiment 34 Regt

Disability Disability

Amount, \$ 50.00 74 1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Ordy

Gen. W. Harrison, State Printer, Atlanta.

No data

Kennett, A. L.  
Cherokee Co.

CODE SECTION 136.  
(FOR THOSE ALREADY ENROLLED.)

No. 2217

DISABLED

SOLDIER'S PENSION  
1903.

Name A. L. Kennett

County Cherokee

Co. D Regiment 34 Regt

Disability Disability

Amount, \$ 50.00 74 1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Ordy

Gen. W. Harrison, State Printer, Atlanta.

No data

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, A. L. Kennett

hereby authorize

W. C. Brown, Esq.

of Cherokee Co.

to receive and receipt for the pension paid hereon and request that he remit same to

me by check

at San Francisco

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 7

day of May 1903.

A. L. Kennett [L. S.]

Executed in presence of

W. C. Brown, Esq.





*A. C. Benson Esq*

Clayton.

Gen. W. Harrison, State Printer, Atlanta.

no date

Winnett, A. L.  
Chas. & Co.

THE BARNES PRINTING AND PUBLISHING CO., ATLANTA

no data



# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears W. S. Bennett of Cherokee County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of 1857; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company B, of 14th Regiment of Georgia Volunteers Cummins's Brigade; that whilst engaged in such military service in the State of Georgia, on the 27th day of June 1864, he was wounded, injured or diseased as follows:

Wounded in left arm.

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1904. I have heretofore, under said law, as a resident of Cherokee County, been allowed an invalid pension of \$1.50 Dollars, for the year 1903.

Sworn to and subscribed before me, this the 7th day of January, 1904.

W. S. Bennett

W. S. Bennett  
Post-office

NOTE.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Cherokee County.

I, W. S. Bennett Ordinary of said County, do certify that I am well acquainted with W. S. Bennett the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal, this 7th day of January, 1904.

W. S. Bennett  
Ordinary Cherokee County.

NOTE.—Fill all blanks and of Company and Regiment.

NOTE.—All vouchers and affidavits must bear date after January 1, 1904.



# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee COUNTY.

Personally appears A. L. Kenneth of Cherokee County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of 1853; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a private in Company B, of 14th Regiment of Georgia Volunteers Cummins's Brigade; that whilst engaged in such military service in the State of Georgia, on the 27th day of June 1864, he was wounded, injured or diseased as follows:

Wounded in left arm.

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1905. I have heretofore, under said law, as a resident of Cherokee County, been allowed an invalid pension of \$1.50 Dollars, for the year 1904.

Sworn to and subscribed before me, this the

6 day of January, 1905.

W. S. Bennett

W. S. Bennett  
Post-office Canton

NOTE.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Cherokee COUNTY.

I, W. J. Webb Ordinary of said County, do certify that I am well acquainted with A. L. Kenneth the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal, this 6th day of January, 1905.

W. J. Webb  
Ordinary Cherokee County.

NOTE.—Fill all blanks and of Company and Regiment.

NOTE.—All vouchers and affidavits must bear date after January 1, 1905.





# POWER OF ATTORNEY.

STATE OF GEORGIA.

Cherokee COUNTY.

I, A. L. Kennett hereby authorize  
W. J. Webb of Canton Ga  
to receive and receipt for the pension paid hereon, and request that he remit same to  
by \_\_\_\_\_

at \_\_\_\_\_  
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 6<sup>th</sup>  
day of Jan 1906.

A. L. Kennett [L. S.]

Executed in the presence of

F. M. Webb

(FOR THOSE ALREADY ENROLLED.)

No. 1107

DISABLED  
SOLDIER'S PENSION  
1906.

Name A. L. Kennett  
County Cherokee  
Co. B. Regiment 24<sup>th</sup> Ga.  
Disability shot in arm  
Amount, \$ 50.00  
7/1 1906.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

The Pensioner's and Pensioner's Co., 100 W. Washington, St.

no date

Kennett, A. L.  
Cherokee Co.

(FOR THOSE ALREADY ENROLLED)

No. 2089

DISABLED  
SOLDIER'S PENSION  
1907.

Name A. L. Kennett  
County Cherokee  
Co. B. Regiment 24<sup>th</sup>  
Disability Left arm disabled  
Amount, \$ 50.00  
FEB 13 1907.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

The Pensioner's and Pensioner's Co., 100 W. Washington, St.

no date

# POWER OF ATTORNEY.

STATE OF GEORGIA.

Cherokee COUNTY.

I, A. L. Kennett hereby authorize  
W. J. Webb of Canton  
to, receive and receipt for the pension paid hereon, and request that he remit same to  
by \_\_\_\_\_

at \_\_\_\_\_  
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 3<sup>rd</sup>  
day of Jan 1907.

A. L. Kennett [L. S.]

Executed in presence of

F. M. Webb

(FOR THOSE ALREADY ENROLLED)

No. 2089

DISABLED  
SOLDIER'S PENSION  
1907.

Name A. L. Kennett  
County Cherokee  
Co. B. Regiment 24<sup>th</sup>  
Disability Left arm disabled  
Amount, \$ 50.00  
FEB 13 1907.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

The Pensioner's and Pensioner's Co., 100 W. Washington, St.

no date

STATE OF GEORGIA.

FOR APPLICANTS HERETOFORE ATTORNEY PENSIONS

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Cherokee County.

Personally appears A. L. Himmitt of \_\_\_\_\_  
County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen  
and resident of said State, and has resided therein continuously ever since the  
day of \_\_\_\_\_ 1855; that he enlisted in the military service of the Con-  
federate States, (or of the State of Ga) during the war between the  
States, and served as a Private in Company B, of 24th Regiment  
of Ga Volunteers Cummings's Brigade; that whilst engaged  
in such military service in the State of Ga, on the 22 day  
of June 1864, he was wounded, injured or diseased as follows:

Shot in left arm

Deponent makes application for the pension to which he is entitled for the year  
ending October, 28th, 1906. I have heretofore, under said law, as a resident of  
Cherokee County, been allowed an invalid pension of  
Fifty Dollars, for the year 1905.

Sworn to and subscribed before me, this the \_\_\_\_\_  
day of \_\_\_\_\_ 1906.

A. L. Himmitt  
Post-Office \_\_\_\_\_

NOTE.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

State of Georgia,

Cherokee County.

I, W. J. Webb Ordinary of said County,  
do certify that I am well acquainted with A. L. Himmitt  
the applicant in the foregoing affidavit, and am well satisfied that the statements made  
by him in his said affidavit are true, and I know he is the individual he represents himself  
to be, and that he resides in this County.

Given under my official signature and seal, this 6  
day of Jan 1906.

W. J. Webb  
Ordinary Cherokee County.



NOTE.—Fill all blanks and of Company and Regiment.  
NOTE.—All vouchers and affidavits must bear date after January 1st, 1906.

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Cherokee County.

Personally appears A. L. Himmitt of Cherokee  
County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen  
and resident of said State, and has resided therein continuously ever since the  
day of \_\_\_\_\_ 1855; that he enlisted in the military service of the Con-  
federate States (or of the State of Georgia) during the war between the  
States, and served as a Private in Company B, of 34th Regiment  
of Georgia Volunteers Cummings's Brigade; that whilst engaged  
in such military service in the State of Georgia, on the 27 day  
of Jan 1864, he was wounded, injured or diseased as follows:

Left arm disabled

Deponent makes application for the pension to which he is entitled for the year  
ending October 28th, 1907. I have heretofore, under said law, as a resident of  
Cherokee County, been allowed an invalid pension of  
Fifty Dollars, for the year 1906.

Sworn to and subscribed before me, this the \_\_\_\_\_  
day of Jan 1907.

A. L. Himmitt  
Postoffice Canton Ga

NOTE.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

State of Georgia,

Cherokee County.

I, W. J. Webb Ordinary of said County,  
do certify that I am well acquainted with \_\_\_\_\_  
the applicant in the foregoing affidavit, and am well satisfied that the statements made  
by him in his said affidavit are true, and I know he is the individual he represents himself  
to be, and that he resides in this County.

Given under my official signature and seal this 2  
day of Jan 1907.

W. J. Webb  
Ordinary Cherokee County.



NOTE.—Fill all blanks and of Company and Regiment.  
NOTE.—All vouchers and affidavits must bear date after January 1st, 1907.



Audited

Feb. 27 1889.  
Wm. A. Migher  
COMPTROLLER GENERAL.

Cherokee

Maimed Soldiers.

Voucher No. 929

Amount. \$ 50.

Paid to A. L. Kinnett

For Left arm  
disabled

Feb. 27. 1889.

Included in Warrant No.  
issued to Treasurer.

1889.

WARRANT CLERK.

W. J. Campbell, State Printer, Constitution Job Office.

Applicant

Cherokee

Maimed Soldiers.

Voucher No. 368

Amount \$ 50

Paid to A. L. Kinnett

For Left arm  
disabled

Feb. 6 1890

Included in warrant No.  
issued to Treasurer.

18

WARRANT CLERK.

W. J. Campbell, State Printer, Constitution Job Office.

B. F. Hensler

Kinnett, A. L.  
Cherokee

1891.

Maimed Soldiers.

Voucher No. 2925

Amount \$ 50

Paid to A. L. Kinnett

For Arm dis

Apr 7

1891.

Included in warrant No.  
issued to Treasurer.

1891.

WARRANT CLERK.

Geo. W. Harrison, State Printer, Atlanta.

B. F. Hensler