STATE OF GEORGIA. Cherolie 1. Odian N. Potnam do certify that I am well acquainted with Malliams P. Danlow 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 repesents himself to be, and that he resides in this county. Given under my official signature and seal, this final day of March 1892 Ochan W. Patnam Ordinary Loherolau

Prefere Mowed Pensions.

idual he represents to the Octo be, and that he rasid 1808 this County. said affidavit are true, and that he is drait Send money to me as follows, by County, Georgia States, and served as a resident of said State, and has resided therein continuously ever since the county, State of Georgia, wito, being duly sworn, says on data that he is a John Hale citizen a STATE OF GEORGIA. For Applicants Heretofore Allowed Pensions.

### POWER OF ATTORNEY.

Know all Men by these Presents, That I

rol Applicants Heletolore Allowed, Ferisions.
STATE OF GEORGIA
County. Da
Personally appears William P. Daylor
of 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 26 day of April 1858; 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 Production in Company M.,
of 5% th Regiment of Microson Volunteers Commanding 's
Brigade ; that whilst engaged in such military service at the battle of Balkuro Levelle
in the State of Priso, on the Brotherston day of months of 1865, he was wounded as follows: Long Apont Short in the gright arm. Loresting the come both above and wellow the elbow, vendering it pulsationhally and so entrally melos
many 1868, he was wounded as follows: long sand what
in the right arm. leveating the come both above and
telow the elbow, vendering it polistantially and exentically
MILLION
And the second s
and the second s
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  Dollars for 1890 - 1891  Sworn to and subscribed before me this the
forest day of march 1892.
ON PARTICINA . Ordinary.  Norze—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.
L'her sell County.
Know all Men by these Presents, That I, William & Danley
of tohenoku
County, in said State, do hereby appoint Ira. Jones
at All with Freehord Comment. He my true and lembel attenue in that the
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 Proposition
day of morely -1892. War J. Jaylon [1. 8.]
[L. S.]
Executed in the presence of us:
Old Propram Cordinara
11. A. Kitchen
DIRECTION.
Send money to me as follows, by
P. O.
County, Georgia.

For Applicants Heretofore Allowed Pensions.
STATE OF GEORGIA.
Promoter appears Wellram & Onefer of Chierten
County, State of Georgia, who, being duly sworn, says on outh that he is a few side cities and
resident of said State, and has resided therein continuously ever since the
day of Thermony 18:7; that he collected in the military service of the Confederate States (or of the State of Marrie 1).
States, and served as a . Osimate in Company A. of T th Regiment
of the langulante Volunteers Learnering 's Brigade; that whilst engaged in such military service at the battle of Bollegy Hannel
wounded as follows: In Hand Short Secretary in the middle come
they bener Wer the Moon producing the live any
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Deponent desires to present the besefus of the Act, approved October sath, 1887, and
Deponent desires to presidente in the benefit of the Act, approved October sath, 1887, and the acts amendatory sharted, and makes application for the allowance to which it is entitled for the year ending October 36, 1833. I have heretolore been allowed a pension of 4.52.  Collars, for 1830-1841, 2-1822.  Sworn to and subscribed before me, this, the 1 14402.
Sworn to and subscribed before me, this, the 1 7 mm. J. Jan Lon
14 day of Granole 1801
Allen 6 6 cm andiversal
Mora. Bute fully nature of wound or character of disease which causes the disability, and captain farsicalarly the extent of the
STATE OF GEORGIA, ) To
Schill before the as (slower)
1, Allen to Lacrons DESCRICE Ordinary of said County,
do certify that I am well acquainted with Walls and P. Dangler 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 in-
dividual he represents himself to be, and that he residends this County.
Light WAS grett HARRON, I have hereunto but my hand and deals tons
the Contederate States (or of this State), as stated in the content of the content of pages around the content of the content
the Canted and States (or of this State) as stated in the Canted as States of States (or of this State) as stated in the Canted as States (or of this State) as stated in the Canted and Canted as States (or of this State) as stated in the Canted and States (or of this State) as stated in the Canted and States (or of this State) as stated in the Canted and States (or of this State) as stated in the Canted States (or of this State) as stated in the Canted States (or of this State) as stated in the Canted States (or of this State) as stated in the Canted States (or of this State) as stated in the Canted States (or of this State) as stated in the Canted States (or of this State) as stated in the Canted States (or of this State) as stated in the Canted States (or of this State) as stated in the Canted States (or of this State) as stated in the Canted States (or of this State) as stated in the Canted States (or of this State) as stated in the Canted States (or of this State) as stated in the Canted States (or of this State) as stated in the Canted States (or of this State) as stated in the Canted States (or of this State) as stated in the Canted States (or of this State) as stated in the Canted States (or of this State) as stated in the Canted States (or of this States) as stated in the Canted States (or of this States) as stated in the Canted States (or of this States) as stated in the Canted States (or of this States) as stated in the Canted States (or of this States) as stated in the Canted States (or of this States) as stated in the Canted States (or of this States) as stated in the Canted States (or of this States) and the Canted States (or of this States) as stated in the Canted States (or of this States) as stated in the Canted States (or of this States) as stated in the Canted States (or of this States) are stated in the Canted States (or of this States) and the Canted States (or of thi
Given under my official algorithm and seal, this day of the work I may be counted to
Given under my official signature and seal, this /3 day of 9800007 to 130186).

FOWER OF ATTORNEY,

County, Outpart

Know out, Men by these Presents, Date of Separations

		COUNTY.		
				and the same of th
of				d lawful attorney in fact, fo may be entitled to from th
States (or of the ney to receipt in which may be co	his State), as state n my name for any b coming to me for the	d in the foregoing Varrant that may be reason aforesaid.	affidavit; hereby	y service of the Confederat authorizing my said Attor- nor, or for any sum of mone- his.
day of		1894.		[L. s.
Execu	ited in the presence	of us		-
		)		
		DIRECT	IONS.	
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Send mone	ey to me as follows,			D (
Send mone	ry to me as tonows.	to County, Geo		
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		to	1681 - 1681	re Department.
	S Pepsion.	to	1681 - 1681	re Department.
Those Already Enrolled.)		to	1681 - 1681	partment

POWE	R OF A	110	RNEY.			
STATE OF GEORGIA,	}					
County	. \$					
KNOW-ALL MEN BY THESE P	RESENTS, Th	at ,I,				
County, State of Georgia, do hereby ap	point		•			***************************************
of			my true and le	awful att	orney in fact,	for
me and in my name, to receive and rece State of Georgia by reason of an injury States (or of this State) as stated in the in my name for any Warrraut that may be coming to me for the reason aforesaid	received as afor oregoing affidav be issued by the	resaid in	the military se	rvice of	the Confeder	ate ipt
IN WITNESS WHEREOF, I b		t my hai	nd and seal, this			
day of			•			
Executed in presence of us	1				[L.	8.]
parameter and	)					
	)					
	DIRMOM	0110				
Send money to me as follows, by	DIRECTI					
Send money to me as follows, by		MRT - 101 - 14			P	Ο.
	County, Geor	gia.				0.
	and the second s	and the same				
11	1 1 1	T	<u> </u>	7	5 11	
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\$ \\rangle \sqrt{\sq}}}}}}}}}}}}} \simptintiles \sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}}}} \sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}} \signignignignightares \sqrt{\sq}}}}}}}}} \sqit{\sqrt{\sq}\signt{\sq}\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}} \sqrt{\sqrt{\s	0.0	3	9	elar	1 2	B. /
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	300	0	0 / 2		0	W. H
	1 20	, ,	* / *			8 5
	Name Ma.	Disability Q	Amount, \$6.			4
3	Nam	Disa	Amo			
		_	-		''	

### For Applicants Heretofore Allowed Pensions.

101 ubbutoning marabatara muanar rangiana.
STATE OF GEORGIA,
County.
PERSONALLY appears M. P. Taylor of bhonskow
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 1839; that he enlisted in the military service of the Con-
federate States (or of the State of ) during the war between the
States, and served as a Private in Company 4, of 12 th Regiment
of Ginge's Volunteers bummane's Brigade; that whilst engaged in such military service at the battle of Rahina, bass M. in the State
such military service at the battle of Walling, based in the State
of Manager 1862, on the 16 day of Many 1862, he was
wounded as follows: We want towne though agett ann
a boul 4, bolow the of bear Rendening waid around
wounded as follows: By Aums III toware though Right amon a Lower Y below the olber Rondoning Said anson Essimanally selles
1,
The second secon
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
dollars, for the year 1890
Sworn to and subscribed before me, this, the \ W Toylor
Watt day of Mannh 1894.
A, b, borns, wadinare
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.
County.
I, Allow, b, boson Ordinary of said County.
do certify that I am well acquainted with , %, C. Fago los 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 Mana 1 1894.
Affix
See Allent & born
Ordinary Laborate W County

### For Applicants Heretofore Allowed Pensions.

STATE OF	GEORGIA,	1	
Chorotto	Count	y.)	
personally a	pears William	. Taylor of toho	rekod
The state of the s		sworn, says on oath that h	
and resident of said	State, and has resided	therein continuously ever	since the
lay of	1878 tl	at he enlisted in the mili	tary service of the Con-
ederate States (or	of the State of	) durin	g the war between the
States, and served	a Prevale	in Company	, of & 6 th Regiment
of liponeria	Volunteers, land	manang, 's Brigade;	that whilst engaged in
uch military service	at the battle of B	n Meso, borock	in the State
& Moanolaha	on the	day of Ma	186 0, he was
wounded as follows:	is another m	Regt arm a	bone Y Below
The Elkow		ð	\$
Adaption and the State of the same			
	modelina. en	The second control of the control of	
	Page of the same of	de serience de la constant de la con	
and the second s	- Vis	and the grounding statement of the state	The state of the s
An annual contract of the cont	and the state of t	and the second s	- approximation of the second
28 day o	subscribed before me, the fameway was a ware of wound or character of diom to wound or disease.		Taylor d emplain particularly the extent
STATE OF	GEORGIA,	)	
	the Count	v. }	
	6.born	-	dinary of said County,
i	mall acquainted with	William, P. Ja	select the
do certify that I am	recing effdavit and an	n well satisfied that the s	tatements made by him
		he is the individual he r	
		ne is the individual he i	epresents ministr to be
and that he resides	Civen under mu	official signature and sea	this 29 Th
	den ef lancer my c	micial signature and sea	, шв 🍛 /
	day of famuao	1895.	
AME	C 5 117	211	
mail	#MANAGE CONTROL OF	D, te, bon	22
		Ordinary of lehoad	
	OW ! R O	Ordinary of 10 2000	Rea County.

## POWER OF ATTORNEY. STATE OF GEORGIA, Shankee County. I. Mr. P. Taylor hereby authorize T. W. holloge of Shankee bounts to receive and receipt for the pension paid hereon and request that he remit same to by Shank IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 144 day of March 1896. Executed in presence of us D. bound adding bhenshoel, bound

## Soldier These Aready Enrolled.) Soldier These Aready Enrolled.) No. 3170 Name M. M. Sayles County Disablily desabled asom Amount, s. 62 00 Delland Amount, s. 62 00 Dell

### POWER OF ATTORNEY.

SIAI	E OF GEORGIA,
•	County.
I,	hereby authorize
<b>A</b>	of
to receiv	we and receipt for the pension paid hereon and request that he remit same to
at	
IN	WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of	1897.
	[L. S.]
	Executed in presence of

Soldler's PENSION.  Soldler's PENSION.  18897.	Name 1922, J. Say los  County Lohonethee  Disability Ricellod, custor  Amount, \$500,00  Amount, \$500,00  RICHARD JOHNSON,  Commissions of Practice.  WARRANT HANDED TO
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For Applicants if refutore Allowed Pensions.

### For Applicants Heretofore Allowed Pensions.

1	
The same of the same of the same	
Dersonally appears 27. P. Jaylor of Sharked County, State of Georgia, who being duly sworn, says on oath that he is a bone fide citi	zen
nd resident of said State, and has resided therein continuously ever since the	
ay of afril 1808; that he enlisted in the military service of the C	on-
ederate States (or of the State of	the
ederate States (or of the State of) during the war between states, and served as a Privallyin Company, of & th Regime	ent
f beorge'a Volunteers, bannanenge's Brigade; that whilst enga	ged
n such military service in the State of Miss , on the 16	day
186 V he was wounded injured or diseased as follows:	
busetet in Right arm a level	Z
Solw Sobor fint	-
solul Ilbert gane	
	7
	-
and the second second to the second s	
Chontho a county been allowed a pension of Haffe	
Sworn to and subscribed before me, this, the    William   Jay of March 1896.     Mors-State fully the nature of wound or character of disease which causes the disability, and explain particularly the of the disability, resulting from the wound or disease.	exten
Sworn to and subscribed before me, this, the day of March 1896.  Norze-State fully the nature of wound or character of disease which causes the disability, and explain particularly the of the disability, resulting from the wound or disease.  STATE OF GEORGIA,	exten,
Sworn to and subscribed before me, this, the day of March 1896.  Norse-State fully the nature of wound or character of disease which causes the disability, and explain particularly the of the disability, resulting from the wound or disease.  STATE OF GEORGIA,	exten
Sworn to and subscribed before me, this, the wind of the disability, and explain particularly the extra of the disability, resulting from the wound or disease.  STATE OF GEORGIA,  Charker County.	exten.
Sworn to and subscribed before me, this, the  day of Marah 1896.  Nors—State fully the nature of wound or character of disease which causes the disability, and explain particularly the of the disability, resulting from the wound or disease.  STATE OF GEORGIA,  Charker County.  I. Abelian Ordinary of said County.	
Sworn to and subscribed before me, this, the  day of March 1896.  Norz-State fully the nature of wound or character of disease which causes the disability, and explain particularly the of the disability, resulting from the wound or disease.  STATE OF GEORGIA,  County.  I, Abborrow Ordinary of said County of the disability of the di	_the
Sworn to and subscribed before me, this, the  day of March 1896.  Norse-State fully the nature of wound or character of disease which causes the disability, and explain particularly the of the disability, resulting from the wound or disease.  STATE OF GEORGIA,  County.  I, Aborder County.  I, Aborder County.  Ordinary of said County or the foregoing affidavit, and am well satisfied that the statements made by	_the
Sworn to and subscribed before me, this, the  day of March 1896.  Nors—State fully the nature of wound or character of disease which causes the disability, and explain particularly the of the disability, resulting from the wound or disease.  STATE OF GEORGIA,  County.  I, Ordinary of said County or certify that I am well acquainted with Tank or the foregoing affidavit, and am well satisfied that the statements made by n his said affidavit are true, and I know he is the individual he represents himself to	_the
Sworn to and subscribed before me, this, the  day of March 1896.  Norse-State fully the nature of wound or character of disease which causes the disability, and explain particularly the of the disability, resulting from the wound or disease.  STATE OF GEORGIA,  County.  I, Ordinary of said County or certify that I am well acquainted with the foregoing affidavit, and am well satisfied that the statements made by a his said affidavit are true, and I know he is the individual he represents himself that the resides in this County.	_the
Sworn to and subscribed before me, this, the  day of March 1896.  Norz-State fully the nature of wound or character of disease which causes the disability, and explain particularly the of the disability, resulting from the wound or disease.  STATE OF GEORGIA,  Local County.  I, Ordinary of said County.  In the foregoing affidavit, and am well satisfied that the statements made by a his said affidavit are true, and I know he is the individual he represents himself that the resides in this County.  Given under my official signature and seal, this	_the
Sworn to and subscribed before me, this, the  day of March. 1896.  Norse-State fully the nature of wound or character of disease which causes the disability, and explain particularly the of the disability, resulting from the wound or disease.  STATE OF GEORGIA,  County.  I, Ordinary of said County of the certify that I am well acquainted with the certify that I am well acquainted with the statements made by in his said affidavit are true, and I know he is the individual he represents himself that the resides in this County.	_the
Allow, b. Comm. 1896.  Nors-State fully the nature of wound or character of disease which causes the disability, and explain particularly the of the disability, resulting from the wound or disease.  STATE OF GEORGIA,  County.  I, Ordinary of said County of certify that I am well acquainted with the foregoing affidavit, and am well satisfied that the statements made by in his said affidavit are true, and I know he is the individual he represents himself that the resides in this County.  Given under my official signature and seal, this	_the

### For Applicants Heretofore Allowed Pensions.

bhowhee.	<b>&gt;</b>
	V. P. Taylor of Chearter
County State of Georgia, w	ho being duly sworn, says on oath that he is a bona fide citizen
and resident of said State, at	nd has resided therein continuously ever since the 24
lay of Oliver	18JP; that he enlisted in the military service of the Con-
federate States (or of the St	ate of) during the war between the
States, and served as a	in Company of 56 th Regiment
of laVol	unteers, burning 's Brigade; that whilst engaged
n such military service in t	the State of Musicifife , on the 16 day
of May 186	, he was wounded, injured or diseased of follows:
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MENTAL CONTRACTOR OF THE PARTY	
AND MAKERON COMPANIAN TO A SECURE CONTRACT OF A SECURE AND A SECURE OF A SECUR	
hanne dell'est ne constructivo de l'anno de l'anguarda de l'anno de la constanti de l'anno de l'anno de l'anno	
	Management is a secured to the second of the
Deponent desires to par	rticipate in the benefits of the Act, approved October 24th. 1887,
and the acts amendatory t	hereof, 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 chones	county been allowed an invalid pension of
Fresh	Dollars, for the year 1806 gram To To
Sworn to and subscribe	Dollars, for the year 1806 gran Jo Janglo
Pl day of #1	1897. POST OFFICE.
A,6,6000	und or character of disease which causes the disability, and explain particularly the extent and or disease.
Norn-State fully the nature of wor of the disability, resulting from the wou	and or character of disease which causes the disability, and explain particularly the extent and or disease.
STATE OF GEORGI	
	, (
cherehoe	County.)
I. I below	Ordinary of said County,
do certify that I am well ac	equainted with M. C. Taplor the
applicant in the foregoing a	ffidavit, 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	n under my official signature and seal, this
day of-	Tel 1897.
Affix	A. b. berro
	Ordinary cherekee County.
	Orange y

Cherolus County.	(7 11
I, WP Laylor	hereby authorize In 160 ggms
	of Tuested Co
to receive and receipt for the pension	paid hereon and request that he remit same to
Spres Cola & Richards	by mail
/ at leanton Ga	
IN WITNESS WHEREOF, I have	ve hereunto set my hand and seal, this
day of Deny 1	898. My S Taylor [L. S.]
Executed in presence of	

Name W. O. Loyler County Chrotie

Disability Wounded un

Amount, \$ 50 02

SOLDIER'S PENSION.

1202

INVALID

Janks Mark

(For Those Aiready Enrolled.)

No. 277/

ges a masser, ever reserves, ervers.	data

RICHARD JOHNSON,

1/23

WARRANT HANDED TO

### POWER OF ATTORNEY.

STATE OF GEORGIA,  Chenkee County.
I. m. C. Suy con hereby authorize of bog ins
to receive and receipt for the pension paid hereon and request that he remit same
at banten ba
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 25
day of Januar 1890. Hm To Taylor [L. 8
Executed in presence of

A. C. Com, ording

SOLDIER'S PENSION. CODE SECTION 128. (For Those Aiready Enrolled.) INVALID Name Mes P. Say Lear Chambrood RICHARD JOHNSON, 1899. Disability Bisa Blod a No. 2198 2/15 Amount, \$50 ...

### For Applicants Heretofore Allowed Pensions.

STATE OF GEORGI	A, (	
Cheroper	County.	
personally appears	W.J. Daylor of leheroke	
	ho being duly sworn, says on oath that he is a tona fide citize	n
	and has resided therein continuously ever since the 25	
ay of April	1835; that he enlisted in the military service of the Con	1-
	ate of Georgia ) during the war between th	ıe
tates, and served as a	Private in Company 9, of 56 th Regimen	ıt
Georgia Volu	inteers, Curringo 's Brigade; that whilst engage	d
such military service in th	nteers, Cumingo 's Brigade; that whilst engage the State of Mississippi, on the 16 da	y
may 18	36.3., he was wounded, injured or diseased as follows:	
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	w. which caused arm - ha	u
	Said wound received at	-
	ler's creek in Mis, in the y	_
863.	for charge and free, are the	~
d63.		-
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Deponent desires to parti	icipate in the benefits of the Act, approved October 24th, 1887	7
	reof, and makes application for the pension to which he i	
	October 26th, 1898. I have heretofore tinder said law as	
sident of Cheroke		
9 ifly	Dollars, for the year 189 7	
Sworn to and subscribed	before me this the	
	- 1	y
18 day of Fie	1090.   POST-OFFICE	_
Allen 6 60	un Ordy.	
NOTE-State fully the nature of wour	nd or character of disease which causes the disability, and explain particularly the exten	nt
the disability, resulting from the wound	l or disease.	
TATE OF GEORGIA	1, )	
Cheroku	County.	
_		
I, allen 6	Oldinary of Said County	,
certify that I am well acqu	uainted with w.P. Taylor the	e
plicant in the foregoing affic	davit, and am well satisfied that the statements made by him	n
his said affidavit are true, a	and I know he is the individual he represents himself to be	e
d that he resides in this Co		
Given u	under my official signature and seal, this 18	
day of	F & 1898.	
Affix	1100 1 8	
your \ seal	Allen 6 bann	-
الثتا	Shirt I	

### For Applicants Heretofore Allowed Pensions.

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 County by an allowed an invalid pension of Sworn to and subscribed before me, this, the Sworn to and subscribed before me, this, the State fully the nature of wound or character of disease.  STATE OF GEORGIA,  County.  1825; that he enlisted in the military service of the Conditional particularly the center of said County, do certify that I am well acquainted with the said county, do certify that I am well acquainted with the said county, do certify that I am well acquainted with the county of said County, do certify that I am well acquainted with the county of the said county, do certify that I am well acquainted with the county of said County, do certify that I am well acquainted with the county of said County, do certify that I am well acquainted with the county of said County, do certify that I am well acquainted with the county of said County, do certify that I am well acquainted with the county of said County, do certify that I am well acquainted with the county of said County, do certify that I am well acquainted with the county of said County, do certify that I am well acquainted with the county of said County, do certify that I am well acquainted with the county of said County, do certify that I am well acquainted with the center of the disability can be said to county.	Dersonally appears Meet 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 lateral day of last 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 last of in Company of of the Regiment of last Volunteers, bearing is Brigade; that whilst engaged in such military service in the State of day of last, he was wounded, injured or diseased as follows:    States are constant to the last of last o	rgia, who being duly sworn, says on oath that he is a bona fide citizen State, and has resided therein continuously ever since the 25
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 Dollars, for the year 1894.  Sworn to and subscribed before me, this, the  STATE OF GEORGIA,  County.  Ordinary of said County.  Ordinary of said County,  do certify that I am well acquainted with  Mark of State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said County,  of May 1899. I have heretofore under said law as a resident of County ben allowed an invalid pension of Dollars, for the year 1894.  Nors—State fully the nature of wound or character of diffusion which causes the disability, and explain particularly the sature of wound or disease.  STATE OF GEORGIA,  Ordinary of said County.  Ordinary of said County,  do certify that I am well acquainted with	Dersonally appears Meet 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 lateral day of last 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 last of in Company of of the Regiment of last Volunteers, bearing is Brigade; that whilst engaged in such military service in the State of day of last, he was wounded, injured or diseased as follows:    States are constant to the last of last o	rgia, who being duly sworn, says on oath that he is a bona fide citizen State, and has resided therein continuously ever since the 25
Deponent makes application for the pension to which he is entitled for the year ending October 28th, 1899. I have heretofore under said law as a resident of Dollars, for the year 1898.  Sworn to and subscribed before me, this, the law of James and subscribed before me, this, the law classifily the nature of wound or character of disease.  STATE OF GEORGIA,  County.  Ordinary of said County, do certify that I am well acquainted with the sisteed in the military service of the Condition of the pension to which he is entitled for the year ending of the pension of the pensio	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 Dollars, for the year l898.  Sworn to and subscribed before me, this, the	State, and has resided therein continuously ever since the
Deponent makes application for the pension to which he is entitled for the year ending October 28th, 1899. I have heretofore under said law as a resident of Dollars, for the year 1898.  Sworn to and subscribed before me, this, the law of James and subscribed before me, this, the law classifily the nature of wound or character of disease.  STATE OF GEORGIA,  County.  Ordinary of said County, do certify that I am well acquainted with the sisteed in the military service of the Condition of the pension to which he is entitled for the year ending of the pension of the pensio	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 Dollars, for the year l898.  Sworn to and subscribed before me, this, the	State, and has resided therein continuously ever since the
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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 Dollars, for the year 1898.  Sworn to and subscribed before me, this, the law of factoring of year of day of factoring of wood or disease which causes the disability resulting from the wood or disease.  STATE OF GEORGIA,  County.  Ordinary of said County, do certify that I am well acquainted with the course of Sandar	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 County of m allowed an invalid pension of Dollars, for the year 1899.  Sworn to and subscribed before me, this, the	that he enlisted in the military service of the Con-
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 Dollars, for the year 1898.  Sworn to and subscribed before me, this, the law of factorial of the year of day of factorial of the year of disease which causes the disability resulting from the wound or disease.  STATE OF GEORGIA,  County.  Ordinary of said County, do certify that I am well acquainted with the court of Sandar of Sandar of Sandar of Sandar of the Sandar of Sanda	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 County of m allowed an invalid pension of Dollars, for the year 1899.  Sworn to and subscribed before me, this, the	the State of) during the war between the
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 Dollars, for the year 1898.  Sworn to and subscribed before me, this, the law of factorial of the year of day of factorial of the year of disease which causes the disability resulting from the wound or disease.  STATE OF GEORGIA,  County.  Ordinary of said County, do certify that I am well acquainted with the court of Sandar of Sandar of Sandar of Sandar of the Sandar of Sanda	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 County of m allowed an invalid pension of Dollars, for the year 1899.  Sworn to and subscribed before me, this, the	a trivate in Company de, of 5 to the Regiment
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 County on allowed an invalid pension of Dollars, for the year 1898.  Sworn to and subscribed before me, this, the Will Joy Jaylor day of formany 1899. Post office.  Note State fully the nature of wound or character of disease which causes the disability resulting from the wound or disease.  STATE OF GEORGIA,  County.  Ordinary of said County, do certify that I am well acquainted with Mars Ordinary of said County, the	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 County of an allowed an invalid pension of Dollars, for the year 1898.  Sworn to and subscribed before me, this, the	Volunteers, bearrance 's Brigade; that whilst engaged
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 County in allowed an invalid pension of Dollars, for the year 1899.  Sworn to and subscribed before me, this, the law of January 1899. Post office  Nora-State faily the nature of wound or character of disease which causes the disability resulting from the wound or disease.  STATE OF GEORGIA,  County.  Ordinary of said County, do certify that I am well acquainted with	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 County in allowed an invalid pension of Dollars, for the year 1898.  Sworn to and subscribed before me, this, the	ice in the State of Manageres, on the 16 day
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County on allowed an invalid pension of Dollars, for the year 1898.  Sworn to and subscribed before me, this, the Lacracy 1899.  Nors-State fully the nature of wound or character of disease which causes the disability resulting from the wound or disease.  STATE OF GEORGIA,  County.  Ordinary of said County, do certify that I am well acquainted with	October 26th, 1899. I have heretofore under said law as a resident of County in allowed an invalid pension of Dollars, for the year 1898.  Sworn to and subscribed before me, this, the	9
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County on allowed an invalid pension of Dollars, for the year 1898.  Sworn to and subscribed before me, this, the day of faces 1899.  Note-State fully the nature of wound or character of disease which causes the disability resulting from the wound or disease.  STATE OF GEORGIA,  County.  Ordinary of said County, do certify that I am well acquainted with	October 26th, 1899. I have heretofore under said law as a resident of County of an allowed an invalid pension of Dollars, for the year 1898.  Sworn to and subscribed before me, this, the	Control of the Contro
County on allowed an invalid pension of Dollars, for the year 1898.  Sworn to and subscribed before me, this, the day of faces 1899.  Note-State fully the nature of wound or character of disease which causes the disability resulting from the wound or disease.  STATE OF GEORGIA,  County.  Ordinary of said County, do certify that I am well acquainted with	October 26th, 1899. I have heretofore under said law as a resident of County of an allowed an invalid pension of Dollars, for the year 1898.  Sworn to and subscribed before me, this, the	The second secon
County on allowed an invalid pension of Dollars, for the year 1898.  Sworn to and subscribed before me, this, the day of faces 1899.  Note-State fully the nature of wound or character of disease which causes the disability resulting from the wound or disease.  STATE OF GEORGIA,  County.  Ordinary of said County, do certify that I am well acquainted with	October 26th, 1899. I have heretofore under said law as a resident of County of an allowed an invalid pension of Dollars, for the year 1898.  Sworn to and subscribed before me, this, the	
County on allowed an invalid pension of Dollars, for the year 1898.  Sworn to and subscribed before me, this, the day of faces 1899.  Note-State fully the nature of wound or character of disease which causes the disability resulting from the wound or disease.  STATE OF GEORGIA,  County.  Ordinary of said County, do certify that I am well acquainted with	October 26th, 1899. I have heretofore under said law as a resident of County of an allowed an invalid pension of Dollars, for the year 1898.  Sworn to and subscribed before me, this, the	
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,  Charles County.  I. A B. B. County.  Ordinary of said County, do certify that I am well acquainted with	25' day of day of 1899. DOET OFFICE	1899. I have heretofore under said law as a resident of County on allowed an invalid pension of Dollars, for the year 1898.  abscribed before me, this, the
Norza-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,  County.  I	day of John Post Office	POST ORFICE
Norza-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,  County.  I	Ablean only	only
STATE OF GEORGIA,  County.  I. A Company of said County, do certify that I am well acquainted with the	Nors.—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.	nature of wound or character of disease which causes the disability, and explain particularly the
I, A b. b. County.  Ordinary of said County, do certify that I am well acquainted with the		
I, A be because Ordinary of said County, do certify that I am well acquainted with the		
do certify that I am well acquainted with with the	cherekee County.	County.
do certify that I am well acquainted with with the		
	I, A B. Borrer Ordinary of said County	,
	do certify that I am well acquainted with with the	B. B. Ordinary of said County,
applicant in the foregoing affidavit, and am well satisfied that the statements made by him	applicant in the foregoing affidavit, and am well satisfied that the statements made by his	well acquainted with 1992 Of Taylor the
in his said affidavit are true, and I know he is the individual he represents himself to be	in his said affidavit are true, and I know he is the individual he represents himself to be	well acquainted with were of Jagoer the
and that he resides in this County.	and that he resides in this County.	well acquainted with from the egoing affidavit, and am well satisfied that the statements made by him
Given under my official signature and seal, this 25	Given under my official signature and seal, this 25	well acquainted with the statements made by him are true, and I know he is the individual he represents himself to be
day of fact of 1899.	day of	well acquainted with the statements made by him are true, and I know he is the individual he represents himself to be in this County.
(AMIX)	ABI STORY ABILDON	well acquainted with the statements made by him are true, and I know he is the individual he represents himself to be in this County.

STATE OF GEORGIA,  County.	
I. Mr. P. Jayles	hereby authorized to Bookers
	of Charehee corres
to receive and receipt for the pension	paid hereon and request that he remit same to
· me	by
at Contin la	
IN WITNESS WHEREOF, I ha	ave hereunto set my hand and seal, this 200
day of	Mr. J. Taylor[1,s]
Executed in presence of	
A, 6, 6cm, ordy	-

SOLDIER'S PENSION.

1900.

Name 1200 C. Laylor

INVALID

(For Those Aiready Enrolled.)

No.3477

Warrant issued Affect 16 1900

Amount, \$ 5.0 \*2

Disability Cirebook

JOHN W. LINDSEY,

WARRANT HANDED TO

I man C. Jaylor		Con
_ & b, bonsonde	is of showker	Carret
to receive and receipt for the pensi	<b>*</b>	
	10.7 116 <b>by</b> [20.53]	
at banton ba	to the second se	9-31 page - j
IN WITNESS WHEREOF, I	have because set my hand	and and this 4. "
· ·		F - 1
day of fame	1901. Win To of	
There Could be only	$\mathcal{N}, \mathcal{D}, \mathcal{O}_{\mathfrak{S}}$	The [r.
Executed in presence of		-
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	981	
.       (i)	1801	Paston.
Since the second of the second	1881	er of Presion.
Figure 1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (	14,00001.	DSEY, indiction of Practica. IED TO
BLED PENSION. OI.	14 les	Commission of Presson.  Commission of Presson.  Commission of Presson.
Already Enrolled.)  2476  ABLED  S PENSION.	Sayles  block from:	Commission of Passion. THANDED TO
Se Already Enrolled.)  2476 ISABLED IR'S PENSION.	C. Layler Lording 1801.	N. Y. LINDSEY, COMMISSED TO RANT HANDED TO
Those Already Enrolled.) No. 2478 DISABLED IER'S PENSION. 1901.	Name 1922, A. Lay list County Edescribes.  Disability Exist Structure.  Amount, \$50 00	DHN W. LINDSEY, COUNTERED TO WARRANT HANDED TO

In Applicants Harctofore Allowed Pensions

### For Applicants Heretofore Allowed Pensions.

STATE OF	GEORGIA,	
Derganalin	anneary W. P. Yanko	of Chorchoe
County, State of and resident of state	Georgia, who being duly swon aid State and County, and has	rn, says on oath that he is a <i>bona fide</i> citizen a resided therein continuously ever since the ; that he enlisted in the military service of
ween the States	and served as a	in Company of, of a th
ngaged in such	military service in the State	of Medicanismfffion the 16 "bounded, injured or diseased as follows:
	Cerashat in M.	right Drane Courses
		and the second second
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· Ju	Dolla subscribed before me, this,	unty been allowed an invalid pension of urs, for the year 1897. the
. day		900. POST OFFICE
N 6.6	122216. relizy	a comment
Note.—State full	ly the nature of wound or character of d resulting from the wound or disease.	isease which causes the disability, and explain particularly the
STATE OF	GEORGIA,	
lo certify that I applicant in the in his said affida	foregoing affidavit, and am we	Ordinary of said County, the ell satisfied that the statements made by him the individual he represents himself to be
	Given under my off	icial signature and seal, this
your (		1900.
here.	***	A é, Evani
	Ord	linary Chambres County

### For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,  bherefiee County.
Personally appears mr. P. Juylor of Chewheel
ounty, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
nd resident of said State, and has resided therein continuously ever since the
ay of18 18 ; that he enlisted in the military service of the Con-
derate States (or of the State of) during the war between the
derate States (or of the State of) during the war between the tates, and served as a
Volunteers, because 's Brigade; that whilst engaged
a such military service in the State of Minister , on the /6 day
1861, he was wounded, injured or diseased as follows:
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Elbon gint
Old set of court
Appear
The state of the s
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 County be a allowed an invalid pension of Dollars, for the year 1900.  Sworn to and subscribed before me, this the
Sworn to and subscribed before me, this the
day of facy 1901. Postoffice
d, b, benn Godsig
Nors, -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,  County.
I,
to certify that I am well acquinted with Mr. C. Taylor the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
n 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
- Abbonn
And John County

POWER OF ATTORNEY

to receive and receipt for the pension	hereby authorise  of hereby authorise  a paid hereon and request that he remit same to  by  ove hereunto set my hand and seal this
Executed in presence of	Mr. T. Taylor [L. S.]
CODE GETTON THE  NO. T. 2. 2  DISABLED  SOLDIER'S PENSION  1902.	Name 1772 1. Jay 1.v.  County A Researches  Co. Regiments's ba  Disability Diea blas Gonn  Amount, \$50  74  1902  Commission of Protein.  WARRAST HANDED TO  Ong V. Indian one Prince, Allent.

	POWER C	F ATTORNEY.
STATE OF G		and the second of
	County.	
I,	1. Paylor	hereby authorize
- 1	1 might	of allerta la
to receive and	receipt for the pension	paid hereon and request that he remit same to
16.60	mondy	by check.
at bank	r la.	a quinne
IN WITH	SS WHEREOF, I have	ve hereunto set my hand and seal this
day of June		
	-	W. J. Taylor [L. s.]
Executed in	n presence of	
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CODE SECTION HOSE ALREAD	DISABI JER'S 190	Ohens
ON THOSE ALREAN	DISA 10	1 2 0 0 5 13/4 11

STATE O. GEORGIA.

FOR APPLICANTS RELETIGEORE ALLOWED PENSIONS

### FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

Deponent makes application for the pension to which he is entitled for the year nding October 26th, 1902. I have heretofore, under said law, as a resident of believe to and subscribed before me, this the day of farm. The said or character of disease which causes the disability, and exploite training the foregoing affidavit, and am well satisfied that the statements made by im in his said affidavit are true, and I know he is the individual he represents himself to early of farm in the foregoing affidavit, and am well satisfied that the statements made by im in his said affidavit are true, and I know he is the individual he represents himself to early of farm and any of said County.  Given under my official signature and seal, this day of farm and any of said County.  Given under my official signature and seal, this day of farm under my official signature and seal, this day of farm and any of farm and seal, this day of farm and any of farm and any of farm and seal, this day of farm and any of farm and seal, this day of farm and any of farm and seal, this day of farm and any of farm and seal, this day of farm and any of farm and seal, this day of farm and any of farm and seal, this day of farm and any of farm and seal, this day of farm and any of farm and seal, this day of farm and any of farm and seal, this day of farm and any of farm and seal, this day of farm and any of farm and seal, this day of farm and any of farm and seal, this day of farm and seal the seal and the seal	County, State of Ger	ears Jon C. Faulan	of Cherakee
Deponent makes application for the pension to which he is entitled for the year and grown and grown as a polication for the pension to which he is entitled for the year and grown as a polication for the pension to which he is entitled for the year and grown as a polication for the pension to which he is entitled for the year and grown as a polication for the pension to which he is entitled for the year and grown as a polication for the pension to which he is entitled for the year and grown as a polication for the pension to which he is entitled for the year and grown as a polication of the pension to which he is entitled for the year and grown as a polication of the pension to which he is entitled for the year and grown as a polication of the pension to which he is entitled for the year and grown as a polication of the pension to which he is entitled for the year and grown as a polication of the pension to which he is entitled for the year and grown as a polication of the pension to which he is entitled for the year and grown as a polication of the pension of the pension of the pension to which he is entitled for the year and grown as a polication of the pension of the pen		orgia, who being duly sworn,	, says on oath that he is a bona fide citizen
Deponent makes application for the pension to which he is entitled for the year ding October 26th, 1902. I have heretofore, under said law, as a resident of Dollars, for the year invalid pension of Aurillary service before me, this the day of face 1902. Post-office  TATE OF GEORGIA,  County,  County,  Cordinary of said County,  Cordinary of Sa			
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Deponent makes application for the pension to which he is entitled for the year adding October 26th, 1902. I have heretofore, under said law, as a resident of Dollars, for the year 1901.  Sworn to and subscribed before me, this the day of fary 1902. Post-office  Ab Lorent County.  TATE OF GEORGIA,  County.  L	derate States (or o	f the State of	during the war between the
Deponent makes application for the pension to which he is entitled for the year ding October 26th, 1902. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, for the year 1901. Taylor day of fary 1902. Post-office  Abbitant of the disability resulting from the wound or disease which causes the disability, and explicitly the extent of the disability resulting from the wound or disease.  TATE OF GEORGIA,  County.  Coun	ates, and served	as a Private	in Company & , of ( th Regiment
Deponent makes application for the pension to which he is entitled for the year iding October 26th, 1902. I have heretofore, under said law, as a resident of County, been aflowed an invalid pension of Dollars, for the year 1901.  Sworn to and subscribed before me, this the day of fary 1902. Post-office  Norm-state fully the nature of the wound or character of disease which causes the disability, and explicit resulting from the wound or disease.  TATE OF GEORGIA,  Cherolica County.  I. A. C. County.  I. A. C. County.  I. Cordinary of said County.  Certify that I am well acquainted with the County of said County, be caption in the foregoing affidavit, and am well satisfied that the statements made by m in his said affidavit are true, and I know he is the individual he represents himself to and that he resides in this County.  Given under my official signature and seal, this day of fary 1902.	ha	Volunteers, busmo	's Brigade; that whilst engaged
Deponent makes application for the pension to which he is entitled for the year adding October 26th, 1902. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, for the year 1901.  Sworn to and subscribed before me, this the day of fary 1902. Post-office  Ablitude of the County of Dollars, for the year 1901.  Nore—state fully the nature of the County or character of disease which causes the disability, and explicitly the extent of the disability resulting from the wound or disease.  TATE OF GEORGIA,  County.  I. Ablitude Ordinary of said County, or certify that I am well acquainted with the foregoing affidavit, and am well satisfied that the statements made by m in his said affidavit are true, and I know he is the individual he represents himself to and that he resides in this County.  Given under my official signature and seal, this day of fary 1902.	such military serv	rice in the State of	cusiffer, on the 6 day
Deponent makes application for the pension to which he is entitled for the year adding October 26th, 1902. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, for the year 1901.  Sworn to and subscribed before me, this the Law of	May	1865 , he was wo	unded, injured or diseased as follows:
Deponent makes application for the pension to which he is entitled for the year ding October 26th, 1902. I have heretofore, under said law, as a resident of Liberackee	busi	that in Rich	tasso
County, been allowed an invalid pension of Dollars, for the year 1901  Sworn to and subscribed before me, this the day of fary 1902. Post-office  Norn-state fully the nature of the reduind or character of disease which causes the disability, and explining the extent of the disability resulting from the wound or disease.  TATE OF GEORGIA,  County.  I. A. C. County.  I. A. C. County.  I. A. C. County.  Ordinary of said County, explicitly that I am well acquainted with the foregoing affidavit, and am well satisfied that the statements made by min his said affidavit are true, and I know he is the individual he represents himself to and that he resides in this County.  Given under my official signature and seal, this day of fary 1902.	A.,	- C - A	2
County, been allowed an invalid pension of Dollars, for the year 1901.  Sworn to and subscribed before me, this the Land of Land of Land of 1902. Post-office Abburne. The would be conficulty the nature of the would or character of disease which causes the disability, and exploring the extent of the disability resulting from the would or disease.  TATE OF GEORGIA,  County.  I. Abburne.  Ordinary of said County, occurring that I am well acquainted with the foregoing affidavit, and am well satisfied that the statements made by min his said affidavit are true, and I know he is the individual he represents himself to and that he resides in this County.  Given under my official signature and seal, this day of fang.  1902.		100	and the same of th
Adding October 26th, 1902. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, for the year 1901. Taylor Dollars, for the year 1901. Taylor Law			<u> </u>
Adding October 26th, 1902. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, for the year 1901. Taylor Dollars, for the year 1901. Taylor Law of Law 1902. Post-office  Abbrary 1902. Post-office  Nora state fully the nature of the would or character of disease which causes the disability, and exploring the extent of the disability resulting from the would or disease.  TATE OF GEORGIA,  County.  I			
Adding October 26th, 1902. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, for the year 1901. Taylor Dollars, for the year 1901. Taylor Law 1902. Post-office Abburne and subscribed before me, this the 1902. Post-office Abburne and subscribed before me, this the 1902. Post-office Abburne and subscribed before me, this the 1902. Post-office Abburne and subscribed before me, this the 1902. Post-office Abburne and subscribed or character of disease which causes the disability, and explain the wound or disease.  TATE OF GEORGIA,  County.  I. Abburne County.  Ordinary of said County, of certify that I am well acquainted with Armel Staylor and the statements made by min his said affidavit are true, and I know he is the individual he represents himself to and that he resides in this County.  Given under my official signature and seal, this 1902.	A COMPANY OF THE PARTY OF THE P		
Adding October 26th, 1902. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, for the year 1901. Taylor Dollars, for the year 1901. Taylor Law 1902. Post-office Abburne and subscribed before me, this the 1902. Post-office Abburne and subscribed before me, this the 1902. Post-office Abburne and subscribed before me, this the 1902. Post-office Abburne and subscribed before me, this the 1902. Post-office Abburne and subscribed or character of disease which causes the disability, and explain the wound or disease.  TATE OF GEORGIA,  County.  I. Abburne County.  Ordinary of said County, of certify that I am well acquainted with Armel Staylor and the statements made by min his said affidavit are true, and I know he is the individual he represents himself to and that he resides in this County.  Given under my official signature and seal, this 1902.	The state of the s		The second secon
Nore.—State fully the nature of the would or character of disease which causes the disability, and exploring the extent of the disability resulting from the would or disease.  TATE OF GEORGIA,  County.  I	Sworn to and st	of Large 1902.	Post-office
Nora—state fully the nature of the would or character of disease which causes the disability, and explicit the extent of the disability resulting from the would or disease.  TATE OF GEORGIA,  County.  I. Ordinary of said County, ocertify that I am well acquainted with world. Traylor is applicant in the foregoing affidavit, and am well satisfied that the statements made by in in his said affidavit are true, and I know he is the individual he represents himself to each that he resides in this County.  Given under my official signature and seal, this day of fary 1902.	- 0 0	v +	,
TATE OF GEORGIA,  County.  I			of disease which causes the disability and crubin
Line of the County.  I		he nature of the wound or characte	d on disease which causes the disability, and raphilit
Ordinary of said County, of certify that I am well acquainted with More of Saylor are applicant in the foregoing affidavit, and am well satisfied that the statements made by in in his said affidavit are true, and I know he is the individual he represents himself to each that he resides in this County.  Given under my official signature and seal, this day of fary 1902.		he nature of the wound or characte he disability resulting from the wound	d or disease.
certify that I am well acquainted with professional control of the statements and experiments in the foregoing affidavit, and am well satisfied that the statements made by me in his said affidavit are true, and I know he is the individual he represents himself to and that he resides in this County.  Given under my official signature and seal, this day of fary 1902.	NOTE.—State fully t		d or disease
the applicant in the foregoing affidavit, and am well satisfied that the statements made by m in his said affidavit are true, and I know he is the individual he represents himself to and that he resides in this County.  Given under my official signature and seal, this	NOTE.—State fully to reinvaluely the extent of the TATE OF GE	County.	
m in his said affidavit are true, and I know he is the individual he represents himself to and that he resides in this County.  Given under my official signature and seal, this	Nore—State fully to retireducity the extent of the state	County.	Ordinary of said County
day of fary 1902.	TATE OF GE  Long of the state o	County. County.	Ordinary of said County
Given under my official signature and seal, this	Nore.—State fully to receive the extent of the TATE OF GE Control of the Control	County.  County.  County.  County.  County.  County.  County.	Ordinary of said County
day of fary 1902.	TATE OF GE  Line of the certain of t	County.  Cou	Ordinary of said County
Alls John State St	TATE OF GE  Line of the state o	County.	Ordinary of said County  Ordinary of said County  well satisfied that the statements made by is the individual he represents himself to
Petral (	Norz.—State fully to retirularly the extent of the TATE OF GE Land of the Land	County.  County.  County.  County.  County.  Coregoing affidavit, and am varit are true, and I know he es in this County.  Given under my official sign	Ordinary of said County well satisfied that the statements made by is the individual he represents himself to sature and seal, this
Ordinary bless Koo County.	Norz.—State fully to creating the extent of the TATE OF GE Laborated I,	County.  County.  County.  County.  County.  Coregoing affidavit, and am varit are true, and I know he es in this County.  Given under my official sign day of fore	Ordinary of said County well satisfied that the statements made by is the individual he represents himself to sature and seal, this
	Norz.—State fully to retirularly the extent of the TATE OF GE Land of the Land	County.  County.  County.  County.  Coregoing affidavit, and am vavit are true, and I know he es in this County.  Given under my official sign day of fary	Ordinary of said County  Well satisfied that the statements made by is the individual he represents himself to  ature and seal, this
	Norn.—State fully to criminalarly the extent of the STATE OF GE Concerning that I am the applicant in the im in his said affide and that he reside	County.  County.  County.  County.  Coregoing affidavit, and am vavit are true, and I know he es in this County.  Given under my official sign day of fary	Ordinary of said County  Well satisfied that the statements made by is the individual he represents himself to  ature and seal, this

### FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

	GEORGIA,	
	County.	
Personally an	pears mm P. Yan	or of cherabie.
County, State of G	eorgia, who being duly swor	n, says on oath that he is a bona fide citizen
and resident of said	State, and has resided then	rein continuously ever since the 28."
lay of Africe	18 <i>38</i> ; that he	e enlisted in the military service of the Con-
federate States (or	of the State of	in Company 4, of 56 th Regiment
States, and served	as a Criciale	in Company &, of SE th Regiment
		's Brigade; that whilst engaged
		on the /6 day
		ounded, injured or diseased as follows:
Lun	hot in Richt.	am.
	9	_
Sie Control Co		
Sworn to and  Y da  A 6 6	subscribed before me, this y of fary 19	O3. Post-office
	F GEORGIA,	
	County.	
Ι,	6,60000	Ordinary of said County,
do certify that I	am well acquainted with	pm P. gaylor
the applicant in t	he foregoing affidavit, and a	am well satisfied that the statements made by
		he is the individual he represents himself to
be and that he res	sides in this County.	
	Given under my official si	gnature and seal, this
	day of flory	1903.
Affix	0	el.6,6000
genl }	Ore	dinary chordhoe County.
ham	NorgFill all blanks and of Comps	

STATE OF GEORGIA,  Lohenokae County.			
mas Wright a atlanta lea	hereby	author	ise
mad Wright of allanta lea			-
to receive and receipt for the pension paid hereon, and request that he	e remit	same	to
I. to lown andry by theek.		111111	-
at banton ba			
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this			
day of1904.			
Mr. Jo Tayl	or	[L.	8.]
Executed in presence of			
I to lower lending.			

# STATE OF GEORGIA, Cherekee Count. I. W. P. Taylor hereby authorize Of Columbia County 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 January 1905. Executed in the presence of L. S.]

1905.

SOLDIER'S PENSION

SOLDIER'S PENSION

Name W. L. March

Co. M. Regiment Ste.

Amount, \$5.4

Amount, \$5.4

WARRANTED TO

WARRANT HANDERY

WARRANTH HANDERY

WARRANTH

GURE STORE ALLOWED PENSIONS.

CHANAGE CONTRIBUTION THOSE ALIREADY ENFOLLED.

CONTRIBUTION THOSE ALIREADY ENFOLLED.

DISABLED

SOLDIER'S PENSION

3

### FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

STATE OF GEORGIA,
Leteroles County.
Personally appears W. P. Taylor of leherolee
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 Ofree 1836; that he enlisted in the military service of the Con-
federate States (or of the State of during the war between the
States, and served as a frivate in Company &, of S'6 th Regiment
of la Volunteers burnings 's Brigade; that whilst engaged
in such military service in the State of Musimphis , on the /o day
of Moy , he was wounded, injured or diseased as follows:
Ganshot in Right, am.
AND THE RESIDENCE OF THE PARTY
And the second s
A CO. SAME CO. S. CO. SAME CO. S. CO.
Annual control of the
The second secon
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
County, been allowed an invalid pension of
Dollars, for the year 1903.
Sworn to and subscribed before me, this the
8 day of farms 1904.
A. b. barra anding 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, (
Cherter County.
I, A. le. lecare Ordinary of said County,
do certify that I am well acquainted with M.C. Faylor
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 faring 1904.
After County.

Nors.-Fill all blanks and of Company and Regiment. Note .- All vouchers and affidavits must bear date after January 1, 1904.

STATE OF GEORGIA,	}
Chentlee COUNT	
Personally appears M. P.	Taylor of Cherokee
County, State of Georgia, who, being du	aly sworn, says on oath that he is a bona fide citizen
and resident of said State, and has resid	led therein continuously ever since the
	that he enlisted in the military service of the Con-
federate States (or of the State of	) during the war between the
States, and served as a Chirali	in Company 4, of 56 th Regimen
. Ga Valuntaara 1	O 's Brigade: that whilst engaged
in such military service in the State	of Mississippi, on the 16 day
of May 1863	, he was wounded, injured or diseased as follows
/ Wounded is	of Musis sippi, on the /6 day  , he was wounded, injured or diseased as follows  August Cum ut
Bakers lerees -	may 1863
and the same of th	/
Deponent makes application for	the pension to which he is entitled for the yes
Deponent makes application for ending October 26th, 1905. I hav	the pension to which he is entitled for the yes
Deponent makes application for ending October 26th, 1905. I hav	the pension to which he is entitled for the year heretofore, under said law, as a resident of County, been allowed an invalid pension of
Deponent makes application for ending October 26th, 1905. I hav	the pension to which he is entitled for the yes the heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, for the year 1904.
Deponent makes application for ending October 26th, 1905. I hav	the pension to which he is entitled for the year heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, for the year 1904.

Norz.—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,	1
Che	whea county.	•

I, M. J. Will Ordinary of said County, do certify that I am well acquainted with M. G. Taylor 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 ferminary 1905.

Affix your Beal here.

Ordinary Churchee County.

Note. — Fili all blanks and of Company and Regiment.

Note. — All vouchers and affidavits must bear date after January 1, 1905.

STATE OF GEORGIA,	,
- Orivoker Count	ry.
The	- P. Taylor hereby authorize
W.J.mill	of Caulon hereby authorize
	on paid hereon, and request that he remit same to
	by
41	
In WITNESS WHERROF, I have	hereunto set my hand and seal, this 2
day of	
day of	115 . J. Jaylor [L. 8.]
Executed in the presence of	4)
7 m. Well.	/

anlow, Milliam C.	COOR BECTION 1260. THOSE ALREADY ENROLLED.)	SOLDIER'S PENSION 1906.	Mr J Paylor, Church of Regiment 56 /2	ility  2  JOHN W. LINDSEY.  Commissioner of Pressions.	WARRANT HANDED GO	6/44
all.	FOR TH	SOLD!	Name No Name County Co. 2	Disability Amount, 8	W	1

### POWER OF ATTORNEY.

I, W ON By	lor ba	, hereby authori
to receive and receipt for the po		d request that he remit same
at		
** * Better and the control of the c		de
In Witness Whereof, I hav	e hereunto set my han	d and seal, this
** * Better and the control of the c	007	d and seal, this

Construction (20 Learner 1900)  Construction (20 Learner 1900)	Amount, 4.50.00  Amount, 4.50.00  JOHN W. LINDSEY,  Commissioner of Printing  WARRANT HANDED TO

OW ID STATE OF STATE

### FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Oncidece County.
7/000
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 18.38; that he enlisted in the military service of the Con-
federate States, (or of the State of during the war between the
States, and served as a Private in Company to, of the Regiment
of Volunteers Cumming's Brigade; that whilst engaged
in such military service in the State of Miss, on the 16" day
of 71/ac/ 186.3, he was wounded, injured or diseased as follows:
Shot in Right ann
to address the second agreement of the second secon
The second of th
to the state of th
A CONTRACTOR OF THE PROPERTY O
Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1906. I have heretofore, under said law, as a resident of
County, been allowed an invalid pension of
Fifty Dollars, for the year 1905.
Sworn to and subscribed before me, this the
2 day of 2012 - 1908.
Post-Omce
21/1/166
Note.—State fully the nature of the wound or character of disease which causes the disability, and emplain
particularly the extent of the disability resulting from the wound or disease.
Nors.—State fully the nature of the wound of classical or particularly the extent of the disability resulting from the wound or disease.
State of Georgia,
State of Georgia,
State of Georgia,  County.  I, White County Ordinary of said County  do certify that I am well acquainted with White Player
State of Georgia,  County.  I, 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
State of Georgia,  County.  I, 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
State of Georgia,  I, 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
State of Georgia,  I, Ordinary of said County  do certify that I am well acquainted with Many of said County 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.
State of Georgia,  I, Ordinary of said County  do certify that I am well acquainted with May Day or  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
State of Georgia,  I, Ordinary of said County  do certify that I am well acquainted with Many of 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
State of Georgia,  I, Ordinary of said County  do certify that I am well acquainted with May Day or  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

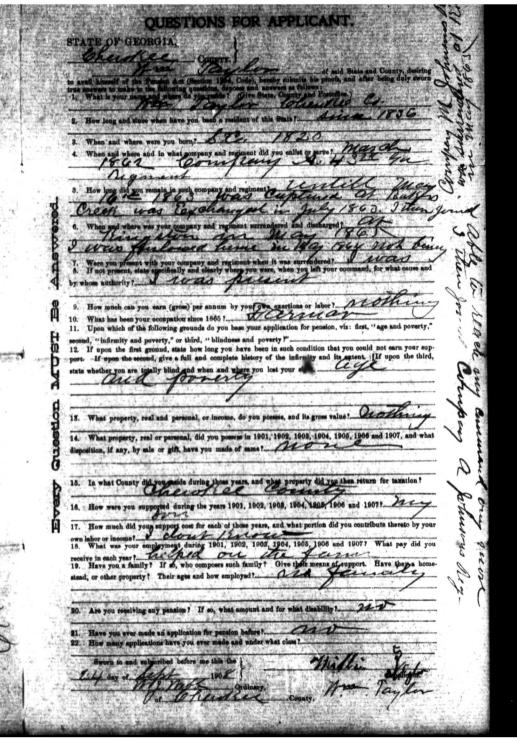
FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
Cherokee County.
Personally appears W.P. Taylor 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 18.38; that he enlisted in the military service of the Con-
federate States (or of the State of States and served as a Private in Company 4, of 56 th Regiment
States, and served as a Private in Company & of 56 th Regiment
of Isa Volunteers Commiss 's Brigade; that whilst engaged
in such military service in the State of Mississippi, on the de day
of may 1863, he was wounded, injured or diseased as follows:
of the was wounded, injured or diseased as follows:
Gene shot in right and
The contraction of the contracti
Management of the control of the con
Deponent makes application for the pension to which he is entitled for the year
ending October, 26th, 1907. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, to the year 1906.
ending October, 26th, 1907. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, to the year 1906.
ending October, 26th, 1907. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, to the year 1906.
ending October, 20th, 1907. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of
cending October, 20th, 1907. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, the year 1906.  Sworn to and subscribed before me, this the day of Gan, 1907.  M. J. Hobb. Ording Postoffice Canton Ga
ending October, 20th, 1907. I have heretofore, under said law, as a resident of  County, been allowed an invalid pension of  Dollars, the year 1906.  Sworn to and subscribed before me, this the  day of 1907.  Postoffice Onton Games  Nova 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.
ending October, 20th, 1907. I have heretofore, under said law, as a resident of Country, been allowed an invalid pension of Dollars, the year 1908.  Sworn to and subscribed before me, this the day of Jan. 1907.  Postoffice Canton Ga.  Nova-State fully the nature of the wound or character of disease which causes the disability, and explain State of Georgia,
ending October, 20th, 1907. I have heretofore, under said law, as a resident of Country, been allowed an invalid pension of Dollars, the year 1908.  Sworn to and subscribed before me, this the day of Jan. 1907.  Postoffice Canton Ga.  Nova-State fully the nature of the wound or character of disease which causes the disability, and explain State of Georgia,
ending October, 20th, 1907. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, the year 1906.  Sworn to and subscribed before me, this the day of 1907.  You basic 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,  County,
ending October, 20th, 1907. I have heretofore, under said law, as a resident of Country, been allowed an invalid pension of Dollars, the year 1908.  Sworn to and subscribed before me, this the day of Jan. 1907.  Postoffice Canton Ga.  Nova-State fully the nature of the wound or character of disease which causes the disability, and explain State of Georgia,
ending October, 20th, 1907. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, the year 1906.  Sworn to and subscribed before me, this the day of 1907.  You basic 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,  County,
ending October, 20th, 1907. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, the year 1908.  Sworn to and subscribed before me, this the day of Joy Postoffice Canton Garage Postoffice County, and Explain County, County Co
ending October, 20th, 1907. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, the year 1908.  Sworn to and subscribed before me, this the year 1908.  Sworn to and subscribed before me, this the Year 1908.  Postoffice County Sworn to and subscribed before me, this the year 1908.  Sworn to and subscribed before me, this the year 1908.  Sworn to and subscribed before me, this the year 1908.  Postoffice County Sworn to and subscribed before me, this the year 1908.  Sworn to and subscribed before me, this the year 1908.  Sworn to and subscribed before me, this the year 1908.  Postoffice County Sworn to and subscribed before me, this the year 1908.  Sworn to and subscribed before me, this the year 1908.  Sworn to and subscribed before me, this the year 1908.  Sworn to and subscribed before me, this the year 1908.  Postoffice County Sworn to an account to the disability and explain to an account to the disability and explain to t
ending October, 20th, 1907. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, the year 1908.  Sworn to and subscribed before me, this the day of Joy Postoffice Canton Garage Postoffice County, and Explain County, County Co
ending October, 20th, 1907. I have heretofore, under said law, as a resident of  County, been allowed an invalid pension of  Dollars, the year 1908.  Sworn to and subscribed before me, this the  day of 1907.  Postoffice Omtor Garden  Nova that is 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,  Ordinary of said County,  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
ending October, 20th, 1907. I have heretofore, under said law, as a resident of  County, been allowed an invalid pension of  Dollars, the year 1908.  Sworn to and subscribed before me, this the  day of 1907.  Postoffice Omtor Gambor  Nova-State fully the nature of the wound or character of disease which causes the disability, and explains  particularly the extent of the disability resulting from the wound or disease.  State of Georgia,  Ordinary of said County,  do certify that I am well acquainted with M. P. Taylor  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 1907.
ending October, 20th, 1907. I have heretofore, under said law, as a resident of  County, been allowed an invalid pension of  Dollars, the year 1908.  Sworn to and subscribed before me, this the  day of 1907.  Postoffice Omtor Garden  Nova that is 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,  Ordinary of said County,  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
county, been allowed an invalid pension of Dollars, the year 1908.  Sworn to and subscribed before me, this the day of Orize 1907.  Norse-state fully the nature of the wound or character of disease which causes the disability, and esplain particularly the attent of the disability resulting from the wound or disease.  State of Georgia,  Ordinary of said County,  1, Ordinary of said County,  do certify that I am well acquainted with M. P. Jaylor  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 M.
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Nors.—Fill all blanks and of Company and Regiment.

Nors.—All vouchers and affidavits must bear date after January 1st, 1907.

ATE OF GEORGIA,	COUNTY.			
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				CONTRACTOR AND STREET
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INDIGENT PENSION.	ا مه دی ا	WARRING HAKOED TO	16. In what County did you saide during these years, and what properly did you then return for taxation?  16. How were you supported during the years 1905, 1902, 1908, 1904, 1805, 1906 and 1907?  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?  18. What was your employment during 1901, 1902, 1908, 1904, 1905, 1906 and 1907? What pay did you receive in each year?  19. Have you a family? If so, who composes such family? Give their means of support. Have they a homestead, or other property? Their ages and how employed?  20. Are you escativing any penalon? If so, what amount and for what disability?  21. Have you were made an application for penalon before?  22. How many applications have you ever made and under what clear?  Sworn to and subscribed before me this the 1  Any of 1904  Ordinary,  Ordinary,  County,
Jungling Jerry	/wy		

6. How long did he perform regular military duty? Accounting the second of the second

14. What property, real or personal, did you possess in 1901, 1902, 1908, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift, have you made of same?

STREET,	Street State of the State of th	· · · · · · · · · · · · · · · · · · ·	题中4、图54、图
STATE OF GEORGIA,			影響級
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County, T			12.50
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7	The State of the S		司 经补贴
as a witness in support of the application of under section 1254, Code, and after being duly even to	the American to make to talk to	Della constant della	
answers as follows:	11 10 11	5.美元、李江等二十年	是为自然是
1. What is your name and where do you reside!			
seride in Co	renter ,	24	- 10 W
2. Are you acquainted with	Jaylor	the applicant; if so, h	1225
the state of the s	-vus / 50	years	160.19
8. Where does he reside, and how long and since when	has he been a resident of th	io State ?	39/2
me Cherut se	d Course		+ 726
When, where and in what company and regiment . Wan 186 Ca C 4	did he onlies, and how do yo	u know?	6.0
	SUPPLIES TO SELECT THE SECOND SECOND		-6927
5. Were you a member of the same company and re-	ment! I dille	4	-4-4-1
6. How long did he perform regular military duty?	andell fre	41865	433
7. When and where was his command surrendered?	01 They	66-1865	- 342
7. When and where was his command surrendered?	Balled	redz ma	1863
8. Were you present when it surrendered?	was		
	was		The Part of the Pa
9. Was applicant present?	in was 1	1444	
10. If he was not present, where was he?			
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By what authority he left ?	•	How do you know all of th	def
		The state of the s	
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11. What property, effects or income has the applicant	? (Give your means of kno	sledge.)	17.00
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and what disposition, if any, did he make of same !	2000年第四届2000年2月1日		
18. Has he conveyed away any of his property in the	set four years; if so, what w	m it, and to whom?	A MARIE TO A STATE OF
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14. What is the applicant's occupation and physical	sondition? Har	سرس	
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		and the same	
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15. Is the applicant unable to apport limited by lab	or of all soil; if so way !		
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		7	
16. Hop was he supported during the years 1901, 190	2, 1908, 1904, 1906, 1906	and 1907 1	
his Jon			
17. What portion of his support for these four years w	AND THE PROPERTY OF THE PROPER	的第三名 医克里克氏征 医二甲氏试验检 计工程系统	
18. Give a full and complete statement of the applica	nt's physical condition that	metales blooks a secondar as	
18. Give a full and complete statement of the applica	. 0	entrites when so a banners on	
Section 1254, Code	AND DESCRIPTION OF THE PERSON NAMED IN		
19. Who composes family? What property have they	7 Children's ages and that	secular reposits?	
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	N.		
20. What interest have you in the recovery of a panel	on by this applicant?	Control of the second	
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that the applicant.	- Vay	don .	sides in said County, and has
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	his State-since the	and an	
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1891.

- WARRANT-CLERK

applicant

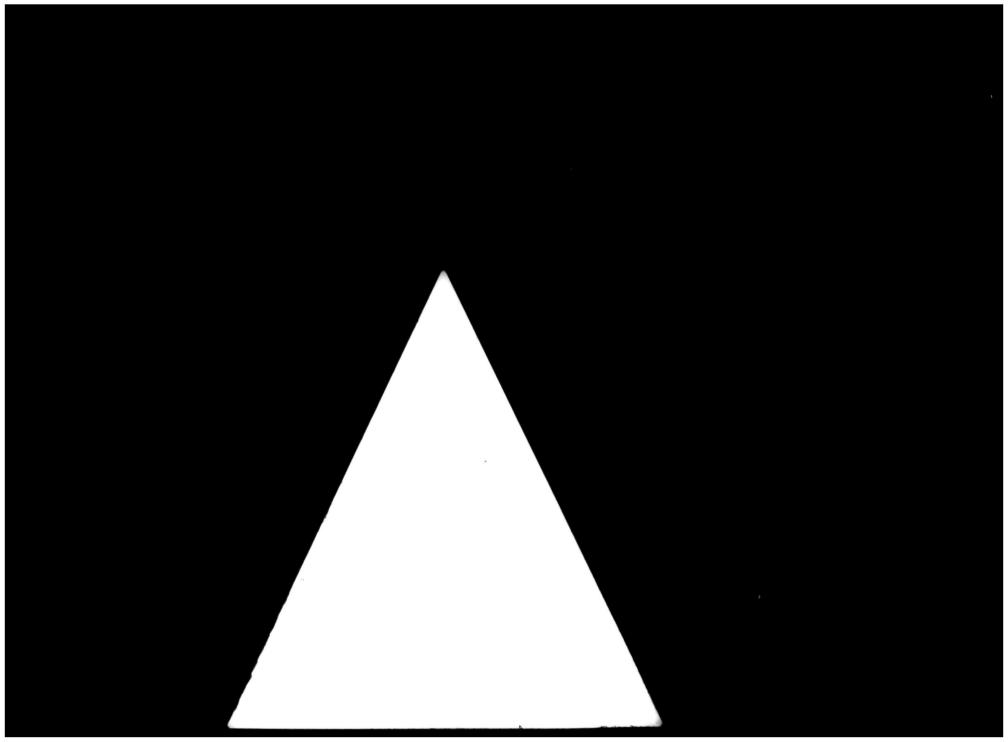
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James of		
Mr. Co. F. Jayla		of the County
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Department for an allowance under the Act ap	proved October 24, 1887, as am	ended by Act.
Dec. 24, 1888, and the same having been allo	wed for	
Right arm des		
He is expitted to receive the sum of He	6 x00/	Dollars
for such disability, the same being the attention	ce the year ending Octo	ber 24, 1889
The Treasurer will pay the same of ho	his receipt on this voucher, and	return same to
Executive Department for warrant		dou
	GEORGIA	GOVERNOR
By the Governor		
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72	2. /	120HBF#.
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	Vis Jaylor	

STATE OF GEORGIA, EXECUTIVE DEPARTMENT.

No. 1157 Milanta, Ba. Mch 6 1889

No. 146 2 Allanta, Ba., Flehy 19 STATE OF GEORGIA, EXECUTIVE DEPARTMENT. MMP Tayla of the County having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Act, approved, Dec. 24, 1888, and the same having been examined and allowed for Urm duables Dollars He is entitled to receive the sum of Dollars or due for the state ending October 24, 1890 for such disability, the same being the allowang distrection on total voucher, and return same The Treasurer will pay the same and hold to Executive Department for warrant. By the Governor, CLERK EXECUTIVE DEPARTMENT. RECEIVED OF STATE TREASURER, R. U. HARDEMAN, Dollars,

Allania, Ba. Pety 13, 1891. STATE OF GEORGIA. EXECUTIVE DEPARTMENT. of Cheroker having filed his applica having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Acts approxed Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for Alm dis He is entitled to receive the sum of Dollars for such disability, the same being the allowance for the year ending October 24, 1891. The Treasurer will pay the same and this receipt on the free of george. Executive Department for warrant. DINHHAMS M. SEC'V EXECUTIVE DEPARTMENT. RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia. Dollars.



To Be Put on Roll in Her Own Right When Husband Was on the Pension Roll of Georgia. County Cherolice Name Rachel Jam

Widow of W. C. Term Company.

Regiment Raloton's

Date of Husband's Beath May by 1931 Date of Marriage Feb. 6 18 70 Approved R. de T. Langence.

Cension Committeemer and notified

June !

5-28-31

ORDINARY'S CERTIFICATE

OF GEORGIA

rriage, and that both the foregoing were duly sworn ts herself to be, and that she is 1920; that I also know the applicant for pension; that she is the person by me Ordinary of said County, do certify that I before resident of said County since signing the respective affi , the witness as to

davits, and that they are truthful and trustworthy and their statements are entitled to full faith Given under my hand and

(SEAL OF ORDINARY)

facot Marse

Ordinary, 1929/

County

wered the Ordinary shall swear applicant and the witness us will true answers make to each of the questions asked you help you God." Instructions:

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if blank spaces are insufficient.

be Ordinary of the county of residence
to first January, 1881, are entitled.

license if obtainable. If not, prove it

WIDOWS APPLICATION

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County, Chieffeld, Jean Whitow of W. G. Jean Company

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Commissioner 4 1941

### ORDINARY'S CERTIFICATE

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ORDINALI B CERTIFICATE
STATE OF GEORGIA,
leherosco COUNTY.
I. facult Massey Ordinary of said County, do certify that I know Mrs. Rachel Teern , the applicant for pension; that she is the person
know Mrs. Rachel Leun, the applicant for pension; that she is the person
she represents herself to be, and that she is continuously a bona fide resident of said County since
January 1st, 1920; that I also know, the witness as to
marriage, and that both the foregoing were duly sworn by me before signing the respective affi-
davits, and that they are truthful and trustworthy and their statements are entitled to full faith
and credit.
Given under my hand and official seal of office this 25 day of Many, 1927.  (SEAL OF ORDINARY)  Shareful County
(SEAL OF ORDINARY) Jacob Massey Ordinary,
Scharolice County
Instructions:
1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You solemnly swear that you will true answers make to each of the questions saked 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 of the county of residence.  4. Only widows who are married prior to first January, 1881, are entitled.  5. Attach sertified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general regulation.

### R. J. GOBLE

Judge Court of Ordinary Gilmer County

Court Meets First Monday in Each Month

GEORGIA, GILMER COUNTY:

In the matter of the application of Mrs. Rachel Teem, as the widow of W C.Teem late of Cobb County deceased, for a State Pension, personally came before me, the undersigned attesting official, A.M. Johnson and M T.Dooly, of said county, who on oath says, that they have known W C.Teem and his wife Rachel.Teem, (formerly Rachel Cloninger) for more than fifty years; that said parties during all this time lived together as husband and wife, were recognized as husband and wife in the community where they lived, and were persons of good character and respectability.

Sworn to and subscribed before me,

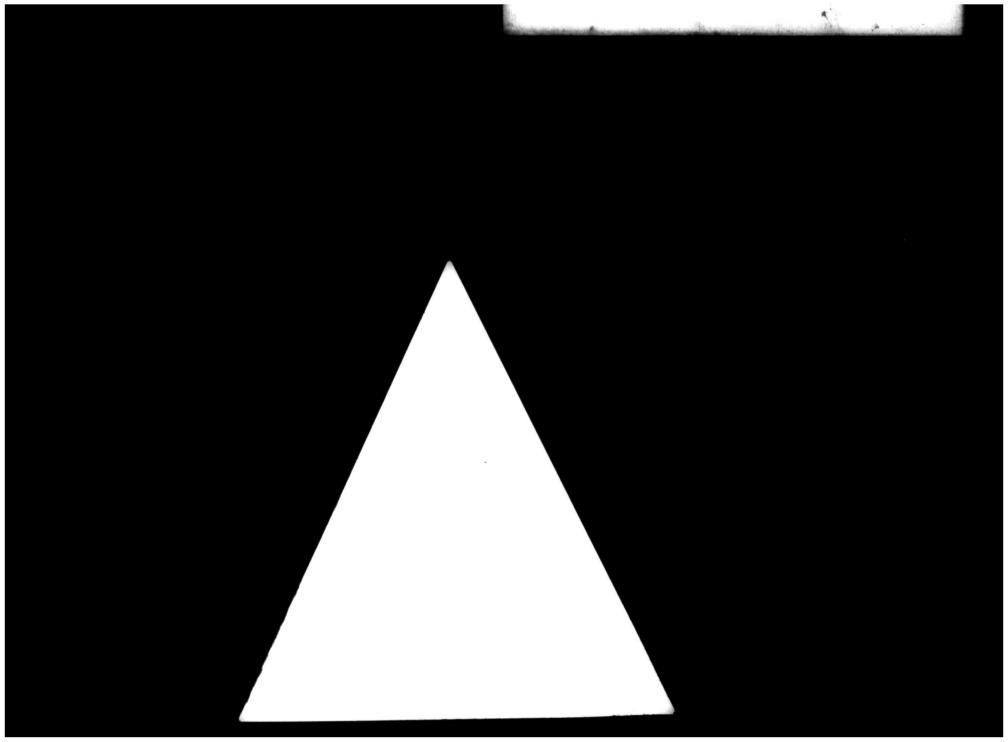
R. J. Soble,

APPLICATION FOR PENSION BY A WIDOW

Whose Deceased Husband Was on the Pension Roll of Georgia.

00 0		
COUNTED COUNTED	TY.	
Personally before me comes	Rashel Te	of said County,
who, after having been duly sworn, says t		4
to whom, in the County of Bilms		
the 6 day of Feb, 1870,		
the date of his death in Many	.193/and that she h	as not since his death remarried; at
the time of his death he was a resident of	both	County, in said State
of Georgia, and he was on the Pension Ro	l of the State and pai	d a pension of \$ . J
in Sherifice County for 19.	, on account of be	ing a soldier in Company
-		(Volunteers or State Militia).
That she is now a bona fide resident of		
has, continuously, resided there since	all of ther &	Je 192
Sworn to and subscribed before me,	,	
25 day of May	907/	
faut Massy	D . 24	Jum
	runary	(Applicant)
of	County.	
(SERE OF THE ORDER OF		
Affidavit of Witness to Prove STATE OF GEORGIA,	_	ate of Death of Husband.
Personally before me comes		known to be
a responsible and truthful person, residing	in said County, who	after having been duly sworn, says
a responsible and truthful person, residing that of deponent's own personal knowledge		
	e, Mrs	who made the foregoing
that of deponent's own personal knowledg	e, Mrs	who died in
that of deponent's own personal knowledge affidavit, is the lawful widow of	on the da	who died in
that of deponent's own personal knowledge affidavit, is the lawful widow of	on the	who died in
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(SEAL OF ORDINARY)



### Ordinary's Certificate

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Soldier's Application Under Act 1910—As Amended by Act of 1919.	w any question do solutional to the winding the the wife fiducial affiducial affiducial acceptance to contribe the contribed to	and they are we may hand a  Massa  Line 14.	BORGIA  RELET MAL  RELET MAL  Splicent Mark & Ye  in said orunty. That I also  that they are both residents
County Cherokee	the are marren swar that you ole truth. So is may be atta be made before y such Ordinary	all truthful and official seal of	
Company E. Beginnen Paylston Bat	d the Ordinary a will true assess half you God.' thank ay the Ordinary to	and trustwo	COUNTY  County  for pu  know
Approved	y shall swear a very make to or paces are immed of the county	office this	YY. } Ordi
hip de	pplicant and vick of the quantities (in which the	day of H	nary of said person he y sworn by
4	ritamen is the circumstance in the circumstance of the circumstanc	are entitled	County, oer represents hi represents hithe witness me before significant country and country of the country
J. W. LINDSEY, Commissioner of Pensions.	o following we need the evi-	entitled to full faith	oertify that I kn s himself to be a threes swearing to
Byrd Printing CK, State Printers, Atlanta.	E 88	10	the said

Ordinary	y's Certificate	
STATE OF GEORGIA,	1	
Country coun	TY.	
1, Jacob mudden	Ordinary of said County, certify that I know	
the applicant Home la Jacus for	r pension is the person he represents himself to be and	
resides in said county. That I also know	the witness swearing to the	
service; that they are both residents of said count	ty and were duly sworn by me before signing the forego-	
ing affidavit and they are all truthful and trust	tworthy and their statements are entitled to full faith and	
credit.		
Sworn under my hand and official seal of offic	se this S day of Kov 1920	
Jacob Massey Ordin	nary	
• •	inty.	
(SEAL)		
NOTES: 1. Before any questions are answered the Ordi	inary shall swear applicant and witnesses in the following words:	
you give shall be the whole truth. So help you G 2. Additional affidavits may be attached if blan 3. All affidavits must be made before the Ordin	inary shall swear applicant and witnesses in the following words: answers make to each of the questions asked you and the evidence od.'' ik spaces are insufficient, hary of the county in which the applicant or witness resides and	
must be certified by such Ordinary.		
	and the second s	
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rtion store so sale	SEX, Pension.	
auth ication or As of 1919	LINDSEY, see of Pensions.	
Causty erate oplication ded by Act of 1919.	W. LINDSEY, initioner of Pensions.  Trition. Absent.	
ederate Application Amended by Act of 1919.	J. W. LINDSEY,  J. W. LINDSEY,  Commissioner of Pension.  M. — 172.	
nfederate  ** Application  ** Application  ** Amended by Act of 1919.  *********************************	J. W. LINDSEY, Commissioner of Pension.	
No.  Confederate ler's Application  1910 As Amended by Act of 1919.  Confederate  C	Reydlon Dol	
No. 18 Applied in the confederal and a second of the confedera	Som Com	
Soldier's Application Under Act 1810—As Amended by Act of 1810.  County - Charlet S.	Approved Approved  J. W. LANDSEY,  Commissioner of Pensions.  The Printing Commissioner of Pensions.	
No. 18 Applied in the confederal and a second of the confedera	Som Com	
No. 18 Applied in the confederal and a second of the confedera	Som Com	
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No. 18 Applied in the confederal and a second of the confedera	Approved  Approved  Oggan  Ogg	

### Application for Soldier's Pension Under Act 1910 Amended by Act 1919

### Questions For Applicants to Answer

STATE OF GEORGIA.
COUNTY.
How le Teams 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:
What is your name and where do you reside! (Give County and Post-office)
2. How long and since when have you been a continuous resident citizen of this State!
all my like
3. Did you enlist in the Army of the Confederate States or in the organized militia of this State from
1861 to 18651 Fall of 186 # Silmer leader
4. When and where, and in what Company and Regiment did you, enlist? (Give the arm and class of
Service Fall of 18 64 Gilmer 60 50, 4th back, 60 6
5. How long did you remain in the actual military service with said Company and Regiment? (Give
date of discharge) 196 4 July Mary 12-1967
6. When and whare was your Company and Regiment surrendered or discharged from the Service!
6. When and was re was your company and negiment surrendered or discharged Iron the Services
7. Were you actually present with your command when it was surrendered or discharged?
8. If you were not actually present, state specifically and clearly where you were
a. Where was your command when you left it! Ringular & w
b. When did you leave the command! Masy 12-1863
c. For what cause did you leave!
d. By whose authority did you leave! Leavenmunding of free
f. Why did you not return to your command after leave expired?
g. In what way were you prevented†4
h. What effort did you make to return 1
i Were you captured during the warf
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?
10. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was
not allowed 1
***************************************
Sworn to and subscribed before me, this the
day of how 1970)
Jack Massey Ordinary)
Ordinary )
of to her of a County.
(SEAL)

STATE OF GROWING
Silmer COUNTY.
R B Evans of said State and County is hereby presented
Mile terre
as a without in support of the approximation of the support of the
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!
I reside in tilmer County Georgea
Meta 7
2. How long and since when have you known the applicant?
for 60 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!
He has lived in selongia all his life
4. When, where and in what Company and Regiment didenlist during
war from 1861 to 1865! (Give date and place.) Selmer County Rolston Batelion
R. Leine When to the
5. How did you obtain your information of this Service!
Me controlled 1804 and served smill from 1865 and 200
6. How long within your own personal knowledge did he perform actual military service with this
Company and Regiment (Give date)
7. When and where was his command surrendered or discharged (give date and place)
1966 at Hongson be
Nea
8. Were you personally present at the surrender!
9. If not, where were you and how came you there!
10. Was the applicant personally present with his command at surrender?
11. If not where was he and how came him there!
12. When did he leave his command 1
when he left it access left at For what cause did he leave! here left it
A and Babb a File and accounter.
By whose authority did he leave
long was he granted leave!
all that you have stated to be true! If of your own knowledge, tell clearly and specifically
U MAS FARACUT COLLE Ann on The fange Company
13. In what way was he prevented from returning to his command !
How do you know! I was in Lesvice with him
to aver antown
14. What effort did he make to return to his command and how do you know?
/en
15. Was applicant captured as a prisoner
In what prison was he held?and
when released
Sworn to and subscribed before me, this the
47 day of 1169
of y doble Ordinary
4: Variety
of County.
(SEAL)

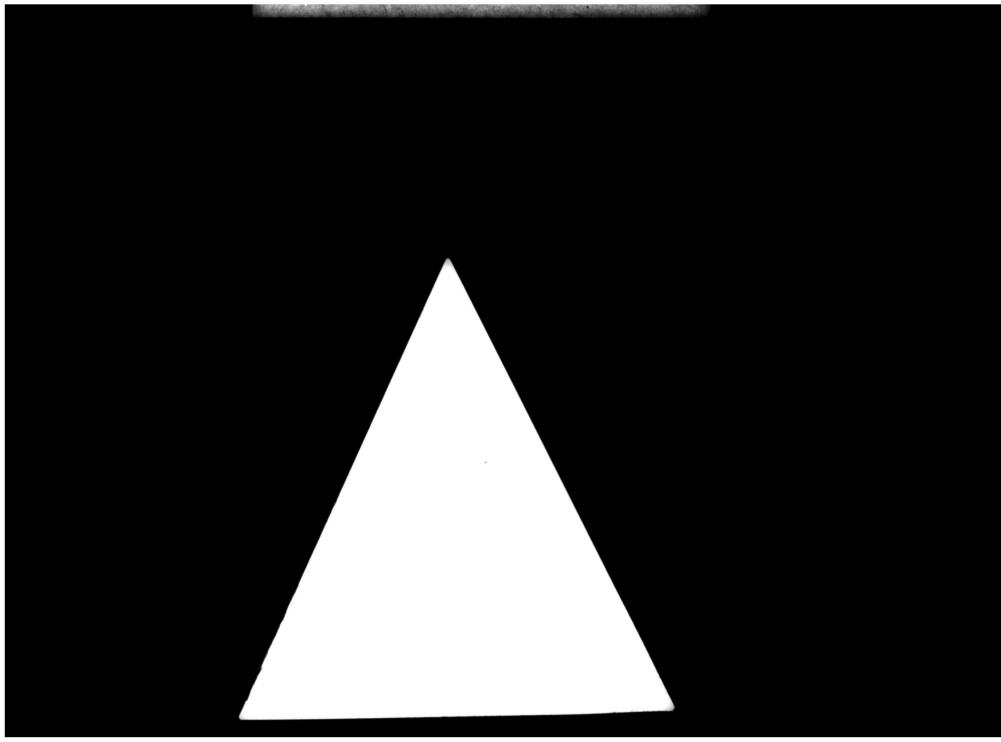
### CERTIFICATE OF ORDINARY

	a truthful and tru hand and seal this nary)		Part Mery Bharoffee	, 198 /
193. County	Deceased Soldier (TODER ACT 1891) (To be paid to his Widow)	she Green	Larringo Z.A., b., 1879 wath Mag. b., 1984 typeroved and ordered paid.  May. 2.67, 1981	R. de T. LAWRENCE, Commissioner of Pensions. T: Fill out above in full and send at to Pension Department for ap- dices you pay out it has money, and men it with your pay-rolls for per- inn it with your pay-rolls for per- ling in the Pension Department.

### Application for Pension Due Deceased Soldier

(To Be Paid to His Widow) (UNDER ACT APPROVED OCTOBER 9, 1801

20				
STATE OF GEORGIA.			1723	* 4
Personally before me, the C	Ordinary of said C	County, somes Mrs.	Ruchel Te	esev_
of said County, who after being	duly sworn, on o	oath says that she	s the widow of	
and that said Pensioner was on t	be Pension Roll of	Ches	oke	County
and was paid a Pension of	The	<b>7</b> (	(1)	Dollars
from said County for the month	DECEMBER OF SEPTEMBER SEPTEMBER	198/ and that		ed to
No. 40 直接 Part Andrews April 11 (1970) (1974) (19	BESSELWUSSERBREICHE LANGELESCH	6 day of		168/
Applicant further swears that		Test City (All City of the Cit	1 Wear	
on the 6 day of 7			lener.	County and
State of Burgin .				Carlotte and Children
lawful wife, and is now his depe				
unpaid be paid to her.				
Sworn to and subscribed by	efore me this	G day of	May	, 198/
Busice (Seel of Ordinary)	Ordinary, County	} Radd Z	_ 0	(L, 8.)
API	TDAVIT	OF WITN	TESS	
AF	IDAVII	Or with	iLoo	
STATE OF GEORGIA		County.		
Personally before me comes.				, who
on oath says that he knew				while in life
and that he knows Mrs.				, the
above applicant; and knows that	the said			
and		were in due for	m of law married	in the County
of	in the	State of		on
the day of		, 18	, and that they	were residing
together as husband and wife at	the time of his d	eath on the	district the state of the state	day of
	, 19 , and	that she is his de	pendent widow.	
Sworn to and subscribed bet	fore me this	day of		, 198
	, Ordinasy	1		
(Seal of Ordinary)	, County			41
(Seat of Ordinary)				
- NAME OF THE PARTY OF THE PART	INSTRU	CTIONS:  It I plan with the brought to Pennin Department or the control of the co		
Die fin Berten bert bereit ber ber	heaten benkrap sympa	President for the possion	by charles name, as a	ridore, specific the



	ä
GEORGIA	TI COLL
) G	5
STATE	4

County. Shysolur

Know all Men by these Presents, That I. Frumile

of Jalacan. P.O. [Privation]

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 County, in said State, do hereby appoint Massesia J. Howelle, of Salvena. B.C.

set hereunto WITNESS WHEREOF,

day of Appoint

Executed in the presence

Only Portmans

unt by

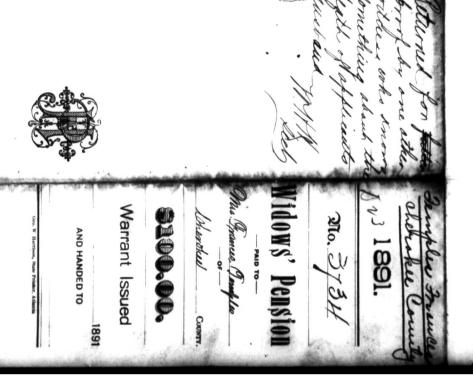
and oblige

Mrs Grances, Temples

Warrant Issued

AND HANDED TO

### STATE OF GEORGIA, Cherokee Know all Men by these Presents, That I, Frances Temples of Balance P.O. Loheran. County, in said State, do hereby appoint Frances J. Parriller of Balacon, P.O. Churchen 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 IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 287 [L. s.] Executed in the presence of us: O. M. Portnand : ordinary binsorions If allowed, send amount by



, and oblige

### Affidavit to be Made by the Widow

Alliuaile	to be made b	y me m	uum.		
County of Scher Mrs. Grands Genefiles oath that she is the widow of	In person in and for th	came before me, to being sworn acc	the undersigned to la	w, says u	nary nder er in
the service of the Confederate 8	States, and served as a mem	ber of Company.	0	of	the
<b>25</b> ■ Regin	ent of Mar	Voluntee	rs; that he	enlisted in	said
Army, he was on the	Army up to game,	nang mang	1865 Th	and was in at while in Note No	the the
per a Hadratal in a	Richmond Ver &	cole prista &	nanna	ma of	-
Regin service on or about the lampedirate Army, he was on the promote his direct in a princip through property of the cleater, with a princip through property of the cleater. The	harbands clark	svao lej Li stre insury	tino pro	Thus	hor.
		A.			
					*
		: .			•
			, -	, ·	
Deponent further swears that she has never day of Mary day of December, 10 Deponent, as the widow of said the General Assembly of George 15th, 1892, and herewith tendent	er married since his death;  1857, and that she has  1859, and since said date she deceased soldier husband, ria, approved December 236 s the proof of her right to	that she became is resided in Geo- i; that Georgia has no lived in a applies for the per l, 1890, for the per receive the allows	his wife on the regia continuities her home any other Stansion provides asion year entince granted	ously since, and was ate or localed by A ding Febr	the the such sality.
Sworn to and subscribed be	efore me, this, the	nosox Ten	ple		

### Affidavit for Three Witnesses.

State of Georgia.

In person came before me, the undersigned Ordinary

County of Sharkey in and for said County, witnesses

and A. M. Jones (ea

(each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge, Mrs. Franceso. Templeo , of the County of Shandley State of Georgia, is the widow of Whilecom & Demplio

of the 25 Regiment of Mal That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or

day of Antent. That while in said service, or by reason of said service in the Army, he lost his life as follows: Ite chiece of Philanmonia

in A Hisportal in the bity of Richmone Va on or about The Livet of June very 1800

testified to the above and with time in the Some compney

Our opportunity for knowing the facts stated in reference to death of applicant's husband were

That we were with him in the common from Med safe to about the sing of December 1862 when he mas pert off spice to a Hopetal and Binchmond Val dependanto over not bresent when he dead lost know he sugar returned his trammond

We further swear that Mrs. Thrusses Timbles soldier during the service, and that she has not intermarried since his death, and that she resides in Chinokee County of the State of Georgia.

Sworn to and subscribed before me, this, the

Sefore me this 29 day 6 & Comelism ordinary Inchens. Co

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

State of Georgia,

1 Oction W. Protorow

County of Schurcher

in and for said County of

State of Georgia, hereby certify that I am acquainted with Mrs. Frances. Temples 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, 1800, 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

day of April

ON Partners

Ordinary.

Form No 4

### 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 leard from since the war.

Those whose husbands were wounded in the army and have lince died from the direct effects

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

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

Widows who have married since the service of their husbands in the army are not entitled.

There is no need of employing a lawer 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 of their County and testify. The attestation of a Justice of the Peace or No:ary will not

If proofs must be made out of the State, the witnesses must be sworn before a Judge of a Court of Record under seal, and the witnesses must be certified to as reliable, and that their signatures are genuine-

'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. SHOULD STATE OF GEORGIA. CHARGO OF

Or born, and for all Course of	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
STATE OF GEORGIA,	Dersonally comes Mrs.
County of Chen les	Firencies Timples
who being sworn, says on oath, that she	
Cherekew St	ate of Georgia, and that she has resided in said State
continuously ever since a boul !	har at case 1857. That she is the Widow of
William & Fearful	who was a Soldier in Company
of the 23 d'	Regiment of (Clargea)
Volunteers, that he enlisted in said Regimen	nt on or about the month of August
186 and served in the Army up to	Suradices 1863. That he lost his
life on theday	of State here
full particulars of the husband's death, who	en, where and from what cause.)
That he lost his life	from an attack of Breamins
	ospestal at sich mend Na
/ -	annary 1863 Charter
MARTINIA AND AND CONTROL OF THE CONT	
Deponent swears that she was the wife of s	aid deceased soldier during his service in the army
	since his death aforesaid, that she became his wife
	e and she resided in this State 23d day of December,
	or locality since that date. I have been allowed a
O-toward	1892, and now apply for the allowance provided by
law for the year ending February 15th, 189	<
FREEDO.	5
Sworn to and subscribed before me, the	13. Texascies Timples
	y. Post-office Carely Charetensto
K COM	DD 0

Ι,	STATE	of GEOR	RGIA, Co	unty ofOrdina	horek.	r said County of
- loho	nace. To	State of Ge	eorgia, here	by certify that	I am acquar r a pension	inted with Mrs. n this case, and
						reputable wis-
						That she is the
widow of	mm,	S. Jemps.	Des	deceased	and as suc	has heretofore
been allowed a						
In Witne	ss Where	of, I have her	eunto set	my hand and a	ffixed the se	eal of my office,
this, the	17.	da	y of_da	nuasy	I	895.
( BAL )				bom	Ordinar	y.
	P	OWER	OF AT	TORNE	Υ.	Form No. 8
	_					
STATE OF			horas		County.	
KNOW ALI	MEN BY			I, France		anples
BEAT				Chos		
County in said	State, do	hereby appoi	int of	1.60880	20.0	rney in fact, for
itled to from	the State	of Georgia as	s a widow o	f a Confedera	te Soldier s	y I may be en- is stated in the
Varrant that						
Warrant that is coming to me f	or the reas	on aforesaid.	ereunto set	my hand and	seal this	14 0%
Warrant that is coming to me if In Witner	S WHER	EOF, I have he	ereunto set	my hand and	seal, this	
Warrant that is coming to me if In Witner	in the pres	nor, I have he 1895.	ereunto set	my hand and	seal this	14 0%
Warrant that is coming to me if In Witner	in the pres	EOF, I have he	ereunto set	my hand and	seal, this	14 0%
Warrant that is coming to me in Witner lay of	in the pres	ROF, I have he 1895.	ereunto set	my hand and	seal, this	( 7 Pk
Warrant that is coming to me in Witner lay of	in the pres	ROF, I have he 1895.	ereunto set	my hand and Frame co	seal, this	14 0%
Warrant that is coming to me in Witner lay of	in the pres	ROF, I have he 1895.	ereunto set	my hand and Frame co	seal, this	( 7 Pk
Warrant that is coming to me in Witner lay of	in the pres	ROF, I have he 1895.	ereunto set	my hand and Frame co	seal, this	( 7 Pk
Warrant that is coming to me in Witner lay of	in the pres	ROF, I have he 1895.	ereunto set	my hand and Frame co	seal, this	( 7 Pk
Warrant that is coming to me in Witner lay of	in the pres	ROF, I have he 1895.	ereunto set	my hand and Frame co	seal, this	( 7 Pk
Warrant that is coming to me in Witner lay of	in the pres	ROF, I have he 1895.	ereunto set	my hand and  Fracture Co.  NS.  , and	seal, this	( 7 Pk
Warrant that is coming to me in Witner lay of	in the pres	ROF, I have he 1895.	ereunto set	my hand and  Fracture Co.  NS.  , and	seal, this	La e.
Warrant that is coming to me in Witner lay of	in the pres	ROF, I have he 1895.	ereunto set	my hand and Frame co	seal, this	( 7 Pk

STATE OF GEORGIA, County of STATE OF GEORGIA. personally comes Mrs. County of Cherokee who being sworn, says on oath, that she is a bona fide resident of said County of Cherotel State of Georgia, and that she has resided in said State 1806 That she is the Widow of continuously ever since William Temples who was a Soldier in Company Regiment of Longea Volunteers, that he enlisted in said Regiment on or about the month of Morch 186/ and served in the Army up to 10 15 W 1865 That he lost his day of State here life on the full particulars of the husband's death, when, where and from what cause.) ( He acid of pure our in the haspilel sel-Richmond Vinguise. 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 1827; 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, 1893, and now apply for the allowance provided by law for the year ending February 15th, 1894. Sworn to and subscribed before me, this

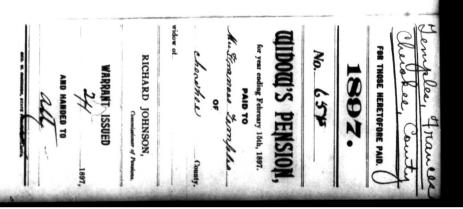
A A A TO THE THE PARTY OF THE P	
TATE OF GEORGIA,	personally Comes Mrs.
the applicant fore pension in this case, an	Foramone Jam bear
County of books	reference )
o nigrosed lie state out in fish on sately has be	and fide modificant of sold consists of
ho being sworn, says on oath, that she is a b	
State of Geo	orgia, and that she has resided in said State
totaline and the tree attention to	18#≤ That she is the Widow of
mm & Tomfoles	who was a Soldier in Company
of the 18	Regiment of Longia
olunteers, that he enlisted in said Regiment	
86 and served in the Army up to 11 A	
Pate	18 (State here
ull particulars of the husband's death, when, w	where and from what cause.) (
Said Newsband Sid in	Was to late at Richmond
	and the state of t
20 Died weth Freder	
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and the second of the second o	5.0f 5.10
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Deponent swears that she was the wife of said	d deceased soldier, during his service in the
rmy as a soldier, and that she has never marri	ed since his death aforesaid, that she became
is wife in the year 1867, that Georgia is he	
•	
f December, 1890, and has not lived in any o	ther State or locality since that date. I have
een allowed a pension for the year ending I	ebruary 15th, 1894, and now apply for the
llowance provided by law for the year ending	February 15th, 1895.
S Joseph S	
Sworn to and subscribed before me, this	Francisco has
day of fammay 1895.	Firances Temples
Ale born Ordinary.	Post-office
5 2	0
5	v i i i i g

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

	RGIA, County of abovertee
I, Aleborn	Ordinary in and for said County of
	State of Georgia, hereby certify that I am acquainted with Mrs.
Finance, Tamp	the applicant for a pension in this case, and
know from my own knowledge (or from	positive proof presented to me by reputable witnesse-,) that she
resides in this County, and that she reside	ed in the State of Georgia on December 23, 1890, and has not
lived out of the State since that date. T	hat she is the widow of Halliam . Famfiles
deceased, and as such has heretofore been	allowed a pension for the year ending February 15th, 1896.
In Witness Whereof, I have it	nereunto set my hand and affixed the seal of my office, this
the	lay of Jany 1897.
SEAL }	A. b. borrow Ordinary.

#### POWER OF ATTORNEY.

STATE OF GEORGIA, charehoe County.
I, Frances, Templas hereby authorize Mm A Norgan IL
of allanta ba to receive and receipt for the pension paid hereon and request
that he remit same to A. C. born, ordy at Canton be
IN WITNESS WHEREOF, I have bereunto set my hand and seal, this 12
day of Jan 2
Frances Jamples [1. K.]
Executed in the presence of
A. b. born and
The same of the sa



TATE OF GEORG	IA,	Personally Con	
County of Cherry	The same of the sa	Juneas Temp	les
will at entities a set there ago	ah .		
who being swe	orn, says on oath, that s	the is a bona fide resident of said	county
Cherolice	State of Georgia	, and that she has RESIDED in	n mid S
entingonaly ever since		1845 That she is the	Widow
Um Edward			Comp
$\delta$ of the /8	Regin	nent of Garage	<u> </u>
of the old regin	ent on or about the m	ionth of Jorly	
and served in the Army up to	Jany	186.3 That	he lost
66 / and served in the Army up to	_day of	1863	(State
Il narticulars of the husband's death, whe	n, where and from what	t cause.) (	
Did in he	pital	ex Riching	-
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Virginia of	new desired and the second sec		110
The state of the s	Andrew Committee of the	The state of the s	Marine of the Control
		¥ .	
eponent swears that she was the wife of od that she has never married since his at Georgia is her home and she reed in any other State or locality since pension provided by law for the year	death aforesaid, that esided in this State 2: noe that date. I have noty for the year ending	she became his wife in the year 3d day of December, 1890, as re been allowed a pension as a g February 15th, 1895, and now	nd has
at Georgia is her home and she reced in any other State or locality si	death aforesaid, that esided in this State 23 noe that date. I have the date of the country for the year ending ending February 15th	she became his wife in the year 3d day of December, 1890, as re been allowed a pension as a g February 15th, 1895, and now , 1896.	nd has
at detract she has never married since his at Georgia is her home and she red in any other State or locality since pension provided by law for the year Sworn to and subscribed before m	death aforesaid, that esided in this State 23 noe that date. I have the date in the year ending ending February 15th	she became his wife in the year 3d day of December, 1890, as re been allowed a pension as a g February 15th, 1895, and now	nd has
at Georgia is her home and she red in any other State or locality si Chew Res.  Court Cour	death aforesaid, that esided in this State 23 noe that date. I have the date in the year ending ending February 15th	she became his wife in the year 3d day of December, 1890, as re been allowed a pension as a g February 15th, 1895, and now , 1896.	nd has
at Georgia is her home and she red in any other State or locality si chewiter. Course pension provided by law for the year Sworn to and subscribed before m	death aforesaid, that esided in this State 2: noe that date. I have not for the year ending ending February 15th e, this	she became his wife in the year 3d day of December, 1890, as re been allowed a pension as a g February 15th, 1895, and now , 1896.	nd has
at Georgia is her home and she red in any other State or locality si chewiter. Course pension provided by law for the year Sworn to and subscribed before m	death aforesaid, that esided in this State 2: noe that date. I have not for the year ending ending February 15th e, this	she became his wife in the year 3d day of December, 1890, as re been allowed a pension as a g February 15th, 1895, and now , 1896.	nd has

	personally Comes Mrs.
County of Cherekee	Frances, Temples
who being sworn, says o	on oath, that she is a bona fide resident of said county of
Charehee so	ate of Georgia, and that she has RESIDED in said State
	18445 ` That she is the Widow of
	who was a Soldier in Company
of the 25 2	bout the month of feel 3
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ife on theday	of class 1863 That he lost his
ull particulars of the husband's death, when, where	and from what cause.)
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The state of the s	and the company of th
has be much mife of sold door	secol suldier during his service in the army as a soldier
•	rased soldier, during his service in the army as a soldier,
nd that she has never married since his death afo	remaid, that she became his wife in the year 18
nd that she has never married since his death afor	resaid, that she became his wife in the year 18
nd that she has never married since his death afor	remaid, that she became his wife in the year 18
nd that she has never married since his death afor nat Georgia is her home and she resided in ved in any other State or locality since that	resaid, that she became his wife in the year 18
nd that she has never married since his death afor hat Georgia is her home and she resided in ved in any other State or locality since that	this State 23d day of December, 1890, and has not date. I have been allowed a pension as a resident of the year ending February 15th, 1896, and now apply for
that she has never married since his death aform that Georgia is her home and she resided in eved in any other State or locality since that  County for the pension provided by law for the year ending F	this State 23d day of December, 1890, and has not date. I have been allowed a pension as a resident of he year ending February 15th, 1896, and now apply for

State of Georgia, cherekee County.
I, Frances , Tamples bereby authorize of for laggins
of Ottonia La to receive and receipt for the pension paid hereon and request
that he remit same to R. Feferes at Cantin Low
In Witnesse Whereof, I have hereunto set my hand and seal, this
day of fang 1898.  Firances & General Les [L. 8.]
Executed in the presence of
A. b. burn ording

COLLEGE PENSION,

For Those Heretofore Paid.

1898.

3690

For year ending February 15th, 1898.

PAID TO

Mu Founds Garafells

Widow of MITT. 3. Taron f. I . a

chorabor

RICHARD JOHNSON,

WARRANT ISSUED

AND HANDED TO 723

	Count			
I, France	a Fample			M. Mayet
Marie Control of the		of_	allanta	La
				est that he remit same t
A le lour	or anda	Ż	at bareto	u la
IN WITNE	SS WHEREO	F, I have her	eunto set my ha	and and seal, this 10 "
day of fang		1899.		
			Francesx	Tempos [L.S
Executed	in presence of		price	-
X 8.60	TTL CHECK			
		A contraction		
	1	nty	in in its	989)
	oy,	County	Practical	1899.
Pate.	SION,	County	SON, ser of Francis.	-1869.
D.	KSION,	County	INSON, insigner of Practions.	SUED 1899.
DD.	PENSION,	Town follows	JOHNSON,	ISSUED
BB.	S PENSION,  February 15th, 1899.	ass Leave follows  or  or  County	RD JOHNSON, Commissions of Practices.	L// 1899. HANDED TO
SDB.	I'S PENSION, wing February 16th, 1899.	one Les Dounts One	AARD JOHNSON, Commissioner of Persons.	RRANT ISSUED  2/4 IND HANDED TO  WANT
1899.	DOW'S PENSION, year ending February 15th, 1899.	Correspondente or	idow of Mozes, B. Leaser P. P. A. RICHARD JOHNSON, Commissioner of Presions.	WARRANT ISSUED  2// 1899.  AND HANDED TO  WANY

STATE OF GEORGIA, Personally Comes Mrs.
County of charokee Formers, Temples
who, being sworn, says on oath, that she is a bona fide resident of said county of
Chonstine State of Georgia, and that she has RESIDED in said State
continuously ever since
Marie & Standard who was a Soldier in Company
Of the 2R C Regiment of Aco
Volunteers, that he enlisted in said regiment on or about the month of
186 and served in the Army up to186 That he lost his
Volunteers, that he enlisted in said regiment on or about the month of
full particulars of the husband's death, when, where and from what cause.)
Sied in Haspital at Richmond
Va usth Consumia fever
The state of the s
· · · · · · · · · · · · · · · · · · ·
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 18%.
I have been allowed a pension as a resident of cheather
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
14 day of and 1898. Transces & Jennifales
Sworn to and subscribed before me, this  14 day of Garage 1898.  1898.  Post-Office
State of Georgia,  County. Ordinary of said County, certify that I am well acquainted
with Mrs. Frances, Terrofeles who made the above affidavit and am satis-
fied 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 18 #5.
Given under my official signature and seal this the 146 day of day of 1898.
A. G. berry
Official Seal. Ordinary of Seas County.

STATE OF GEORGI	A, Personally Comes Mrs.
County of spended	France Topoples
To Man	sworn, says on oath, that she is a bona fide resident of said county of
1 1	State of Georgia, and that she has RESIDED in said State
	18 🗲 That she is the Widow of
continuously ever since	who was a soldier in Company
Maria, a, Vapora.	Regiment of Au
of the	Regiment of July
Volunteers, that he enlisted in said regiment of	on or about the month of fally
186Zand served in the Army up to	Jane 10 toes and
	en, where and from what cause.)
Deal m, Carpentona	UNA formy, 1868 with Vonewarmon.
Herror	
	N .
Deponent swears that she was the wife of said	d deceased soldier, during his service in the army as a soldier, and that
	, and that she became his wife in the year 1852.
I have been allowed a pension as a res	nident of chartene 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 n	ne, this
day of faring	1899. Frances & Touchos
N. C. Burrer Or	dinary. Post-Office
	100
State of Georgia,	anty, Ordinary of said County, certify that I am well acquainted
	inty. ) Ordinary of said County, certify that I am well acquainted
with Mrs. America, General	
fied that the facts therein stated are true, and	i I know she is the individual she represents herself to be, and that she
has continuously resided in this State since the	•
Given under my official eignature and	seal this the day of four 1899.
	A 6.60mm
Official Beal.	Ordinary of chorehow County

STA	TE OF		RGIA,		}		_				
					es_h			orize M		mist	7
to re	ceive and	1 receipt	for the	pensi				nd reque		ne remi	it same to
								tool			
4			WHERI			ereun	to set	my hand	and see	al, this	s."-
_ day o	1. Gual		THE LET VILLE	1900		20	un	Gen 2	asse, de	دده	[L. S.]
	Exec	nted in p	resence (	of				ship			
A.	6,60	1222	6.rg		Began - 1-86						
1			<u>_</u> ,			nty,		OM.	T	900	
Pag .			0	, 1900.	3	County,	3	of Penn	۵	1	
3 2	Ö		W'S PENSI	For year ending February 15th, 1900 PAID TO	towness temps so		300	JNO. W. LINDSEY	WARRANT ISSUED	7 2	Mr. Atlan
Heretofore	00	NO. 841	P	g Februa	in the	3	tues	LIN	TI IS	AND HANDED TO	7 E
1 m	ā	0	S	ding I	3	Exame has	200	``	RAN	ND HA	The !
35	=	Ž	9	year ei	cores	240	M Jo	JNO	. X	33	3
F				For	My	ħ	Widow of Mr. & Laston		8	1	
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	i, s	BORGI.	Count	Seas ag	of	Chargos	wod.			支	authorize
1	m	ness w	HERE	120		hereun	ento	my ha	nd and	d seal, th	is 9 "
		in presen		ng.		2411		stran			[L. S.]
To Those Heretofore Paid.	1901.	No. 3469	WIDOW'S PENSION,	For year cading February 15th, 1901.	We Horanees Terry place	Chese See County.	Widow of Warm # Parathles	Commissioner of Persions.	WARRANT ISSUED	AND HANDED TO	Cerrer Ove. W. Harrison, Wase Printer, Alberta, On

For Widows Heretofore Allowed

STATE OF GEORGIA,	Personally Comes Mrs.
County of Charehoe	Genunces Tomples
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	_1846.5 That she is the Widow of
	who was a soldier in Company
I of the 23 L	Regiment of Lace
Volunteers, that he enlisted in said regiment on o	r about the month of Julia
186 and served in the Army up to	unuy, 1863 That he lost his
life on theday of	f18(State here
particulars of the husband's death, when, where	and from what cause)
Eige are Warreta	gat Richmand de
- 4 4 4 mil 1863 wie	to Cucusuatea Facian
	1
Deponent swears that she was the wife of said decer	ased soldier, during his service in the army as a soldier, and that
she has never married since his death aforesaid, and	
	of chere her County for the year ending
	ension provided by law for the year ending February 15th, 1900.
day of fuet1900	Post Office
Or E. CLASIC Ordinary	Post Office
State of Georgia,	Ordinary of said County, certify that I am well sequeinted
where hoe County	Ordinary of said County, certify that I am well sequainted
with Mrs. 124 6 cs Townfold	, who made the above affidavit and am satis-
	ow she is the individual she represents herself to be, and that she
	day of184-5 '
	I, this the S day of Goot 1 1900.
Official	Ordinary of Chankow County.
( Comm.)	Ordinary of Chance Roll County.

#### For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,	Personally Comes Mrs.
	on cath, that she is a bona fide resident of said County of State of Georgia, and that she has RESIDED in eaid State
	. That she is the Widow of
William F. T	who was a soldier in Company
6 of the / F "	Regiment of La
Volunteers, that he enlisted in said regiment on or al	sout the month of farly
186 and served in the Army up to	1865 That he lost his
life on theday of_	facy 1868 (State here
particulars of the husband's death, when, where	and from what cause)
Frewor Jany 1868	
I have been allowed a pension as a resident February 15th, 1322, and now apply for the pension to and subscribed before me, this	of County for the year ending for the year ending ion provided by law for the year ending February 15th, 1901.  Servance as Temples
State of Georgia,	I A, B, G
with Mrs. Foranoes, Lample	, who made the above affidavit and am satisfied
that the facts therein stated are true, and I know sh	a la cha ladinidad da accessora benedita be and day d

POWER OF ATTORNEY

STATE OF GEORGIA,

Charles Georges County.

I. Finances Georges of bourtain ba hereby authorize

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

at leastless ba

In Witness Whereof, I have hereunto set my hand and seal, this grade day of form 1902.

Executed in presence of

L. S. Executed in presence of

For year ending Dec. 31, 1902.	or County,	d. Regiment Las soll.	WARRANT ISSUED  AND HANDED TO  OM  OM  ORD - MARRIED TO COM  ORD -
VIDOW'S For year ending	M. Frances Genefiles	Gidow of 1977 Co. Ignorif I La.  o. J. 16. Regiment La. Ale.  JOHN W. LINDSEY,  Communications of Par	WARRAN

STATE OF GEORGIA,	Company			
I. Finas	ros Years			by authorize
to receive and receipt for	the pension paid	hereon, and r	equest that he r	emit same to
In Witness Whereo	of, I have hereunt	o set my han	d and seal, this	8"
day of fang	1908.		higensel	
Executed in present			of all	######ELD: 0- J
12 0 1	V. Ordry			
De lever				
DA G.COLVE				
De Colver				
B. C. COLVE				

STATE OF GEORGIA,	PERSONALLY COMES MRS.
County of Charoker	Frances, Jamples
who, being sworn, says on oa	th, that she is a bona fide resident of said County of
1	of Georgia, and that she has RESIDED in said State
continuously ever since /8#5"	. That she is the Widow of
pm & Temples	who was a soldier in Company
I of the 23	Regiment of La
Volunteers, that he enlisted in said regiment on	or about the month of fact
188/, and served in the Army up to	1861. That he lost his
life on the day o	Lasy 1864 (State here
particulars of the husband's death, when, where and	from what cause)
particulars of the husband o death, when where and Sood in (Noshital at Re with breamant fasts	chronel Na fay 1868 -
with treumna feron	
-	
en e	1 200
Deponent swears that she was the wife of said de	eceased 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 1857	
I have been paid a pension as a resident	of County for the
year ending December 31, 1901, and now apply for	or the pension provided by law for the year ending
December 31, 1902	
Sworn to and subscribed before me.	L.
Sworn to and subscribed before me. this 5 day of fary 1902	Ferances & Bankles
& . E. E Ordinary	Post-Office
State of Georgia	1. A.b. born
County.	Ordinary of said County, certify that I am well
acquainted with Mrs.	, who made the above affidavit and
•	ue, and I know she is the individual she represents
hereself to be, and that she has continuously re-	
day of .1%#\$	
	his the Car
Given under my official signature and seal, t	
Official /	A. b. born
1	Ordinary of cherokes County.

NOTE. - All blank spaces must be filled.

Voucher and affidavit must bear date after January 1st, 190s.

amima and	Contract Con	1000	PRESONAL	LLY COMES MRS.
STATE OF	EORGIA.		A MINIOTAL	LLY COMES MRS.
	Cherole		4	
				s. Fernflu.
	ho, being sworn	says on oath, that	she is a bona tid	e resident of said County of
16.	usher .	Dec. 1 0		e has RESIDED in said Stat
the state of the s	Mile Charles Bulletin Burner	State of Georg	gia, and that sh	e has resided in said Stat
continuously ever sin	00	481		That she is the Widow
	27 8 9ter	where	who	was a soldier in Compan
.0		CONTRACTOR OF THE PARTY OF THE		La.
of the	Processia		Regiment of	- Sal
Volunteers, that he en	listed in said reg	riment on or about	the month of	ful
86 and served	in the Army un to	lance	N.	
4-		The state of the s		
ife on the	- Annual Control of the Control of t	day of Jan	muy	1864 (State he
particulars of the husba	nd's death, when	where and from who	of cores V	
Deire	Waster	to at a	4	ad sky
The same of the sa	V VIOLETA	Car On The	C. M. M. C.	ad plu
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	Common -			
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oldier, and that she l	has never married	d since his death a	aforesan, and	his service in the Army as
oldier, and that she l he year 18 <b>5.5</b> I have been paid	has never married	d since his death a	atoresa, and	
oldier, and that she is the year 18 £ 5  I have been pair year ending December	has never married	d since his death a	atoresa, and	that she became his wife i
oldier, and that she is the year 18 £ 1	d a pension as a re	d since his death a sesident of	afores, and the second of t	County for the year ending
oldier, and that she is the year 18 £ 1  I have been paid or ear ending December 31, 1908.	d a pension as a re	d since his death a sesident of	afores, and the second of t	County for the year ending
oldier, and that she is the year 18 £ 1	d a pension as a re	d since his death a sesident of	afores, and the second of t	County for the year ending
oldier, and that she is the year 18 £ 1  I have been paid ear ending December 31, 1908.	d a pension as a re	d since his death a sesident of	afores, and the second of t	County for the year ending
oldier, and that she is the year 18 £ 1  I have been paid ear ending December 31, 1908.	d a pension as a re	d since his death a sesident of	afores, and the second of t	that she became his wife i
oldier, and that she is the year 18 £ 1  I have been paid ear ending December 31, 1908.	d a pension as a re	d since his death a sesident of	afores, and the second of t	County for the year ending
oldier, and that she is the year 18 ft.  I have been paider ending December 31, 1908.  Sworn to and this day of Coord	d a pension as a re r 31, 1902, and no	d since his death as esident of	alores and a	County for the year ending
I have been paidear ending December 31, 1908.  Sworn to and that she is the year 18 £ 5.  Sworn to and this & day of the year of Capacita.	d a pension as a re r 31, 1902, and no	d since his death as esident of	alores and a	County for the year ending
I have been paidear ending December 31, 1908.  Sworn to anothis.  State of Georg	d a pension as a re r s1, 1902, and no d subscribed be a fary	esident of Assert was apply for the perfore me, 1908. Printing. Po	ension provided	County for the year ending the state of the year ending the year end
I have been paidear ending December 31, 1908.  Sworn to and that she is the year 18 ft. 1908.  Sworn to and this ft. 1908.  State of Georg	d a pension as a re r s1, 1902, and no d subscribed be a fary	esident of Assert was apply for the perfore me, 1908. Printing. Po	ension provided	County for the year ending
I have been paidear ending December 31, 1908.  Sworn to and this State of Georg	d a pension as a rear st, 1902, and no d subscribed be a fary	esident of Anomaly we apply for the performance of Anomaly Po	atores and a stores are a stores and a stores a stores and a stores and a stores and a stores and a stores ar	County for the bylaw for the year ending the state of the sta
I have been paidear ending December 31, 1908.  Sworn to and that of George oquainted with Mrs	da pension as a re r 81, 1902, and no d subscribed be a fary	esident of Land was apply for the perfore me, 1908.  Ordinary. Po  County. Ordinary. Ordinary. Ordinary.	ension provided  and ension pr	County for the law for the year ending the law for
I have been paider ending December 31, 1908.  Sworn to anothis.  State of Georg	da pension as a re r 81, 1902, and no d subscribed be a fary	esident of Land was apply for the perfore me, 1908.  Ordinary. Po  County. Ordinary. Ordinary. Ordinary.	ension provided  and ension pr	County for the law for the year ending the law for
I have been pairer ending December 31, 1908.  Sworn to anothis day of the George Constitution of George Constituti	d a pension as a re r s1, 1902, and no d subscribed be a fary	esident of Assert the period of the period o	ension provided  and ension pr	County for the law for the year ending the law for
I have been pair our earlier of Georg	da pension as a re r 31, 1902, and no d subscribed be a fary	esident of Andrew apply for the perfore me, 1908 County. Ordinary. Po	ension provided  ension provided  ension provided  ension provided  is t-Office  I, A C  mary of said Co  who to  know she is the	County for the year ending the state of the s
I have been pair rear ending December 31, 1908.  Sworn to anothis 8 day of the George Constitution of George Const	da pension as a re r 31, 1902, and no d subscribed be a fary	esident of Andrew apply for the perfore me, 1908 County. Ordinary. Po	ension provided  ension provided  ension provided  ension provided  is t-Office  I, A C  mary of said Co  who to  know she is the	County for the law for the year ending the law for
I have been pair our earlier of Georg	da pension as a re r 31, 1902, and no d subscribed be t fary	esident of Anomaly of the period of the peri	alores and a caroline	County for the Jaw for the year ending that she became his wife is by law for the year ending the law for the year ending that I am we hade the above affidavit and individual she represent the law for the law f
I have been pair our earlier of Georg	da pension as a re r 31, 1902, and no d subscribed be a fary	d since his death a sesident of Are we apply for the performent of Are we apply for the performent of the performent of the performance of the per	alores and a caroline	County for the County for the bylaw for the year ending the county for the year ending the county, certifity that I am we made the above affidavit and individual she represent the county for the county

STATE OF GEORGIA, leheroker County. Firances, Lemples m. A. Wright of allanta la receipt for the pension paid hereon, and request that he remit same to O. b. bonn ording as beauting ba IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 2 and Executed in presence of A. b. borne. Ording

> WIDOW'S PENSIO TEAR ENDING DECEMBER 31. JOHN W. LINDSEY.

## STATE OF GEORGIA, \_\_\_COUNTY. to receive and receipt for the pension paid hereon, and request that he remit same to In Witness Whereof, I have hereunto set my hand and seal, this Executed in presence of

JOHN W. LINDSEY WARRANT ISSUE

TO THOSE HERETOFORE PAID

1904.

#### FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, PERSONA	LLY COMES MRS.
STATE OF GEORGIA, County of Chesohae France	grandle.
who, being sworn says on oath, that she is a bona fide re	
chembles State of Georgia, and that she	
continuously ever since / 8 4 5	
continuously ever since 72 kg.	mes a coldier in Company
	La sal.
Volunteers, that he enlisted in said regiment on or about the month of	my
186/ , and served in the Army up to Sary 18	6.3 That he lost his
188/, and served in the Army up to	1864 (State here
particulars of the husband's death, where and from what cause.]  Oise my Has fital at hicks with answeria Hever	mul sa.
with Communia Flever	4
Deponent swears that she was the wife of said deceased soldier, during bis	s service in the Army as a
soldier, and that she has never married since his death aforesaid, and the	hat she became his wife in
the year $18 \le 5$	
I have been paid a pension as a resident of cherokes	County for the
year ending December 31, 1903, and now apply for the pension provided by	by law for the year ending
December 31, 1904	
Sworn to and subscribed before me, this 2 day of flary 1904 Frances The Post Office	Kamples
Post Office	₹
21.6.6000 2 L Ordinary	
State of Georgia,	
State of Georgia, I. A. lo. lo. County. Ordinary of said County.	m
acquainted with Mrs. Frances, Benfiles, who made	
am satisfied that the facts therein stated are true, and I know she is the	
herself to be, and that she has continuously resided in this State since the	е
day of	
Given under my official signature and seal, this the day of	Jany 1904.
es. 6.60	
	Her County
NOTE All blank spaces must be filled.	

STATE OF GEORGIA, PERSONALLY COMES MIRS.
County of Cherolice Frances Temples
who, being sworn says on oath, that she is a bona fide resident of said County of Chessitee State of Georgia, and that she has RESIDED in said State
continuously ever since /845 . That she is the Widow of
The & Temples who was a soldier in Company
O of the 27 Regiment of Georgia
Volunteers, that he enlisted in said regiment on or about the month of July
1864_, and served in the Army up to January 1863. That he lost his
life on the day of January 1867. (State here
Died in Hospital at Richmond Va
Died in Hospital at Richmond Va in January 1863 with Breumonia
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
I have been paid a pension as a resident of Cheroftee County for the
year ending December 31, 1904, and now apply for the pension provided by law for the year ending
December 31, 1905,
Sworn to and subscribed before me, Frances to emples
this 7 day of Jan 1905.
Sworn to and subscribed before me, this 7 day of four 1905.  W. K. Webb., Ordinary.  Post-Office Breely
State of Georgia,  County.  I, M Mush  Ordinary of said County, certify that I am well
County. Ordinary of said County, certify that I am well
acquainted with Mrs. Frams Temples , 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 of18 # \$\frac{1}{3} \tag{8}
Given under my official signature and seal, this theday of1905.
Given under my official signature and seal, this the
Seal.
Ordinary of 10 MM Office County

STATE OF GEORGIA, Cherice to receive and receipt for the pension paid hereon, and request that he remit same to In Witness Whereof, I have hereunto set my hand and seal, this Executed in presence of JOHN W. LINDSEY, WARRANT ISSUB # Jances

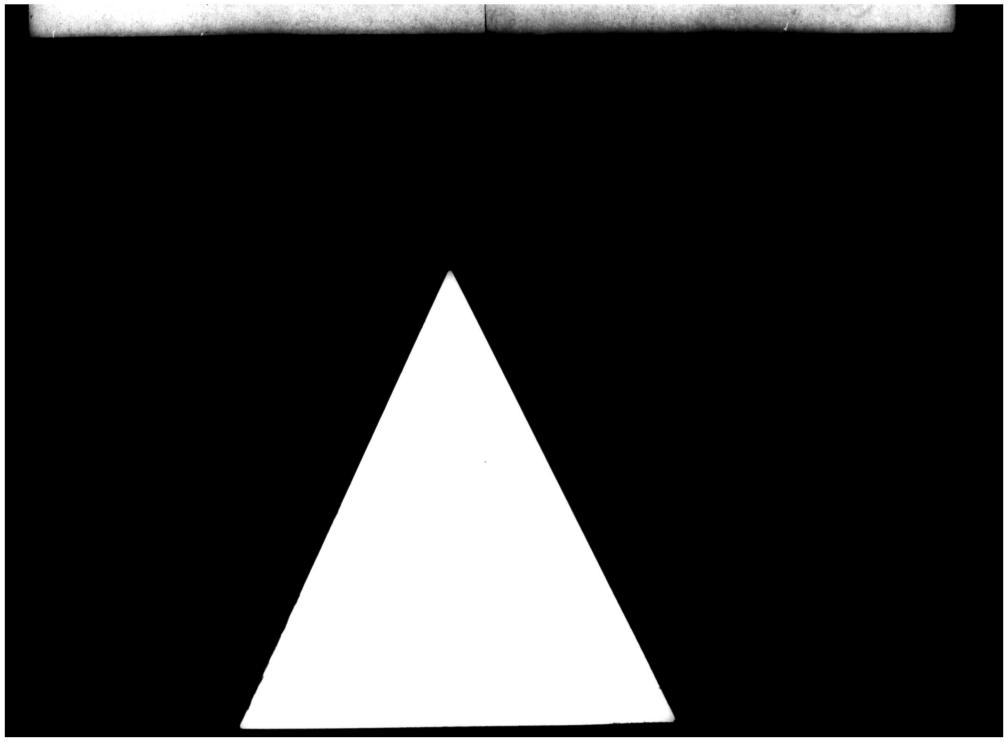
. .. THUMBY DEPROPER

Executed in presence of

POWER OF ATTORNEY.

STATE OF CEORG	PERSONALLY COMES Mrs.	
STATE OF GEORG	1111,	
County of Cherollee	Frances Semple	2
*		
who, being sworn, s	says on oath that she is a bona fide resident of said Co	unty of
Chewkee	State of Georgia, and that she has RESIDED in sai	d State
	10111	
continuously ever since		idow of
1140,00	miles who was a soldier in C	ompany
of the 237	Regiment of 44	
Propping .		
	ment on or about the month of	- Table of the same
186 and served in the Army up t	to 186 3 That he	lost his
life on the	day of1863 (8	tate here
2000 y		tute neve
particulars of the husband's death, when	, where and from what cause.)	
died in tw	epitar at Richard	-
(va. 1865	THE STATE OF THE S	
The second section is a second		
1979		,
	The second secon	- man-go-spectrons
The second secon		
	and the control of th	-
THE RESIDENCE COMMENT AND ADDRESS OF THE PERSON NAMED ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED ADDRESS OF T	of said deceased soldier, during his service in the Ar	and the same of th
the year 18.5 9	a resident of Cherkee County,	
I have been paid a pension as	a resident of Cherry, County,	for the
year ending December 81, 1905, and no	w apply for the pension provided by law for the year	ending
December 81, 1906.		
Sworn to and subscribed befo	~ / ~	
0-1	1400	
this day of Januer	2 1908. March	
W. J. Moba or	dinary. Post Office Reely.	
	100101100	N WILLIAM CO.
State of Casasia	1. W.J. Mobile	*
State of Georgia,	1	Marie Cale Control Control
Oherkee co	unty. Ordinary of said County, certify that I	am well
acquainted with Mrs. France		
	1, /	
am satisfied that the facts therein state	ed are true, and I know she is the individual she rep	resents
herself to be, and that she has continue	ously resided in this State since the	6 (6
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day of18_4	6" 0	
Given under my official signature	e and seal, this the day of day	1906.
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Official	- FIFTHOOD	-
Seal (	Ordinary of Therefice	County.

County of Charage	Farmers Jemble
	e of Georgia, and that she has RESIDED in said State
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South about of the same of the	That she is the Widow o
you 6 Temple	who was a soldier in Company
of the 23	Regiment of Serryia
Volcunteers, that he enlisted in said regiment o	n or about the month of Jane
	During 186 3. That he lost hi
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particulars of the husband's death, when, where as	
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soldier, and that she has never married since	his death aforesaid, and that she became his wife i
soldier, and that she has never married since the year 18.5 2. I have been paid a pension as a residen	his death aforesaid, and that she became his wife it
soldier, and that she has never married since the year 18.5 2. I have been paid a pension as a residen	his death aforesaid, and that she became his wife it
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soldier, and that she has never married since the year 18.5 2.  I have been paid a pension as a residen year ending December 81, 1906, and now apply	his death aforesaid, and that she became his wife in
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I have been paid a pension as a resident year ending December \$1, 1905, and now apply December \$1, 1907.  Sworn to and subscribed before me day of Georgia, County, acquainted with Mrs. Themes Tennes of the self-state of the thing of the self-state of the self-stat	his death aforesaid, and that she became his wife in the formula and that she became his wife in the formula and the pear ending for the pear end for the pear end of



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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 afficient; hereby authorizing my said attorney to receipt in my name for any Warrant that may be essend by the Governor, or for any sum of money which may be coming to me for the reason

day of Relegiouses have WITNESS WHEREOF, wille

Executed in the presence of us:

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1891. Mo. 21060

Revolled COUNTY.



Warrant Issued

1891

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POWER OF ALTORNEY.
STATE OF GEORGIA,
Cherolice County.
Know all Men by these Presents, That I, Agrances Thucker
of landing P.O. la herolus
County, in said State, do hereby appoint Jessel In Branks
of fanton for 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 become out my hard and seal this
day of Julymand 1892 Thacker [L. s.]
Executed in the presence of us:
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Widows' Pension

Widows' Pension

Widows' Pension

What There Comm.

Warrant Issued

1889

#### Affidavit to be Made by the Widow.

STATE OF GEORGIA,
County of Cherokee in and for the County of Cherokee
Mrs. Frances Thacker , who being sworn according to law, says under
oath that she is the widow of James In Phaelies , who was a soldier in
the service of the Confederate States, and served as a member of Company D,, of the
December of Ballacion No Volunteers; that he enlisted in said
service on or about the 15 day of Angest 1861, and was in the
Confederate Army up to 9 Angrod 1868 That while in the
Army, he was on the day of 1862, (See Note No. 1)
mas takee a prisoner long the pr. & army while in the
and never returned deported believes that her said
and never returned deponent believes that her said
Inso band died in princer. That The was Inminhell
with the date of his death by a prisinger who was
with him in prison when he will that she is
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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 theth
day of, and that she has resided in Georgia continuously since the
day of; 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 Detotus 1891. France & Thanker more more more malls the

Norz 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.

	State of Georgia, In person came before me, the undersigned Ordinary
	in person came before me, the undersigned ordinary
	County of Cheroker in and for said County, witnesses
	- Liphno Rakestrow, James Rakestrow
9	and Dead In Barry (each known to said Attesting Officer as truthful,
	reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge,
	Mrs. Frances Thacker, of the Country of Charolice,
3	State of Georgia, is the widow of James In Phaeles , who was a soldier in
	Company of the Legion Regiment of M. C. Bottalaire Volunteers.
	That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or
	about the 15 day of Angust 186/ That while in said service, or by
	reason of said service in the Army, he lost his life as follows: Mas Cap Mirech Long
	the Dr D. avmy while in the ballie at Isellysbring Pa in
	The Sou Chan of July 1863 that it was after that hime
	reperled that he was in prisent Point Lookout and
	Atral pard Saldier died while in band Pomocon. deponento
	know that poid balchier never returned to his Commonance
	and that he never returned to his home other the wor

Our opportunity for knowing the facts stated in reference to death of applicant's husband were that we were with him in the army and reach with The Converse appear in E. Marre. Mit we have Kenowow Sand Appleant all the Time Some The war

We further swear that Mrs. Frances Phacker soldier during the service, and that she has not intermarried since his death, and that she resides in

Sworn to and subscribed before me, this, the day of Felson 1892 Colians W. P. Manush Ordinary.

Country of the State of Georgia.

Sworn to and subscribed before me, this, the Super Scribbs of Greeke Strains

Colians W. P. Manush Ordinary.

Note. Witnesses must not testify about things they may believe, but coufine their statements to such facts as they per-

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

State of Georgia,	I, Oclian W. Preknam Ordina
County of Charolice	in and for said County of Loherdice
State of Georgia, hereby certify that I am ac	equainted with Mrs. Prometo Thatter

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

Promoth day of Relanguage 1800-OM Presigni Ordinary

Form No. 4.

#### 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

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

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 parsonally 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 lawer 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 of their County and testify. The attestation of a Justice of the Peace or Notary will not

If proofs must be made out of the State, the witnesses must be sworn before a Judge of a Court of Record under seal, and the witnesses must be certified to as reliable, and that their signatures are genuine.

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. En. Department.

DIRECTIONS. Send amount by thro A So did bome andy

my true and lawful attorney in fact, for

STATE OF GEORGIA,  County of Chereller Hanney That lear
County of Cheriker Janney Thatker
who being sworn, says on oath, that she is a bona fide resident of said County of
Churchur State of Georgia, and that she has resided in said State
continuously ever since of Bout they was 1845. That she is the Widew of
of the 319th Regiment of Groggia
of the 119 Regiment of Grogia'
Volunteers, that he enlisted in said Regiment on or about the month of
186_ and served in the Army up to August 1864 That he lost his
life on theday of 18 (State here
full particulars of the husband's death, when, where and from what cause.)
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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 18 £ 2; 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, 1892, and now apply for the allowance provided by
law for the year ending February 15th, 1893.
Sworn to and subscribed before me, this
37 th day of january 1893. Frances Theellar

	STATE OF GEORGIA, County of Control
STATE OF GEORGI	A. Dersonally comes Mrs.
County of bhooker	
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Certificate of Ordinary of the County of Applicant's Residence

Widows Hererofees Alleved Pensions.

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STATE OF GEORGIA,	Dersonally Comes Mrs.
County of Chereked	Frames & Hacker
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of the 2 P	Regiment of Langua
Volunteers, that he enlisted in said Regin	
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day of January 1895	Post-office
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cd in any other State or locality since that date. I have been allowed a pension as a resident of horacles. County for the year ending February 15th, 1895, and now apply for pension provided by law for the year ending February 15th, 1896.  Sworn to and subscribed before me, this	14 day of 1896.	
cd in any other State or locality since that date. I have been allowed a pension as a resident of horacles. County for the year ending February 15th, 1895, and now apply for pension provided by law for the year ending February 15th, 1896.  Sworn to and subscribed before me, this	De Gome Ordinary. Post-office	-
cd in any other State or locality since that date. I have been allowed a pension as a resident of hondre. County for the year ending February 15th, 1895, and now apply to pension provided by law for the year ending February 15th, 1896.  Sworn to and subscribed before me, this		4
cd in any other State or locality since that date. I have been allowed a pension as a resident of hondre. County for the year ending February 15th, 1895, and now apply to pension provided by law for the year ending February 15th, 1896.  Sworn to and subscribed before me, this	A .	
cd in any other State or locality since that date. I have been allowed a pension as a resident of hondre. County for the year ending February 15th, 1895, and now apply to pension provided by law for the year ending February 15th, 1896.  Sworn to and subscribed before me, this		1
cd in any other State or locality since that date. I have been allowed a pension as a resident of hondre. County for the year ending February 15th, 1895, and now apply to pension provided by law for the year ending February 15th, 1896.  Sworn to and subscribed before me, this		

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

STATE OF GEORGIA, County of Cherofue
I, alle . C. Cours Ordinary in and for said County of
chero/ce State of Georgia, hereby certify that I am acquainted with Mrs.
Cherotee State of Georgia, hereby certify that I am acquainted with Mrs.  Frances. & Shaeler the applicant for a pension in this case, and
know from my own knowledge (or from positive proof presented to me by reputable witnesse-,) 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 James, M. That let
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
the 5 " day of January 1497.
(SEAL) Cellere, C. Cocce Ordinary.

#### POWER OF ATTORNEY.

STATE OF GEORGIA, Ch. 1. Frances of Sheeker	hereby authorize (vera, Wight receive and receipt for the pension paid hereog and request
that he remit same to W. C. Cottut  IN WITNESS WHEREOF, I have hereunto	ordy at Carlon 7a, set my hand and seal, this 8"
Executed in the presence of	Frances XE. Shorker [1.4]
webt lown	

WARRANT ISSUED  AND HANDED TO	widow of January M Theelee RICHARD JOHNSON, Commissioner of Pressions.	for year ending February 15th, 1897.  PAID TO  A. Frances, E. Flacke  OF  Chestles Lee ("ount	Mo. 650	FOR THOSE HERETOFORE PAIR.  1897.
1897,	lacky	1897.	10,1	

#### POWER OF ATTORNEY.

State of Georgia, choresia I, France & Thacken herebot	ve and receipt for the pension paid hereon and requ
that he remit same to A 6 6	11 Centen la
IN WITHER WHEREOF, I have hereunto set my hand	and seal, this
lay of	Frances Ex Thackort
Executed in the presence of	
a, b. bermond	

Most Heretofore Paid.	1898.	CLIDOW'S PENSION,	For year ending February 15th, 1898.	Mustramons, 6 Thatlen	charles county,	Widowof flores d. M. Backford RICHARD JOHNSON, Commissions of Prairies	WARRANT ISSUED	AND HANDED TO	GEO, W. HARRISON, STATE PRINTER, ATLANTA
-----------------------	-------	-------------------	--------------------------------------	-----------------------	-----------------	--	----------------	---------------	--

STATE	OF	GEORGIA,
County	of	Cheropen

Frances & Thacker

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 James, M. Thocker who was a Soldier in Company

F of the 28th Regiment of Georgia Voc Volunteers, that enlisted in said regiment on or about the month of au quit 186 / and served in the Army up to full particulars of the husband's death, when, where and from what cause.) Died Oriciscus of war in year 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 18 50 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

Cherofe County for the year ending February 15th, 1896, and now apply for the pension provided by law for the year ending February 15th, 1897

8" day of January 1897.

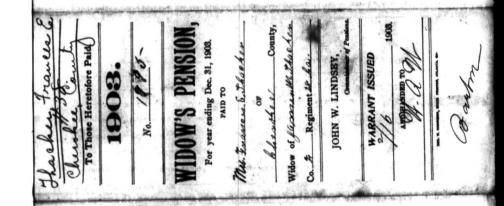
Allen & Colour Ordinary.

Solution of Marie Morris Miles Sa.

STATE OF GEORGIA,	Personally Comes Mrs.
who, being	sworn, says on oath, that she is a bona fide resident of said county of
continuously ever since	State of Georgia, and that she has RESIDED in said State  18 4%. That she is the Widow of  Thougham who was a Soldier in Company
of the 25"	Regiment of Las
	or about the month of Aug.
186 / and served in the Army up to	186 🖟 That he lost his
	day of 18 (State here
	, where and from what cause.)
	an of war in 1864
William Williams	
**************************************	
The same of the sa	
The second secon	
Dependent sweets that she was the wife of said d	eceased soldier, during his service in the army as a soldier, and that
	and that she became his wife in the year 18 £ 52.
I have been allowed a pension as a resid	ent of Charles County for the year ending
February 15th, 1897, and now apply for the pe	nsion provided by law for the year ending February 15th, 1898.
Sworn to and subscribed before me,	898. Francis Extracker nary. Poet-Office
day of day	898.
State of Georgia,	I. V. b. b. c
with Mrs. France & S	who made the above affidavit and am satis-
	know she is the individual she represents herself to be, and that she
has continuously resided in this State since the	day of18.5 ≰.
Given under my official signature and se	al this the day of 1898.
_	A. la born
Official   Seal.	Ordinary of chanceles County.

State of Georgia,
chartees County.
1. Frances & Thankor hereby authorize men & Warself
of a Hanta la
to receive and receipt for the pension paid hereon and request that he remit same to
N 6 6cores at base tire ba
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this /t
day of faring 1890.
Executed in presence of
N 6 6 con croling
∞
1
8
ON, 899.  County of Son
Court
Those Heretofore Paid.  Those Heretofore Paid.  Those Heretofore Paid.  Those Heretofore Paid.  No. 997  OW'S PENSIO.  Frances B. Those Points of Paid.  Or Service M. Those Points of Programme of Prog
Mose Heretofore F  1899.  NO. 997  NO. 997  NO. 997  Transación 15th paint of paint
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NO. NO. SELECTION NO. NO. NO. SELECTION NO. NO. NO. NO. NO. NO. NO. NO. NO. N
For Those Heretofore Paid.  1899.  No. 997  No. 997  No. 997  Enryear ending February 15th, 1899  Anovo of farmers, 6, 7 Hoof, 1899  Idow of farmers, M. 7 Hoof, 1899  RICHARD JOHNSON, Commissioner of 18, 1899  WARRANT ISSUED  AND HANDED TO  AND H
TSBB.  NO. 997  MIDOW'S PENSION, For year ending February 13th, 1899.  No. 997  No.

I,	Finney	& thanken	hereby autho
m	1. Wrigh	of abend	wortlanta bar
16,6	ani 6	and at banto	nd request that he remit sam
In With	Whereof,	I have hereunto set my l	hand and seal, this
0			manager and a second se



STATE	OF	GEORG	ЗΙΑ,
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Personally Comes Mrs.

County of cherekee

186 \_\_ and served in the Army up to\_

Frances & Thankon

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.

185 4 That she is the Widow of

who was a soldier in Company

James, M. Thackor who of the 28" Regiment of La

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

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

- Sion a prisoner of mar me 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that s ie 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 Chorofice County for the year ending February 15th, 1898, and now apply for the pension provided by law for the year ending February 15th, 1899

A 6.6 2227 Ordinary.

Sworn to and subscribed before me, this have been subscribed before me, this day of fung 1899.

1 & 6.602200

State of Georgia, chonokos

County. Ordinary of said County, certify that I am well acquainted

with Mrs. Frances & Thankon fied 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

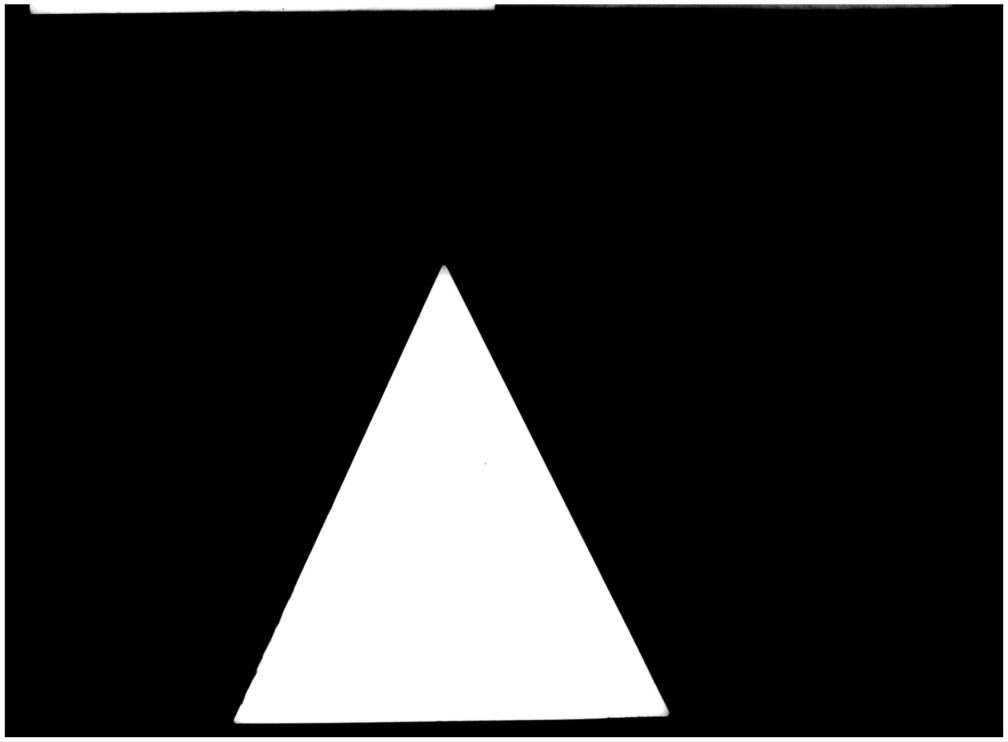
Given under my official signature and seal this the /2 day of Juny 1899.

2.6.602222

(Official) Seal. Ordinary of Chonethoe County

7	
	STATE OF GEORGIA,
	STATE OF GLORGIA,
	County of Cheroles

County of Deep	MOMIN	errica fragili 🖟	January.	W. W214	- area-
who, be	ing sworn says	on oath, that	she is a bona ti	de resident of	said County of
Cherohe	دs	tate of Geo	rgia, and that s	he has RESIDE	o in said State
ontinuously ever since	M. Thoo	Rom.	wbc	was a soldie	r in Company
# Miles de	<u>π</u>	1987	Pariment		in Company
	The state of the s				
Volunteers, that he enlisted			5		
86/, and served in the	Manager Co.				That he lost his
ife on the					
particulars of the husband's d	eath, when, where	and from wi	at cause.)		V
Said OVe	sband 6	hied.	a Prises	us by	van
m 181	C# -				
A		11 <b>6</b> account			
		obsesse	Brown tomorrows and transcript		
Marchanda and Company of the Company	beautiful and the second	ndicional results in the	nontaines minto o desidiferent co-		(m):
etentenenistes universitation i de recursive differentiere production de la company	rescuis different annimitation si	-	e-manusconido rejone rema	annes est defer er reger resemble re	
ear ending December 31, December 31, 1908.  Sworn to and sulthis day of	oscribed before	me, 908-			
2. 6. 600	, Ordin	ary.   I	Post-Office		* 32 1
State of Georgia,		1	1, A. 6	Com	۷
Cherche	Cour	nty. Or	dinary of said C	County, certifiy	that I am well
equainted with Mrs					
m satisfied that the facts t					
					•
nerself to be, and that she		resided in	this State since	the	
lay of		144		, 12 (x).	hart training
Given under my offici	al signature and	seal, this th	ede	y of fany	1908.
	(-)		2.6.60		
Official   Seal.	· ·		ot chand		
		Ordinary	ot Calno	200	County.



STATE OF GEORGIA,

	1 sans. 4
	That I,
-COUNTY.	these Presents, 7
	à
	I Men
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	Know

me and m 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 alidavit; 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 far the reason aforetaid.

IN WITNESS WHEREOF, I have bereunto set my hand and seal, this Massalled M. my true and lawful attorney in fact, for 

X The Matrix

Whatx

2681

Executed in the presence of us:

blick or dras Canlei Geson, and oblige

DIRECTIONS

Mai & Thankson

893.

for year ending February 15th, 1893,

Mrs. Delie A. Phasketon

1893

AND HANDED TO

STATE OF GEORGIA,	ng dip hit, may h	D'a staithta)
C		
Know all Men by these Presents	of Canton & C.	onword
County, in said State, do hereby appoint Man	lliam H. Hamisens	1277.0
of With of Allenta Fretton les	musty for my true and	lawful attorney in fact, for
me and in my name, to receive and receipt for State of Georgia as a widow of a Confederate & izing my said Attorney to receipt in my name for any sum of money which may be coming t IN WITNESS WHEREOF, I have her	for any Warrant that may be	issued by the Governor, or
day of January 1895	Collin Ax 9	L. s.]
Executed in the presence of us:	marie	
ON Pulsans		
Allan, b, bonn, ordan	ear	
	IRECTIONS.	
If allowed, send amount by Bans	Il Check or dra	11- 10
me at banty banton Cos	and oblige	
80	believ & Theo	1.

#### Affidavit to be Made by the Widow.

: -46.20 SSS		
Form	No.	1

STATE OF GEORGIA. In person came before me, the undersigned Ordinary	
COUNTY OF Change in and for the County of	
Mrs. Delie A Phackston , who being sworn according to law, says under	
oath that she is the widow of Newbort to Phaskestone, who was a soldier in	
revice of the Confederate States, and served as a member of Company of the  Ste'' Regiment of Sterries Volunteers; that he enlisted in said the on or about the forcest day of Sterries 1862, and was in the  Longelisate Army up to Securities 1865. That while in the ty, he was on the day of December 1865., (See Note No. 1)  The bira house on Each Leone of abounce found the common what	
Regiment of Assergia Volunteers; that he enlisted in said	
service on or about the forcet day of April 1862, and was in the	
Confederate Army up to December 1865. That while in the	
Army, he was on the day of December 1865, (See Note No. 1)	
Sent to his home in sich leave of absence forms the comprehier	
was near Dallon Han he reached his hime Side Quith Dicione	
start the Last of December 1818 and died at his home in Chande	
Course from said diseased in this " day of passon any 1864 had	
not been so home lout a here done when he died from bois	
diseased her Early be notrand was a health Steast must when	
be continued the comme in 1862 The is satisfied that he	
Embracted the disease form which he died while in boat	
a prairie	
4	
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	
day of fame 186, and that she has resided in Georgia continuously since the	
day of October 1842; 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, 1893, and herewith tenders the proof of her right to receive the allowance granted by said Act.	
Allen & Come 1895 \ morrow le anten loher stee les in	
Ordinary.	

#### Affidavit for Three Witnesses.

State of Georgia,	In person came before me, the undersigned Ordinary
County of Churches	in and for said County, witnesses
Lastin Phacher . lo	A Cowell
and Allan lo bonni	(each known to said Attesting Officer as truthful,
	ay under oath, that, FROM THEIR OWN PERSONAL KNOWL-
EDGE, Mrs. Cela A. Thackedon	, of the County of Lohardicen
State of Georgia, is the widow of Nerolan	The Thestator , who was a soldier in
	Regiment of George Volunteers.

That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or day of Special 1862e That while in said service, or by reason of said service in the Army, he lost his life as follows: That Said Saldrey was switter dipresente in lambour to of the ste Rement of Georgia Deliverations. Income the chamit of April 1012 rate to about The 15 cr 20 5 December 1868. That Baich Soldier was Best To Lin hand solo brom the armon wear Dallow la to lehender Line in the hand treen server a believe and with a sixteen died to stated to Naplicani.

Our opportunity for knowing the facts stated in reference to death of applicant's husband were della i inche della co inche in in illatte inchine laccor inil male describer The while in soldier dead in his name in land de L' desir " ... ... Barne . Now repossible I to commande and a' 1/10-12266

We further swear that Mrs. Lilion 7. Charactering soldier during the service, and that she has not intermarried since his death, and that she resides in le huroice County of the State of Georgia.

Sworn to and subscribed before me, this, the day of January 1895 A Sewill Allen 6. Com Ordinary.

NOTE. Witnesses must not testify about things they may believe, but confine their statements to such facts as they per-

2. If the husband died after the war of wounds or disease, state fully and particually how you, as witnesses, know the service as

POWER OF ATTORNEY.

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

State of Georgia,

West to formand up of china

County of Chambles in and for said County of Schambles State of Georgia, hereby certify that I am acquainted with Mrs. Delica A Phaeleston

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, 1800, 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

SOE	day of Jananana 1895.
SEAL	Allent, b. Com 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 seen heard from since the war.

Those whose husbands were wounded in the army and have since died from the direct effects

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

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 of their County and testify. The attestation of a Justice of the Peace or Notary will not answer, in any case.

If proofs must be made out of the State, the witnesses must be sworn before a Judge of a Court of Record under Seal, and the witnesses must be certified to as reliable, and that their signatures are genuine.

Fill out Pawer 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

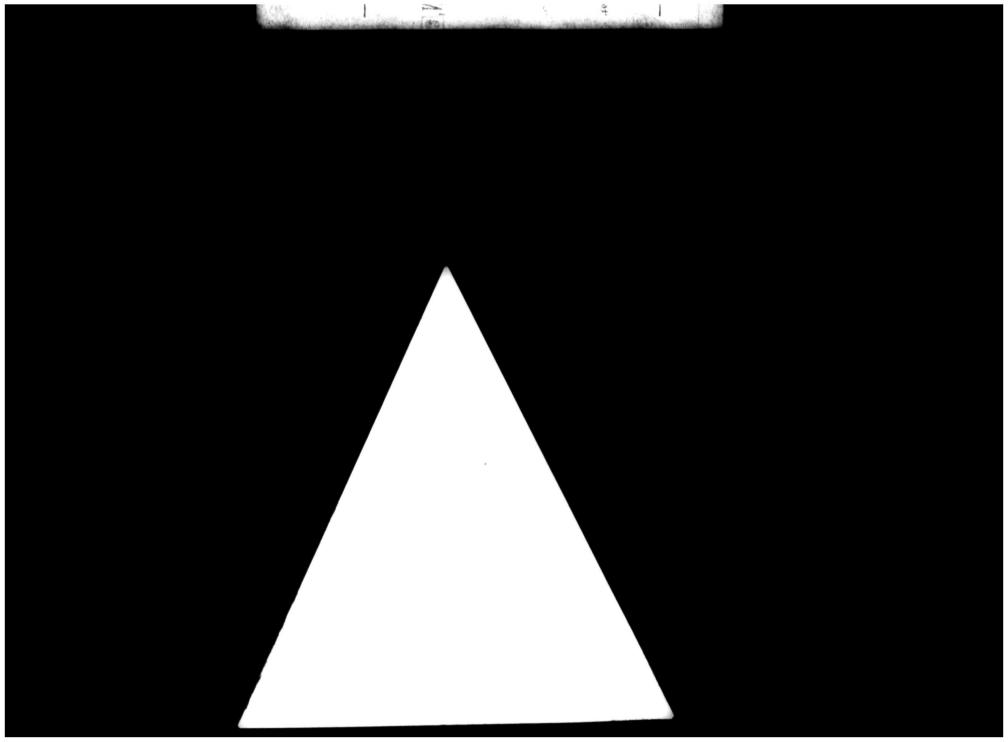
W. H. HARRISON,

Sec. Ex. Department.

	STATE OF UESKUIA, COURTS OF
STATE OF GEORGIA,	Dersonally comes Mrs
County of bheacher	bolis, A. Than Holon
who being sworn, says on oath, that she is	s a bona fide resident of said County of
bhomekse State of	f Georgia, and that she has resided in said Stat
continuously ever since The goad	18#2 That she is the Widow
Qr. b. Thanks lon	who was a Soldier in Compan
& of the Jat	Regiment of Linguis
Volunteers, that he enlisted in said Regin	ment on or about the month of Aprile
1862 and served in the Army up to	is64. That he lost hi
	of fammany 1864 (State her
full particulars of the husband's death, w	hen, where and from what cause.) (
Soid New band was Gent	home from dallar lesongia on.
Wick fundow and died in	o bent twenty days after he
pat home died with non	
V Sample Market	

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 184/; 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, 1893, and now apply for the allowance provided by law for the year ending February 15th, 1894.

d. b. borred C Ordinary. -)



Throckston C. D.	のの対象が
Cheroker	
1 July 1909	をかかった
INDIGENT PENSION.	1000
190	经生" 二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十
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Co. D 5-6 Gr. Regt.	
Approved 190	
JOHN W. LINDSEY, Commissioner of Pensions.	
WARRANT HANDED TO	1 May 264-46 1 187
Ordinary will write name of Applicant, Company and Regiment on back as indicated above.  Geo. W. Harrison, State Printer, Atlants, On.	16244 - 144
9/21/08	200

Executed h							STATE OF GEORGIA	
Executed in presence of							GEORGIA,	TECHOOL
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#### POWER OF ATTORNEY.

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ive and receipt for the pension allowed	and request that he remit same to.	TANK
AL	by	
Witness my hand and seal, this	day of	The state of the s

PENSION

906

# STATE OF GEORGIA. How long and since when have you been a resident of this State? When and where were you born? Down 1914 1814 345 4 40, 4 When and where and in what company and regiment did you sallat or serve! 6. How long did you remain in such company and regiment! Writtill Bec. 15-1864, When and where was your company and segment surrendered and discharged? Afril. 7. Were you present with your company and regiment when it was surrendered? 8. If not present, state specifically and clearly where you were, when you left your command, for what tause and by whose authority? 9. How much can you seen (gross) per annum by your own exertions or labot? 10. What has been your occupation since 1865? 11. Upon which of the following grounds do you base your application for phiston, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty." 12. If upon the first ground, state how long you have been in such condition that you could not seen your set To you the new ground, give a full and complete history of the infirmity and it, extent. If upon the second, give a full and complete history of the infirmity and it, extent. If upon the pinit itself whether you are totally blind and when and where you lost your as a local from the pinit itself whether you are totally blind and when and where you lost your as a local from the pinit itself the p 13. What property, real and personal, or income, do you possess, and its grow value! Assemble 14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift, have you made of same! Assemble or here to be a diction of the property did you then return for taxation? In Chartelle, desirable and only of personal property. 16. How were you supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? The first thing of the formal Children of the search of these years, and what portion did you contribute thereto by your own labor or income? own labor or income. 18. What was your employment during 1901, 1902, 1903, 1904, 1905, 1906 and 1907? What pay did you receive in each year? 19. Have you a family? If so, who compose such family? Give their means of support. Have they a home, stead, or other property? Their ages and how supplyed? 21. Have you ever made an application for pension before? 22. Here many applications have you ever made and under what class?

QUESTIONS FOR APPLICANT

AUSTOAVI	T OF PHYSICIANS
ATE OF OBORGIA.	
OF THE STATE OF	1
	C E SHITLING
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ale County when being everyally evers, as	on outh that they have examined enveloping Chestles
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percual committation on that his precise	physical condition to follows: Dipyrloga
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l that we have no interest in mid pension be	ing allowed. 6.8 white e mo
Sworn to and superibed before me, this	<b>热量、发表的激化激素的影响 医海风氏病 法国际企业股票 吗?</b> 2020年中的,这是中的
They of Market 100	I Yest Bring ma
Manos	Ordinary.
OPDINA	Y'S CERTIFICATE
The state of the s	13.000
TATE OF GEORGIA,	
Com	
t the applicant do Dan	Ordinary, in and for said County, hereby certify
m a bone fide resident of this State since the	Williams & Fm
Blackwell	
of trustworthy character, and that their ste	tements are entitled to full faith and credit,
· · · · · · · · · · · · · · · · · · ·	the foregoing questions the applicant and each witness took the oath
	affidavite was read to the applicant and witness before same was signed.
	County shows that applicant
urned for tauntion in his name in 1901	
perty, and in 1902.	Dollars of property; in 1908  Dollars of property; in 1904
9 147	Dollars of property; in 1904
1346	Dellare of property; in 1906
9.309	Dollars of property; in 1907
\$ 341.	Dollars of property.
In my opinion the foregoing claim is	made in good faith.
Witness my hand and west of office, thi	· · · · · · · · · · · · · · · · · · ·
	Ordinary. On Older Hill County.
	of County.
). Before any questions are several to	or Ordinary shall aware applicant, and the witnesses in the following

ed, the Ordinary shall swear applicant, and the witnesses in the follow each of the quantum saled of you, and the critismo you shall give will

it. It every case the Ordinary must cartify to the character of the witness, and as to the execution of the proof above set out.

STATE OF GEORGIA- CHEROKEE COUNTY.

In the matter of C.D.Thackston, Application for Pension.

Personally came before, me the undersigned, R.E.Fitzgerald,

who after being duly sworn says on oath that the property which

the said Thackston has been returning for taxes consists of two

mules principally, and that the title to said mules are in him,

(Deponent) and that Thackston has never owned said mules, but that he has been controling them and working them on Deponents

more than \$125.00 worth of personal property, and deponent futher sayd that the said Thackston is unable to earn a support

farm and paying tax on the thathe, deponent, is the real owner of said mules.

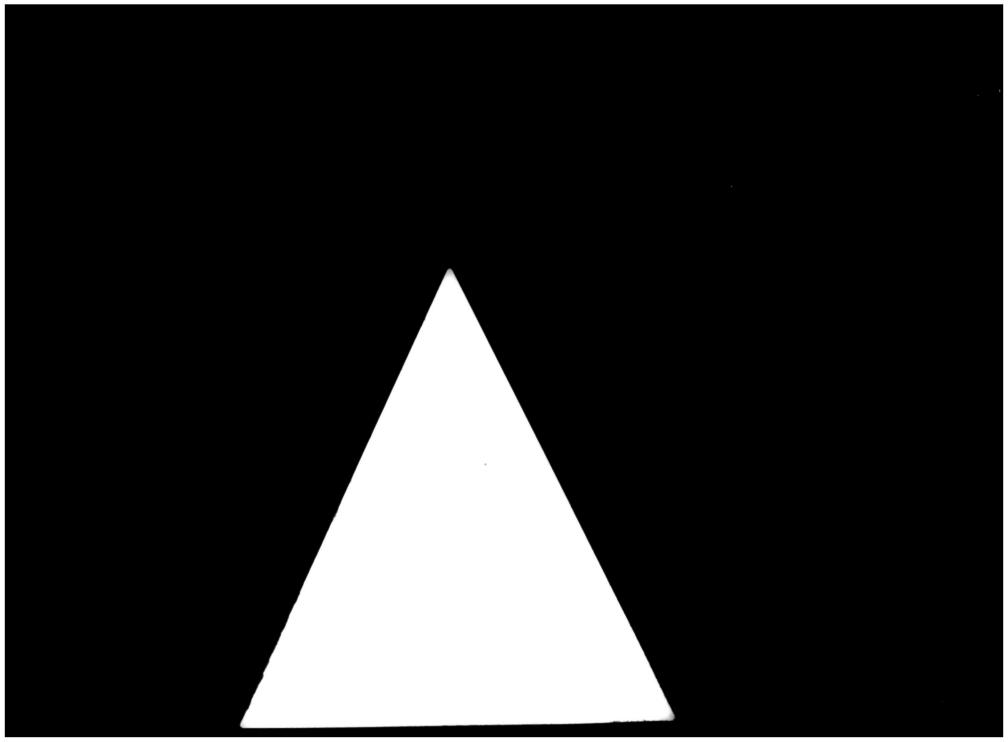
Deponent futher says that the said Thackston does not pwn

by doing manual labor, and that he has no means of support.

R. E. Hilzgeraed

before me this Sept. 10th.1908.

Sworn to and subscribed,



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

STATE OF GEORGIA, County of

### For Widows' Heretofore Allowed Pensions.

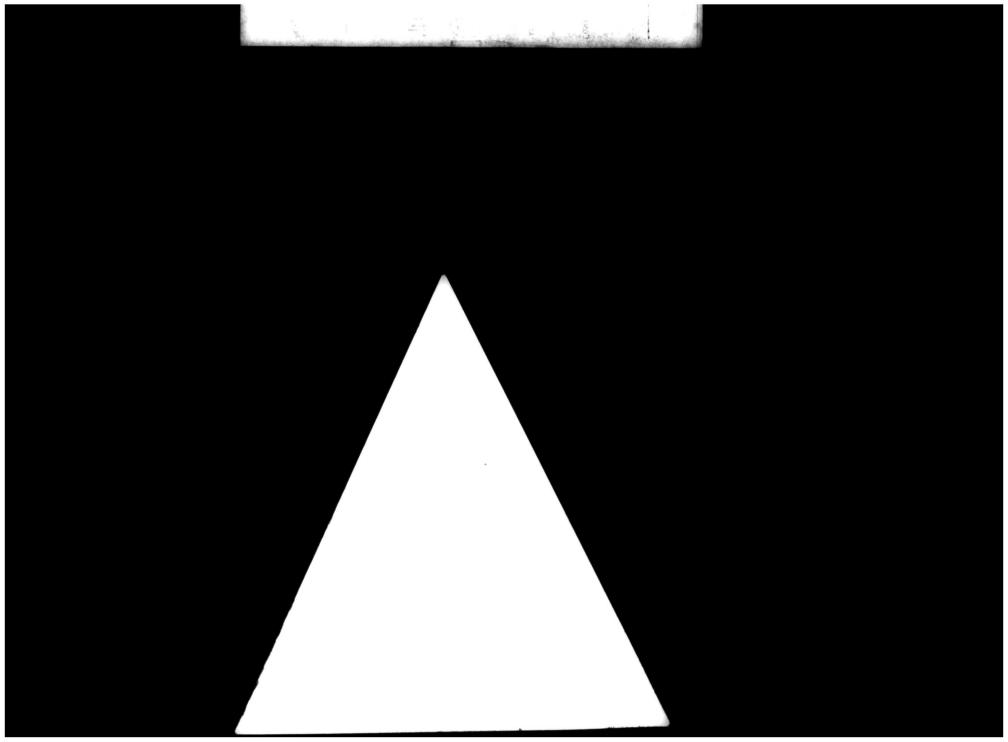
STATE OF GEORGIA	1, 180	Personally comes Mrs.
County of Cheroper	a D Fars of	abeth W Thomas
who being sworn, says on oath, that	she is a bona nide resident	or said Contith or
Cherse	State of Georgia, and that s	the has resided in said State
continuously ever since	18.38	That she is the Widow of
for Thomas	who	was a Soldier in Company
of the J6	Regiment of	Long to
Volunteers, that he enlisted in said Reg	riment on or about the month	of June
186 2 and served in the Army up to	2 Kember	186 That he lost his
life on the 23	day of /way	1863 (State here
full particulars of the husband's death,	when, where and from wha	(cause.)
Came home in Toraget	to County Garfer	the army on
& furlangh in No	1. 1862. afft	isted with
Chronic Kianho	ea and Spina	affection.
From which dise	are he died	On may 230
1863 Ut his home	in forsyth	Centy Georgia
Ne Tierer being ab	ce to return	to the sery
•		

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 1852.: 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 Hehruary 15th, 1892, and now apply for the allowance provided by law for the year ending February 15th, 1893.

Sworp to and subscribed before me, this

24 day of Chirocong' 1893. Eliza es bette A Manney.

Post-office Ballynous Jac.



10 July 2008	u ∠. Le			
INDIGENT PENSION			Section 16	
Name J. M. Thomas County Chewitee Co. O. 11- Ger Roll		201	OWER OF A	
JOHN W. LINDSBY, Ommissions of Presions.			VELORINEA VELORI	
WARRANT HANDED TO  Ordinary will write name of Applicant, Company and Regiment or back to Indicated Spore.		may 1		
and Registrosi or heak to Indianas (Morro Con V. Merrison, data Printer, Allanti, da.				

#### POWER OF ATTORNEY

STATE OF GEORGIA Cherofter COUNTY. momas on allowed and request that he remit same to\_\_\_ 20" Witness my hand and seal, this\_\_\_ Executed in presence of

# PRISI

# (0)(125)(1(0))(5)(1(0))(1(1))( STATE OF GEORGIA. 2. How long and since when have you been a resident of this State? When and where ever you born? There or Course to North Correlation, 1836. When and where and in what commany and resimpate did you white or move? Jersey 1866, Managameters, 5. How long did you remain in such company and regiment! About four years 6. When and where was your company and regiment surrendered and discharged! Best endered 7. Were you present with your company and regiment when it was surrendered? 8. If not present, state specifically and clearly where you were, when you left your promised, for what cause and by whose authority? age + Poverty second, "infirmity and poverty," or third, "blindness and poverty?" 12. If upon the first ground, state how long you have been in such condition that you could not earn four support. If upon the second, give a full and complete history of the infirmity and its extent. Iff upon the third,

47-64			ASI 150 x 13	100	Table 1 Car	
18. What		and removal .	or income, do vo	nowees, and its	gross value	and 1907, and what
bene	- Land	64-2	STATISTICS OF THE	10000 400		
A What	DESIDENT TO	or personal, did	you possess in 1	901, 1902, 1908,	1904, 1905, 1906	and 1907, and what

Comall and went of personal property

15. In whee County did you reside during those years, and what property did you then return for taxation?

How were you supported during the years 1901, 1902, 1903, 1904, 1905, 1908 and 1907.

How with did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income?

18. What was your amployment during 1801, 1802, 1908, 1904, 1908, 1906 and 1807? What pay did you receive in each year?

19. Have you a family? If so, was composee such family? Give their means of support. Have they a home clead, or other property? Their ages and how employed?

20. Are you receiving any pension? If so, what amount and for what disability? 215.

21. Have you ever made an application for pension before!

22. How many applications have you ever made and under what class!

from to and subscribed before see this the 1000 1000 1000 1000

ARRI	DAVET O	OF PH	VSICI	INS.
UNCLA			100	

1 10 8	Contract with
O W R THE THE	and the second second
	both known to me as reputable physicians
	they have examined carefully
applies	ant for pension under Section 1254, Code, and after
We find applicant for	ffing from a lime
that recount in left a	with our adulated
	in the limit to
and for a would no	uged in way the obest
nd that we have no interest in mid peneton being allowed,	alay make a deany
Sworn to and subscribed before me, this the	- 20th 9 B Prenowell
1 1 12 - [ 190/ ]	S. W. Batu mid
Ord	inary.
ORDINARY'S CE	RTIFICATE.
STATE OF GEORGIA,	
Cherles Courty	
W W L	
but the mallows & MC. Thomas	Ordinary, in and for said County, hereby certify
but the applicant	day of 186
	Regell W.L.
IM. But M. V. Y	J. a Newwar
re of instructery character, and that their statements are en	title to full fulls and credit.
I further certify that before anywaring the foregoing	questions the applicant and each witness took the oath
ereou prescribed, and that the full text of the affidavits was re	THE RESIDENCE OF THE PROPERTY
I further certify that the tax digust of	County shows that applicant
starmed for faxation in his name in 1901	Dollars of
property, and in 1908	Dollars of property; in 1903
31.10	Dollars of property ; in 1904  Dollars of property ; in 1908
7 64	Dollars of property; in 1906
977	Dollars of property; in 1997
7 465	Dollars of property
In my opinion the foregoing claim is	made in good faith.
Witness my hand and seal of office, this	play of 190 7
	Ordinary.
	of Country.
A Subject to consider the format the College of	all swear applicant, and the witnesses in the following

and the state of the second second

A. In order the Collinsty Must earlify to the character of the witness, and as to the secontion of the p is above tel oils. GEORGIA . Lehe man hammi Thomas the applicant, and county for 19/2, and at the time month 1965 there was due to Dollars from the State J. A. Henson Given under my hand and seal this day of the County. witness, and he is of a truthful and trustworthy character and entitled to full credit.

GEORGIA.

County.

I hereby authorise and constitute

I hereby authorise and constitute

Of said county, my
lawful attorney to collect and receipt for me in my name the Pension due me for 19..., through my deceased husband.

Pension Roll and paid from

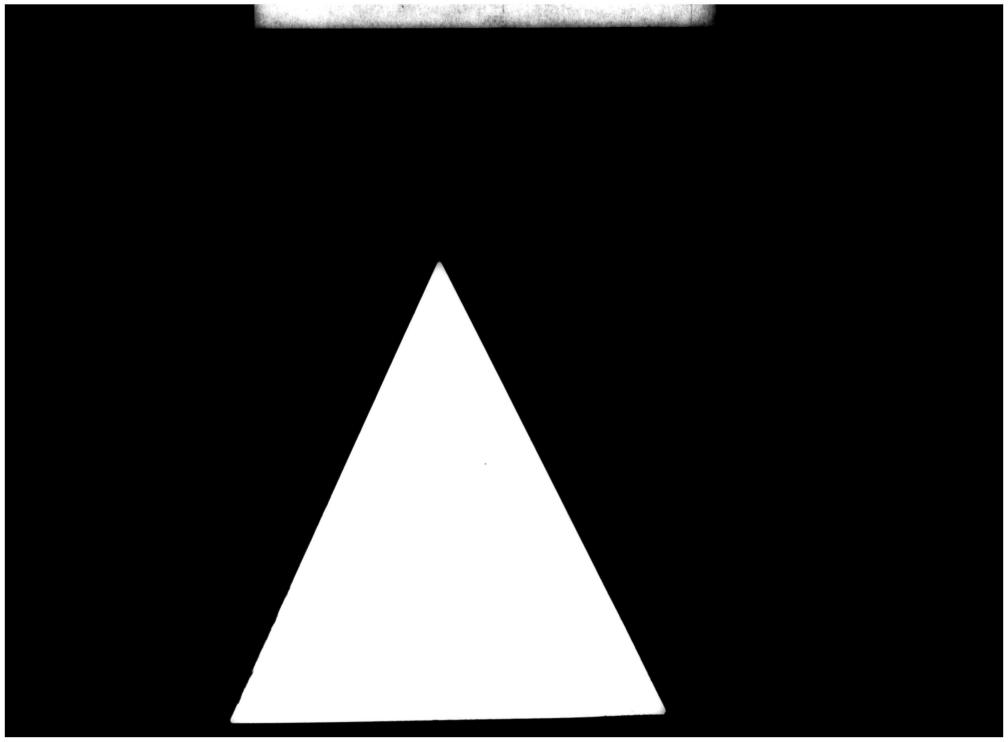
Witness my hand this.

Attested before me:

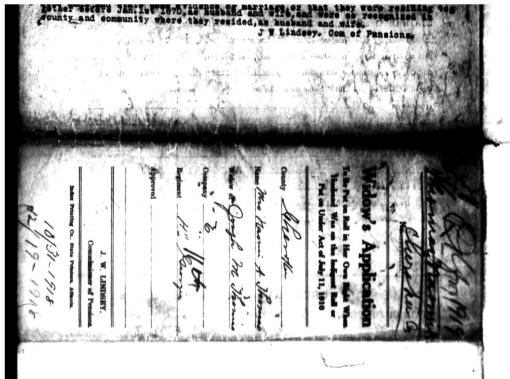
# Application for Pension Due Deceased Soldier To be paid to the video or dependent delition. UNDER ACT APPROVED OCTOBER 9, 1861

STATE OF GEORGIA. Separation County.
Personally before me comes Mrs. Marine Thomas of said county,
after being duly sworn, on oath says that she is the widow of A. M. Therman
1 21:
who was duly enrolled as a Pensioner from the county of Pensioner from the county
bla d
O by Thomas life to
7/
the 20 day of march 19/8, and at the time of his death a Pension of health and when the second was the second with the second was and when the second was a second with the second was a second was a second with the secon
was due from from
Applicant further swears that she married the said M. Jhomos on
the 15 day of Aug: 1844, in Union county and
State of Seorgia and resided with him from the date of marriage to his Jeath
as his lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be paid
to her.
Sworn to and subscribed before me this 30 day of 2122-5 19/8
loherothe County.
AFFIDAVIT OF WITNESS.
GEORGIA. Le harothe County.
Personally before me comes A. Henson , who
on oath says that he knew
and that he knows his wife Mrs Mrs Momis Thomas
the above applicant; that he knows that the said.
2. 4
and the transfer of law married in the county
and Mrs Married in the county were in due form of law married in the county
ofon
ofin the State ofon  theday of18, and that they resided together  since & have there of20 pro or area.
ofin the State ofon  theday of18., and that they resided together  as husband and wife from date of marriage to the day of his death on theday
of
ofin the State ofon  theday of18., and that they resided together  as husband and wife from date of marriage to the day of his death on theday

Nove 1st.—This form can be used by guardian or minor children where there is no widow.
26—Ordinary must send in all cases certified copy of marriage license attached.



To Be Put in Roll in Her Over Main When Plathand Who on the Indigent Roll or Put on Under Act of July 11, 1910 J. W. LINDSBY, Commissioner of Pensions.



### WIDOW'S AFFIDAVIT

STATE OF GEORGIA, Lehandle County
Personally before me comes Marine A. Thomas of said County,
who, after being duly sworn, on oath says, that she is the widow of Joseph M. Thomas to whom
in the County of State of State of she was married on the
day of Argi 1864, and that she remained his wife, and resided with him to the date of his death
in Pro- 19/5 and that she has not since his death remarried. At the time of his death
he was a resident of County, in said State of Georgia, and he
was on the Pension Roll of the State and paid a pension of & Go
in County for 1917 per annum, on account of being a soldier in Company
Regiment // Sq. (Volunteers of State Militia)
wohntend 1861
At the death of Jones he was in the use and possession of the following
property Front
of the cash value of \$
What property of any kind and of any value have you in your use, control and possession now, and
the cash value, (State fully and where situated.)
Acres land
Horses and Mules.
Hogs, Cows, etc.
Total Cash value of all property
That she is now a bona fide resident citizen of said County ofand she
has so continuously resided since day of 19
Sworn to and subscribed before me, this the Harmi A Thomas
23" day of Aug 1916
On Southing
of Scheroth County.
of County.
Affidavit of Witnesses to Prove Marriage and to Whom
Date of Death of Husband
STATE OF GEORGIA, Shorth COUNTY
Personally before me come W. F. Poweler & g P Spears known to be responsible
and truthful persons, residing in said County, who after having duly sworn on oath, say: that of their
own personal knowledge Mrs. As who made the foregoing affidavit, is
the lawful widow of Joseph we Thomas who died in Sharth County in
said State of 20" day of 20", and that she
has not since remarried. That she became the wife of the form the land of the day of the land that she and he had resided together as man and wife continuously since
of 18, and that she and he had resided together as man and wife continuously since
day of 18 , and that the was the
same man who was on the pension roll of said State State from Charles County
when he died.
Sworn to and subscribed before me, this the
24" day of Oct: 1918
day of got 1918 A. D. Stpeans

Personally before me comes (N 1-Ponder & 9Pg who after being sworn on oath says, that they are fresholders of said County, and that they know the of the value of Sworn to and subscribed before me, this the ORDINARY'S CERTIFICATE STATE OF GEORGIA. "Ordinary of said County, do certify, that, I A Please the applicant for this pension and that she is the person she represents herself to be, and that she is a bona fide continuing addent of said County and was on the 20" mak 1918 That I also know ON I Pouch to OP office witness as to marriage and I also know W 7 Poul al O Thom who I know to be a resident freeholder of said County that all of the foregoing were duly sworn by me before signing the respective affidavits and that they are truthful and trustworthy and their statements are entitled to full faith and credit. That the tax Books of Chath County shows that Dh returned property to the amount of \$ \_\_\_\_\_ for 1908, \$ \_\_\_\_\_ for 1909, \$ \_\_\_\_\_ for 1910, \$ \_\_\_\_\_ for 1911, \$ \_\_\_\_\_ for 1912, \$ \_\_\_\_\_ for 1913, \$ \_\_\_\_\_ for 1914, \$ \_\_\_\_\_ for 1915, \$ \_\_\_\_\_ for 1916, \$ \_\_\_\_\_ for 1917, s \_\_\_\_\_ for 1918. Sworn under my hand and official seal of office this. (SEAL.)

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 saked you and the evidence you shall give will be the truth. Be 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

Georgia Cherokee County.

Personally appeared before me an officer authorized by law to administer oaths, A.B.Coggins and W.J.Webb, who after being duly sworn, deposes and say that they knew Joseph M. Thomas, also know Mrs Naomi A Thomas his widow, have known them since 1900, they moved to Cherokee County in the year 1900, and were living together as man and wife, and lived together as man and wife untill Joseph M Thomas death on the 20"day of March 1918.

A B Long worn to and subscribed before me this 24"day of Oct. 1918.

Ordinary Cherokee County.

Georgia Bartow County.

resonally appeared before me an officer authorized by law, to administer oaths, Caroline Calaway, who after being duly sworn deposes, and says, that she knew J.M. Thomas in his life, also knew, his wife before her marriage to the said J.M. Thomas, and that said J.M. Thomas and Naomi Hayes were married before Jan. 1, 1870, and lived together as man and wife until the said J.M. Thomas death, March 20"1918.

Around A Subsentia

Sw Hundred Orly Barlow county Car

I here by certify that I know the affiant, Caroline Calaway, and know her to be af good character, and worthy of belief.

H K Calaway Sheriff of Bartow County.



#### COURT OF ORDINARY

BARTOW COUNTY

Cartersville, Ga., M. 191

Severio Dorim audy of Borton Comb Gogist de house Control of Maing of Borton Comb Gogist de house of the Mo. Borelie Bolaway who appears so a cirtures for Mo parmi Themas in her opplication for a fusing is a prome of trust worthy Character whose obstrants are worth of be lied and arbit so be wracing or oddring - Whereos my official defendant Caucht of the Court of Driving of Boland Caucht God of the Court of Driving of Boland Caucht God on two Caucht of the sound of the court of th

J. M. SATTERFIELD, ORDINARY EX-OFFICIO CLERK COURT ORDINARY

#### OFFICE OF

#### ORDINARY CHEROKEE COUNTY

CANTON. GEORGIA Dee.18"1918.

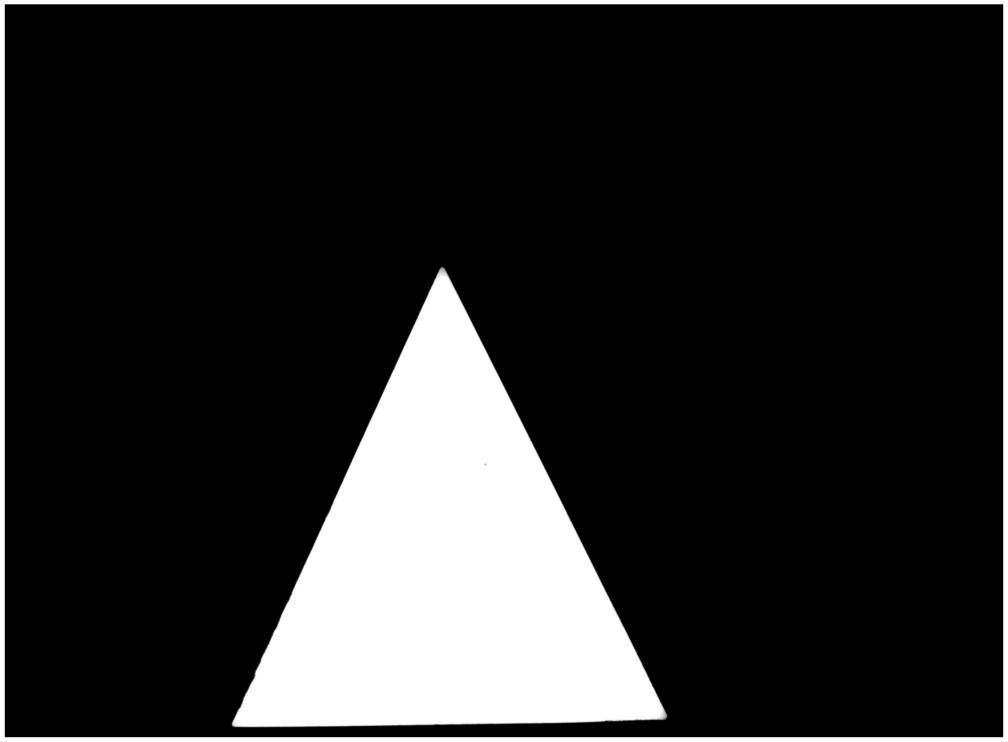
Hen. J. W. Lindsey.

Atlanta Ga.

Dear Sir. I am sending Mrs Naomi A Thomas application to you for this reason. you state that it should be amended. I mailed to you several days age an affidavit from Mrs Calaway of Cartersville Ga sworn to before Judge Hendrix in which she made affidavit that she knew Joseph M Thomas also knew his wife Naomi A Thomas, also swore that they were married before Jan.1st.1870 and that they lived together as man and wife until Joseph M Thomas death, which occurred on March 20"1918.I also mailed you with this certificates from the Sheriff, and Ordinary, of Bartew County stating this party making the affidavit was known by them, and that she was a person worthy of belief. you have this affidavit with these certificates in your office.

I now ask that this application be amended. I would have sent the application to you sooner but only received this A.M. you had mailed it to Rome Ga. and Judge Johnson forwarded the same to me trusting you will find the affidavit and can allow this worthy woman her pension.

very Truly, matterfield



May 30 Application for Expenses of Last TO PAY-**Illness and Funeral** 1930. (UNDER ACT OF 1919) Cig. & C. Tax. \$ 90. Por: Name of Punion WIAL. PAID TO ORDINARY ON THIS CLAIM: 11.45 CAC 12 15 1920 TOTAL. Approved, and ordered paid,

Roswell, Galecty 2 1934

M. Co. Marine & D. Debrus

Macoust with

ROSWELL STORE

All accounts due and payable, 30 days.

Casalité Box

Henre pervie /65.0

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/000

France
/1177.14

Carre Stan Stand Conty Chay the stand of This Madrin Dolomes Care Stands of The Brend Care Stands of The Brend Care and Delever.

Mitoursel Thin July 3rd 1954

#### Application for Payment of Expenses of Last Illness and Funeral

(Under Act of 1919)

(To be disbursed by the Ordinary)

GEORGIA, County:
Before me, the Ordinary of said County, comes  O. M. Harry of said County, who, after being duly sworn, on oath sa that he knew Naorui of Said County, a Confe
erate pensioner, and that said person is the identical person named and described in the attach
certified copy of burial certificate; and that said pensioner LEFT NO WIDOW and NO ESTATE
ANY KIND OR VALUE sufficient to pay the expenses of last illness and funeral, which amount to the sum of \$ 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
ITEMIZED, hereto attached.
Sworn to and subscribed before me, this the day of July, 193 4  Jawa Manuag, Ordinary.
CERTIFICATE OF THE ORDINARY
GEORGIA, County.  I certify that A Q, M, Howard who subscit
to the foregoing affidavit is known to me to be a person whose statement is entitled to full faith a
credit. I further certify that I knew Sauce J. Thousand the decean
pensioner referred to in the foregoing affidavit and that said deceased was at the time of de regularly enrolled as a pensioner on the records of file in my office. I further certify that said ceased pensioner is the identical person named and described in the attached certified copy of but certificate, was not survived by a widow and left no estate of any kind sufficient to pay the expen of last illness and burial for which claim is made.
Given under my hand and seal of office, this the day of Saley , 1984
(Seal of Ordinary) Satch Markey, Ordina
INSTRUCTIONS
1st. Certified copy of Burial Certificate must accompany this application.  2nd. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized fogiving each item and the value of it, and each date.

3rd. Each account must be sworn to before the Ordinary, and in the following form:

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

4th. 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 and signed as indicated.

5th. The completed voucher—this blank and the bills—must be sent to the Veterans Service Office for approval and no money must be paid out until it is returned to you as your authority to make the payment,

6th. Return this application, and attached bills, properly receipted, to the Veterans Service Office.

7th. Ordinary should see that the back of this blank, when folded, is filled out.

8th. This voucher, if approved, will be sent back to you with the funds with which to pay the approved bills. When you have paid the bills and obtained a receipt for each payment, return the voucher, with bills and receipts, to be permanently filed in the Veterans Service Office.

9th. The State does not authorize the payment of these expenses in the event a soldier pensioner is survived by a widew, nor if the pensioner left any estate of any kind or value sufficient to pay them, nor if the pensioner had been outside of the State of Georgia for more than twelve (12) months immediately preceding date of death.

Als. Nami ROSWELL STORE

All accounts due and payable, 30 days. Casket Box Here peroce

CANTON, GA., Feb. \$3383 177-14 RECEIVED OF JACOB MASSEY, ORDINARY, CHEROKEE COUNTY, GEORGIA
One Hundred & Seventy Seven & 14/100 One Hundred & Seventy Seven & 14/100 T10448888888 AND NO/100----DOLLARS Funeral Expenses 200 IN FULL SETTLEMENT OF COMMERCIALS RE 193\_

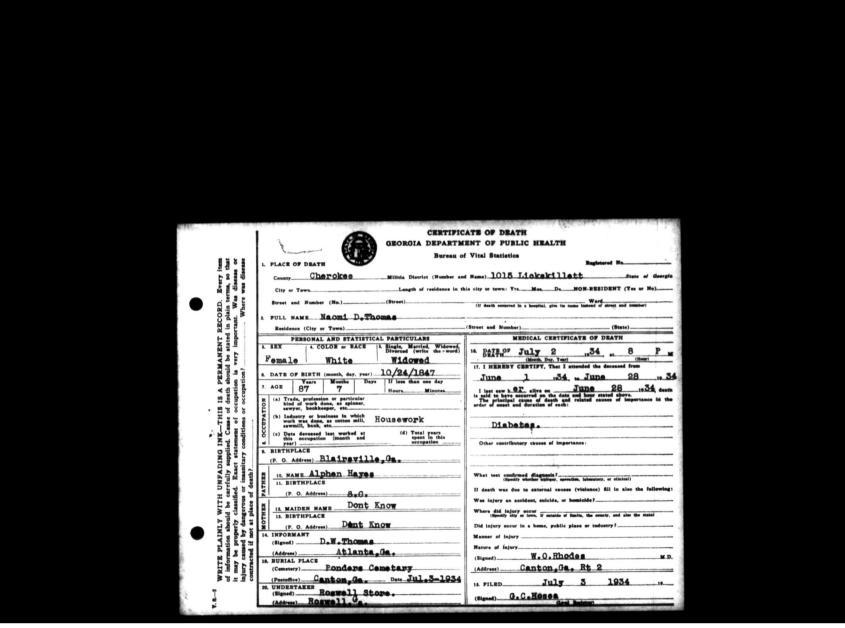
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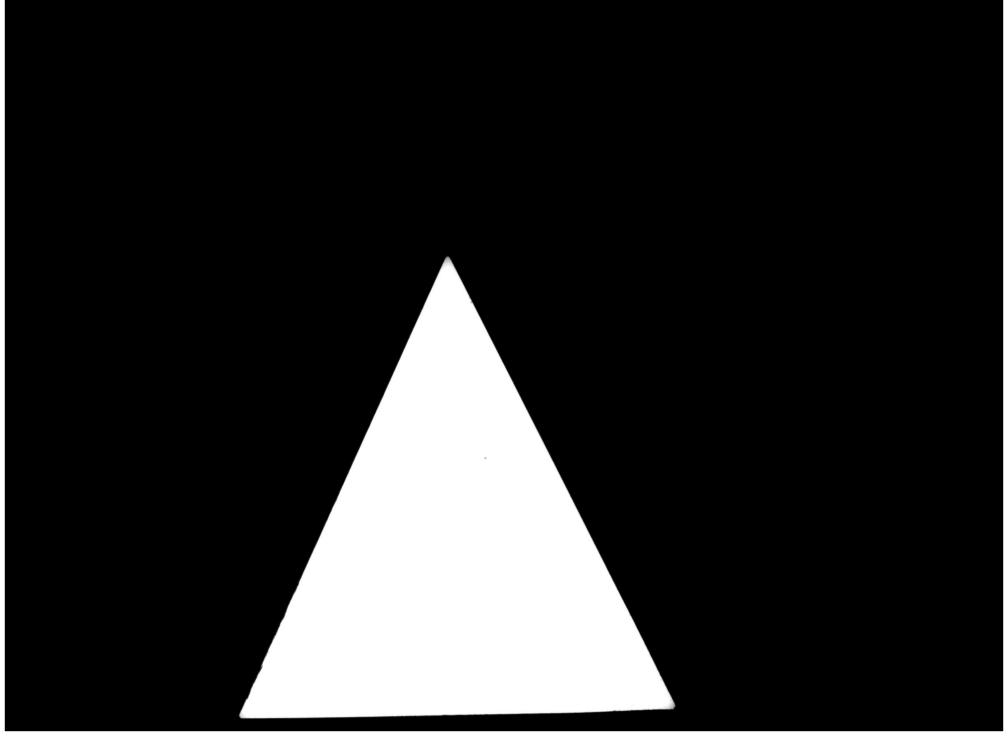
GEORGIA, CHEROKEE COUNTY.

I, Jacob Massey, Ordinary and ex-officio clerk of the court of Ordinary of said County, do hereby certify that the within and foregoing is a correct copy of the death of Naomi D. Thomas as appears of file in this office.

This 20 day of Feb. 1935.

ordinary and ex-officio 908. 0.





Ordinary in and for said County of b han of tagstate of Georgia, hereby certify that I am acquainted with Mrs. Dolle, Thanna our the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to me by reputable with the applicant for a pension in this case, and nesses), 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 Larmmonn, Thornason deceased, and as such has heretofore Chonstoe been allowed a pension for the year ending February 15th, 1854. STATE OF GEORGIA, County of J. to. born widow of

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, Kurch day of 2

D. L. Lamma Ordinary.

# POWER OF ATTORNEY.

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Lo handers	PRESENTS. That I
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ZG]	AV
GEORGIA,	MRN
OF (	A 1 1
STATE O	KNOW ALL
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Lounty. 0000 00

6

thingon 3001 84 dot10 my true and lawful attorney in fact, for me, and in my name, to receive and receipt for whatever amount of money I may it titled to from the State of Georgia as a widow of a Confederate Soldier, as stated foregoing affidwir; hereby authorizing my said Attorney to receipt in my name for Warrant that may be issued by the Governor, or for any sum of money which m coming to me for the reason aforesaid.

In WITNESS WHERROF, I have hereunto set my hand and seal, this Saured County in said State, do hereby appoint

1895. Gommo) day of

Executed in the presence of us:

Sallo of Themsome [ - .)

mark

Commondade

Lecopor PIRECTIONS.

and oblige

FOR THOSE HERETOFORE PAID.

for year ending Febuary 15th, 1895. -PAID TO-

Snow Last year from serving

widow of Spansmoon Thomason

WARRANT ISSUED

AND HANDED TO

1895.

Certificate of Ordinary of the County of Applicant's Residence

#### POWER OF ATTORNEY.

State of Georgia.  Chirokas County.  I, Nolly Thomason hereby authorize Thus A. Wright of atlanta La  to receive and receipt for the pension paid hereon and request that he remit same to
y, J. Thomason at Ball Ground San IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 2
Executed in presence of
Hebt Com



# Certificate of ordinary of the County of Applicant's Residence. For Widows' Heretofore Allowed Pensions.

STATE OF GEO	ORGIA.	of the Dersonally	Comes Mrs
County of	headkeel	Dolla Thor	nasan
		arm a world and provides	
who being sworn, says on o	ath, that she is a bona fi	de resident of said coun	ty of
Chorokod	State of Georgia,	and that she has reside	d in said Stat
continuously ever since	andrew services	18.64 That she i	s the Widow o
Sammoon	. Thomason	who was a Soldie	r in Compan
of the	2 Reg	giment of Ason pas	
Volunteers, that he enlisted			March
186 d and served in the A	my up to 50	1864	That he lost hi
	day of		
full particulars of the husbar	nd's death, when, where	and from what cause.)	(
Soid Number	d was batel	naed in les	0 1864
soid Numban	· ~ 77-~	aptic personal on the second	1
CHICK DIGO J	M JHAN H NOITH	V.ALOCTO.	N 80.0 * 158 * 18 80 * 1 * 17 * 17 * 18 18 18 18 18 18 18 18 18 18 18 18 18
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MARINE CONTRACTOR OF THE CONTR	and the second s		1 (1
No. and the state of the state	**************************************	M 8788644.2844.497 (C. 1844 - 1844 - 1844 - 1844 - 1844 - 1844 - 1844 - 1844 - 1844 - 1844 - 1844 - 1844 - 184	
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Mittelegabetas porter tradegrates discherente interes en transporte au commente que de la questión es que de la questión es partie de la questión es partie de la questión es partie de la questión de la	Hagadiliner (1914) - 1914 - 19		Ways Bridge Construction of the Constructio
Deponent swears that she w	as the wife of said deces	used soldier, during his	service in the
army as a soldier, and that sh	ne has never married sine	ce his death aforesaid, th	nat she became
his wife in the year 185'2,	that Georgia is her home	and she resided in this	State 23d day
of December, 1890, and has	not lived in any other S	tate or locality since tha	t date. I have
been allowed a pension for	the year ending Februa	ry 15th, 1894, and now	apply for the
allowance provided by law fo	r the year ending Februa	ary 15th, 1895.	
Sworn to and subscribed be	efore me, this	. 1.	į
7 day of Ja	229 1895.	Solley Thom	zem
D. le. lemm	Ordinary. Post-		ind
a lost		5 1 E	0.00

# For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally Comes Mrs.
County of Cheretere Doely Thomason
who, being sworn, says on oath, that she is a bona fide resident of said county of
Cherotice State of Georgia, and that she has RESIDED in said State
continuously ever since. 18.35 That she is the Widow of
Lemeon Thomason who was a soldier in Company
6 of the 2 150 Regiment of Georgia
Volunteers, that he enlisted in said regiment on or about the month of
186 3 and served in the Army up to
life on theday of May . 18 65 (State here
full particulars of the husband's death, when, where and from what cause.) will un
Prison at Paul Look out in Maryland
in May 1865
· ·
• • • • • • • • • • • • • • • • • • • •
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 18 52.
she has never married since his death aforesaid, and that she became his wife in the year 18 52.  I have been allowed a pension as a resident of Cickens County for the year ending
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.
She has never married since his death aforesaid, and that she became his wife in the year 18 572.  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.  Sworm to and subscribed before me, this
I have been allowed a pension as a resident of Cickers 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  day of July 1899.
She has never married since his death aforesaid, and that she became his wife in the year 18 572.  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.  Sworm to and subscribed before me, this
She has never married since his death aforesaid, and that she became his wife in the year 18 52.  I have been allowed a pension as a resident of Cickeus 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  day of Jany 1899.  Allow 6 Count Ordinary.  Post-Office Roll Fraud
State of Georgia.  I have been allowed a pension as a resident of Cickeus County for the year ending  February 15th, 1898, and now apply for the pension provided by law for the year ending February 15th, 1899.  Bworn to and subscribed before me, this  Aday of Jaury 1899.  Ordinary.  Post-Office Ball Graund  State of Georgia.
State of Georgia,  Cherokee County.  State of Georgia,  Cherokee County.  Size has never married since his death aforesaid, and that she became his wife in the year 18 52.  I have been allowed a pension as a resident of Cherokee County for the year ending February 15th, 1898.  County for the year ending February 15th, 1899.  Book of January 1899.  Allow County for the pension provided by law for the year ending February 15th, 1899.  Book of Georgia,  Cherokee County.  Ordinary of said County, certify that I am well acquainted
State of Georgia,  C'herokee  County.  County.  County for the year ending  February 15th, 1898, and now apply for the pension provided by law for the year ending February 15th, 1899.  Bworn to and subscribed before me, this  Allen County.  County.  County for the year ending February 15th, 1899.  Book of January 1899.  County ordinary.  County of eaid County, certify that I am well acquainted with Mrs.  County of eaid County, certify that I am well acquainted who made the above affidavit and am satis-
State of Georgia,  Cherokie  County.  County.  County for the year ending February 15th, 1899.  State of Georgia,  Cherokie  County.  County.  County for the year ending February 15th, 1899.  County for the year ending February 15th,
State of Georgia,  County Ordinary.  State of Georgia,  Cherokee  County  Coun
State of Georgia,  County Ordinary.  County for the year ending February 15th, 1898.  State of Georgia,  Cherokie County.  County for the year ending February 15th, 1899.  State of Georgia,  Cherokie County.  County for the year ending February 15th, 1899.  Allen County 1899.  Allen County Post-Office  Tallen County  Ordinary of said County, certify that I am well acquainted with Mrs. Abelly Thomason who made the above uffidavit 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 Series 1899.  Given under my official signature and seal this the day of Series 1899.
State of Georgia,  County Ordinary.  State of Georgia,  Cherokee  County  Coun

#### POWER OF ATTORNEY.

JNO. W. LINDSEY,

WIDOW'S PENSION

1900.

Executed in pr		Dolly the	meen	[L. S.]
To Those Herosofore Pald.  1901.	S	Mus. Stallers Schormann.  Or  County. Widow of Liamane or Marres 100.	MARRANT ISSUED  7/12, 1901,	Corres des l'acrison au la Printe, adasta Ga.

POWER OF ATTORNEY

d. b. burn. anding of bherehed burns

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

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

STATE OF GEORGIA,

Cherekee County.

STATE OF GORGIA,

# For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Chenchice Personally Comes Mrs.
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
of the description of the leavest and the leav
Volunteers, that he enlisted in said regiment on or about the month of
186 and served in the Army up to
life on theday ofN
particulars of the husband's death, when, where and from what cause)
- Lieb al "cold wald would love!
V Street Market
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 aforessid, and that she became his wife in the year 18 £ &
I have been allowed a pension as a resident of
February 15th, 1892, and now apply for the pension provided by law for the year ending February 15th, 1900.
8 worn to and subscribed before me, this  day of 1 1900.  Post Office
# day of face 1900.
Ordinary
State of Georgia, County. Ordinary of said County, certify that I am well acquainted
with Mrs. 6 3 cash and Lot & L. , who made the above affidavit and am satis-
fied 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 theday of18f ;
Given under my official signature and seal, this the #day of 1900.
(Official)
Seal.

# For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

Personally Comes Mrs.

		,	
	who, being sworn, says	on oath, that she is a	bona fide resident of said County of
bh	reter	State of Georgia, and	that she has RESIDED in said State
continuously ever since	er Brett		That she is the Widow of
Sa	manaca Scho	masen	who was a soldier in Company
of the	2 "	Regiment	of la
Volunteers, that he enliste	d in said regiment on or ab	out the month of	March
186 & and served in the	Army up to.		186 \ That he lost his
life on the	day of		1841: (State here
particulars of the husban			
was toh	en Brisma	N M Man a	of description
and die	e at cont	- Sachart	wil mornin
m 1865		( / / / / / / / / / / / / / / / / /	THE TOTAL PROPERTY
	Contract of the Contract	Name of the State	AND COMPANY OF THE PARTY OF THE
	-		and the second of the second o
Deponent swears that she washe has never married since			rice in the army as a soldier, and that
			County for the year ending
			he year anding February 15th, 1901
at devot for	1901	Holle	Thomason Velson
1100	1601.		11.0
DI, le lecont	Ordinary,	Post Office	Velson
		1 0	.bom
State of Geor	gia,	1	· bom
Cherekee	County.)	Ordinary of said Cou	nty, certify that I am well acquainted
with Mrs. Delle	J. Thomason	, who made	the above affidavit and am satisfied
			presents herself to be, and that she
as continuously resided in t	his State since the	day of	10
Given under my offic	ial signature and seal, thi	is thed	ny of faces 1901.
~~~		126.6	Som
Official     Seal.			cheel County.
	,	Drumary OI	County.

#### POWER OF ATTORNEY.

STATE OF GEORGIA,

bherohou County.

I. Dolloy/Shormasor , hereby authorize

N. b. Borra of Cherofice const

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

at borden la

In Witness Whereof, I have hereunto set my hand and seal, this // "

day of fary 1902.

Colloys Thormason [L. S.]

Executed in presence of

A. b. bom v. noy

To Those Heretofore Paid

To Those Heretofore Paid

To Those Heretofore Paid

No. 1875

No. 1875

For year ending Dec. 31, 1902.

PAID TO

PAID TO

A Regiment & Lay

JOHN W. LINDSEY,

Co. 6 Regiment & Lay

JOHN W. LINDSEY,

A NAPRANT ISSUED

AND HANDED TO

AND HANDED TO

STATE OF GEORGIA,

County.

I. Solly Alamana hereby authorize

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

Alamana Conty at legantar lea

In Witness Whereof, I have hereunto set my hand and seal, this /6.

day of flag 1903.

Executed in presence of

Alamana Conty

WIDOW'S PENSION,

For year ending Dec. 31, 1906.

No. 1920.

No. 1

For Widows-Heretofore Allowed Pensions.

# For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, PERSONALLY COMES MIRS.
County of Cherokee Dollay thomason
who, being sworn, says on oath, that she is a bona fide resident of said County of
Cherokes State of Georgia, and that she has RESIDED in said State
bherokee State of Georgia, and that she has RESIDED in said State continuously ever since her, Ainth
Limeon thomason who was a soldier in Company
b, of the 3th Regiment of La
Volunteers, that he enlisted in said regiment on or about the month of March
1863, and served in the Army up to Margaret 1864. That he lost his
life on the
particulars of the husband's death, when where and from what cause) . Disch at Count Sockent . M. D. a farmones of swan
, 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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 1862
I have been paid a pension as a resident of blanches 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 10" day of gary 1902  Ab berry, Ordinary Post Office
I h h mary Dut Office
July 1 minutes
NA A
State of Georgia,  Leherohee County. Ordinary of said County, certify that I am well
acquainted with Mrs. Oolly Thomson who made the above affidavit and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
hereself to be, and that she has continuously resided in this State since the
day of
Given under my official signature and seal, this the 10. day of fact. 1902.
Official /
Ordinary of Cheroke

NOTE.—All blank spaces must be filled.

Voucher and affidavit must bear date after January 1st, 1902.

# For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,	PERSONALLY COMES Mrs.
Olisa Mon, being sworn says o	n oath, that she is a boua fide resident of said County of
1. 3	tate of Georgia, and that she has RESIDED in said State
ontinuously ever since	. That she is the Widow of
6 of the seemed.	who was a soldier in Company  Regiment of
olunteers, that he enlisted in said regiment	on or about the month of 1863
te on the de husband's death, when, where	y of1865 (State here
Secretary W.a.	at the fisher of and corning to
	aid deceased soldier, during his service in the Army as a see his death aforesaid, and that she became his wife in
oldier, and that she has never married since we year 18 \$2 I have been paid a pension as a residen	tof. County for the
oldier, and that she has never married since year 18 22.  I have been paid a pension as a residence ar ending December 31, 1902, and now approximately the state of the state	tof
oldier, and that she has never married since year 18 22.  I have been paid a pension as a residence ar ending December 31, 1902, and now approximately the state of the state	ce his death aforesaid and that she became his wife in at of.  County for the ply for the pension provided by law for the year ending
I have been paid a pension as a resident par ending December 31, 1902, and now apprecember 31, 1908.  Sworn to and subscribed before a day of day 19	County for the pension provided by law for the year ending
I have been paid a pension as a resident par ending December 31, 1902, and now apprecember 31, 1908.  Sworn to and subscribed before a large of Georgia,	County for the pension provided by law for the year ending me,  Post-Office  I. Ale became
I have been paid a pension as a resident of the paid o	County for the pension provided by law for the year ending me,  Post-Office  I. Ale became
idier, and that she has never married since e year 18 2.  I have been paid a pension as a resident of ar ending December 31, 1902, and now approximate the second of the s	County for the plansion provided by law for the year ending me,  Post-Office  I. Ale leave a well  Ordinary of said County, certify that I am well  Accounts the said county of the shove affidavit and
I have been paid a pension as a resident par ending December 31, 1902, and now apprecember 81, 1908.  Sworn to and subscribed before a day of the day of t	County for the plant of the pension provided by law for the year ending me,  Post-Office  I. Ale low or that I am well when the pension of said County, certify that I am well true, and I know she is the individual she represents
I have been paid a pension as a resident par ending December 31, 1902, and now apprecember 31, 1908.  Sworn to and subscribed before a day of the day of t	County for the plansion provided by law for the year ending me,  Belling for the Post-Office  I. Abble County that I am well
I have been paid a pension as a resident par ending December 31, 1902, and now apprecember 31, 1908.  Sworn to and subscribed before a day of flow Ordina Country of the Co	County for the play for the pension provided by law for the year ending me,  Post-Office  I. Ale leave and I know she is the individual she represents
I have been paid a pension as a resident par ending December 31, 1902, and now apprecember 31, 1908.  Sworn to and subscribed before a day of flow Ordina Country of the Co	County for the pension provided by law for the year ending me,  Description of the pension provided by law for the year ending me,  Description of the pension provided by law for the year ending me,  Description of the pension provided by law for the year ending me,  Description of the pension provided by law for the year ending me,  Description of the pension provided by law for the year ending me,  Description of the pension provided by law for the year ending me,  Description of the pension provided by law for the year ending me,  Description of the pension provided by law for the year ending me,  Description of the pension provided by law for the year ending me,  Description of the pension provided by law for the year ending me,  Description of the pension provided by law for the year ending me,  Description of the pension provided by law for the year ending me,  Description of the pension provided by law for the year ending me,  Description of the pension provided by law for the year ending me,  Description of the pension provided by law for the year ending me,  Description of the pension provided by law for the year ending me,  Description of the pension provided by law for the year ending me,  Description of the pension provided by law for the year ending me,  Description of the pension provided by law for the year ending me,  Description of the pension provided by law for the year ending me,  Description of the pension provided by law for the year ending me,  Description of the pension provided by law for the year ending me,  Description of the pension provided by law for the year ending me,  Description of the pension provided by law for the year ending me,  Description of the year en
I have been paid a pension as a resident par ending December 31, 1902, and now apprecember 31, 1908.  Sworn to and subscribed before a day of day of ordinal day of	County for the pension provided by law for the year ending me,  Description of Said County, certify that I am well or the above affidavit and true, and I know she is the individual she represents resided in this State since the Arra Arra Arra County for the pension provided by law for the year ending me,  L. Ab because the county certify that I am well true, and I know she is the individual she represents resided in this State since the Arra Arra Market
I have been paid a pension as a residence year 18 2.  I have been paid a pension as a residence are ending December 31, 1902, and now apprecember 31, 1908.  Sworn to and subscribed before a day of flow or f	County for the play for the pension provided by law for the year ending me,  Dost-Office  I. Ab leave and I am well true, and I know she is the individual she represents resided in this State since the leave April 1908.

NOTE. All blank spaces must be stilled.

Voucher and Affidavit must bear date after January 1st, 1903

#### POWER OF ATTORNEY.

STATE OF GEORGIA, Cher the COUNTY. mus. hright \_ot allandaika to receive and receipt for the pension paid hereon, and request that he remit same to Ale derre anding a banton ba IN WITNESS WHEREOF, I have hereunto set my hand and seal, this \_ & \_ ... day of fary Solly thomasone Executed in presence of D. G. Correctioning WIDOW'S PENSION YEAR ENDING DECEMBER 31, 1904
PAID TO O THOSE HERETOFORE PA 1904. OHN W LINDSEY

STATE OF GEORGIA,	J.	2.4	County
Churche	COUNTY.	-	
I, Wolly	homason	le Kart	hereby authorize
- II Jiran	10		that he remit some to
o receive and receipt for the p	ension paid her	eon, and reques	t that he remit same to
Name of the state	at	21	
In Witness Whereof, I	have hereunto se	et my hand and	seal, this
lay of January	1905.		
	V	olls of	lamare [L. 8.
		0	
Executed in presence of			
A Drefore			
			,

Thorse Heretolore Feld.

To Those Heretolore Feld.

To Those Heretolore Feld.

To Those Heretolore Feld.

No. 32021

No. 32021

No. 32021

No. 32021

No. 32021

PAID TO

Thu. Nolly There are a 1906.

Opposite of Normal Feld.

Co. & Regiment & Ga.

JOHN W. LINDSEY,

Commissioner of Passions.

WARRANT ISSUED

FEB 23 1 1906.

AND HANDED TO

L. 446.

For Midows Meretofore Allowed Pension

## FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, PERSONALLY COMES Mrs.
County of Cheropee Solly Thomason
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 That she is the Widow of
On the 2nd Regiment of Granica
18.
Volunteers, that he enlisted in said regiment on or about the month of March
1863 and served in the Army up to author 162864 That he lost his life on the Mach day of 1865 (State here
particulars of the husband's death, when, where and from what cause.)
He was Coplined on the 16th of any 1864 and Carried to Point Jospons Maryland
and our from congressing
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
A
They was wall a paration of a resident of Cherofiel County for the
I have been paid a pension as a resident of
year ending December 31, 1908, and now apply for the pension provided by law for the year ending
December 81, 1904.
Sworn to and subscribed before me,
this 2 day of an 1904 - Estly Thomason
Poet Office
L.L. Garres Ordinary
State of Georgia, I. D. le leazere
County. Ordinary of said County, certify that I am well
acquainted with Mrs. Dolley, Thurrance 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 Barkh
day of18
Given under my official signature and seal, this the Sday ofday of
Official Ordinary of Cherothee County
Ordinary of Ordinary County

NOTE.-All blank spaces must be filled.

# For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,	PERSONALLY COMES MRS.
County of Cherokee	Dolly Thomason
0.1	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	. That she is the Widow of
Simeon Thon	who was a soldier in Company
6 of the 2 and	Regiment of Georgial
Volunteers, that he enlisted in said regime	nt on or about the month of Murch
1862, and served in the Army up to	August 16 1864. That he lost his
life on the	day of March 1865 (State here
particulars of the husband's death, when, whe	ere and from what cause.) No was
Captured the 100	Hay of August 1864
Dued at Poin	A Forth old Prion
in May 1865	
No. 1 and	
- The state of the	
po management of the second se	
the year 18.4-2	see his death aforesaid, and that she became his wife in
I have been paid a pension as a resid	ent of Charket County for the
year ending December Si, 1904, and now a	pply for the pension provided by law for the year ending
December 31, 1905.	
Sworn to and subscribed before m	soly Thomason
this / C day of Juny 190	06.
M. J. Webb , Ordinar	ry. Post-Office
State of Georgia,	1, M. J. Miba
State of Georgia,	y. Ordinary of said County, certify that I am well
	maden, Who made the above affidavit and
	e true, and I know she is the individual she represents
herself to be, and that she has continuously	And the second s
4.	resided in this Diale since the
Given under my official signature and	d seal, this the 16 day of January 1906.
J.Official (	M. J. miso
1. Seale 5	Ordinary of Chestee County.

#### POWER OF ATTORNEY.

And the second s
STATE OF GEORGIA,
Cherolee COUNTY.
I, dully Thomason, hereby authorise
W. J. Wild of Canton luc
to receive and receipt for the pension paid hereon, and request that he remit same to
at
In Wilness Whereof, I have hereunto set my hand and seal, this 9
day of Jan 1906.  Dolly to Thomason [L. 8.]
Executed in presence of 7. 12. 11860

# STATE OF GEORGIA, Thomason. to receive and receipt for the pension paid hereon, and request that he remit same to In Witness Whereof, I have hereunto set my hand and seal, this day of January

POWER OF ATTORNEY.

Executed in presence of JOHN W. LINDSEY

For year ending Dec. 31, 1906.
PAID TO MANAGAGES OF OF WIDOW'S PENSION JOHN W. LINDSEY,
Commissioner of Regiment 2 WARRANT ISSUED Widow

# For Widows Heretofore Allowed Pensions.

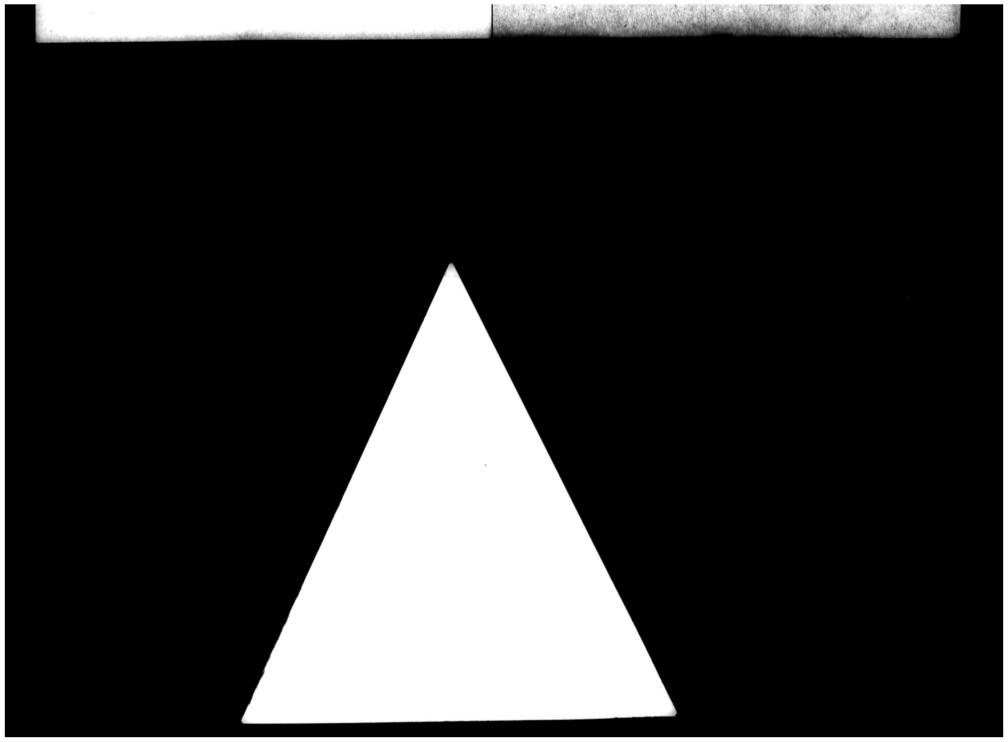
STATE OF GEORGIA,	PERSONALLY COMES MRS.
County of Cheritee	Dolly Thomason
10	eath that she is a bona fide resident of said County of te of Georgia, and that she has RESIDED in said State
continuously ever since all	
	maier who was a soldier in Company
C of the 2	Regiment of Regime
Volunteers, that he enlisted in said regiment	on or about the month of
186 3 and served in the Army up to	186 That he lost his
	ay of May 1865 (State here
particulars of the husband's death, when where Died at Roin Way 1863	and from what cause) fridan in
	See a security of the second section of the se
Description of adjusted the state of adjusted to the state of adjusted	deceased soldier, during his service in the Army as a
	Street Married
	his death aforesaid, and that she became his wife in
the year 18.5 2	101
I have been paid a pension as a resid	lent of Cittatlee County, for the
year ending December 31, 1905, and now appl	y for the pension provided by law for the year ending
December 81, 1906.	
Sworn to and subscribed before me	I all is homelessed
Tr. J. Madd., Ordinary.	Post Office
-	1. 21. 1. 11. 11. 11. 11. 11. 11. 11. 11
State of Georgia,	
Onewhee County.	Ordinary of said County, certify that I am well
acquainted with Mrs. Lolly The	n 1 (a 1011, 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 reday of all	esided in this State since the
	9"
Given under my official signature and se	
(Official)	· My Vhole
Seal	Ordinary of County

NOTE.—All blank spaces must be filled.

Youther and Addaylta must bear date after January 1st, 1906.

#### FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	Dolly Thomason
	oath, that she is a bona fide resident of said County of
LT L	te of Georgia, and that she has EESIDED in said State
continuously ever since 1852	That she is the Widow of
Simon Thomas	
6 of the 2 and	Regiment of Georgia
Volcunteers, that he enlisted in said regiment of	
1863 and served in the Army up to	186.5 That he died on
	May 1861
Ried in Prison Poin	
Assessment control representation agent control resources control and the second control an	de antique de la constitución de la conferencia de la constitución de
soldier, and that she has never married since	I deceased soldier, during his service in the Army as a chis death afore ad, and that she became his wife in
soldier, and that she has never married since the year 1852.  I have been allowed an Indigent pension	e his death afores ad, and that she became his wife in
soldier, and that she has never married since the year 1852.  I have been allowed an Indigent pension County, under Act 1900, for the year 1906, an	e his death afore d, and that she became his wife in as a resident of Charofice.
soldier, and that she has never married since the year 18.5 2.  I have been allowed an Indigent pension County, under Act 1900, for the year 1906, an year ending December 31, 1907.  Sworn to and subscribed before me	e his death afore ad, and that she became his wife in as a resident of Church and now apply for the pension provided by law for the
soldier, and that she has never married since the year 18.5  I have been allowed an Indigent pension County, under Act 1900, for the year 1906, an year ending December 31, 1907.	e his death afore ad, and that she became his wife in as a resident of Church and now apply for the pension provided by law for the
soldier, and that she has never married since the year 18.5 2.  I have been allowed an Indigent pension County, under Act 1900, for the year 1906, an year ending December 31, 1907.  Sworn to and subscribed before me	e his death afore ad, and that she became his wife in as a resident of Charoft and now apply for the pension provided by law for the
soldier, and that she has never married since the year 1852.  I have been allowed an Indigent pension County, under Act 1900, for the year 1906, an year ending December 31, 1907.  Sworn to and subscribed before me this August August 1907.  August 1907.  Ordinary.	e his death afore ed, and that she became his wife in as a resident of Church rendered his wife in the notation and now apply for the pension provided by law for the Church Post Office Nelson Sal.
soldier, and that she has never married since the year 1852.  I have been allowed an Indigent pension County, under Act 1900, for the year 1906, and year ending December 31, 1907.  Sworn to and subscribed before me this day of Aux. 1907.  Ordinary.  State of Georgia,	e his death afore ed, and that she became his wife in as a resident of Church ee and now apply for the pension provided by law for the Bolley Patterson Post Office Nelson Gal.
I have been allowed an Indigent pension County, under Act 1900, for the year 1906, and year ending December 31, 1907.  Sworn to and subscribed before me this day of day.  January.  State of Georgia,  County.	e his death afore ed, and that she became his wife in as a resident of Church and now apply for the pension provided by law for the Bolley Patterson Post Office Nelson Sal.  I. M. M. H. G. Ordinary of said County, certify that I am well
I have been allowed an Indigent pension County, under Act 1900, for the year 1906, and year ending December 31, 1907.  Sworn to and subscribed before me this day of day.  January.  State of Georgia,  County.	e his death afore ed, and that she became his wife in as a resident of Church and now apply for the pension provided by law for the Bolley Patterson Post Office Nelson Sal.  I. M. M. H. G. Ordinary of said County, certify that I am well
soldier, and that she has never married since the year 1852.  I have been allowed an Indigent pension County, under Act 1900, for the year 1906, and year ending December 31, 1907.  Sworn to and subscribed before menths day of day, 1907.  A Market County.  State of Georgia, County.  County.	e his death afore id, and that she became his wife in as a resident of Cheroke and now apply for the pension provided by law for the Dollar Patterson Post Office Nelson Gal.  I. M. Methodological County, certify that I am well and a resident of said County, who made the above affidavit, and
I have been allowed an Indigent pension the year 1852.  I have been allowed an Indigent pension County, under Act 1900, for the year 1906, and year ending December 31, 1907.  Sworn to and subscribed before me this May of Aur. 1907.  And Markett County.  State of Georgia,  County.	e his death afore ad, and that she became his wife in as a resident of Cheroft and now apply for the pension provided by law for the Cheroft and now apply for the pension provided by law for the Cheroft and Nelson Sal.  I. M. M. M. M. Condition of Said County, certify that I am well and I know she is the individual she represents esided in this State since the
soldier, and that she has never married since the year 18.5 2.  I have been allowed an Indigent pension County, under Act 1900, for the year 1906, and year ending December 31, 1907.  Sworn to and subscribed before me this day of day, 1907.  Aday of day, 1907.  State of Georgia, County.  acquainted with Mrs. Adaly Those am satisfied that the facts therein stated are therself to be, and that she has continuously results.	e his death afore id, and that she became his wife in as a resident of Cherofe in the new apply for the pension provided by law for the Cherofe Nelson Gal.  Postoffice Nelson Gal.  Ordinary of said County, certify that I am well true, and I know she is the individual she represents
soldier, and that she has never married since the year 18.5 2.  I have been allowed an Indigent pension County, under Act 1900, for the year 1906, and year ending December 31, 1907.  Sworn to and subscribed before me this day of day.  July 1907.  State of Georgia,  County.  acquainted with Mrs. Dolly Thoram am satisfied that the facts therein stated are therself to be, and that she has continuously results.	n as a resident of Cheroke and now apply for the pension provided by law for the Dollex Patterson Post Office Yelson Sal.  Ordinary of said County, certify that I am well who made the above affidavit, and true, and I know she is the individual she represents esided in this State since the
I have been allowed an Indigent pension County, under Act 1900, for the year 1906, and year ending December 31, 1907.  Sworn to and subscribed before methis day of day, 1907.  State of Georgia, County.  County acquainted with Mrs. All Those am satisfied that the facts therein stated are therself to be, and that she has continuously reday of 18  Given under my official signature and second county of the property of the state of the second county o	n as a resident of Cherokee  Indian and the pension provided by law for the  Molley Patterson  Post Office  I, M. Meth  Ordinary of said County, certify that I am well  who made the above affidavit, and true, and I know she is the individual she represents  esided in this State since the
I have been allowed an Indigent pension County, under Act 1900, for the year 1906, and year ending December 31, 1907.  Sworn to and subscribed before me this day of day, ordinary.  State of Georgia,  County, acquainted with Mrs. Allow Theorem and satisfied that the facts therein stated are therself to be, and that she has continuously reday of 18  Given under my official signature and a conficial signature and a conficial signature.	n as a resident of Cherokee  Indian and the pension provided by law for the  Molley Patterson  Post Office  I, M. Meth  Ordinary of said County, certify that I am well  who made the above affidavit, and true, and I know she is the individual she represents  esided in this State since the



## POWER OF ATTORNEY.

2 Thompson Benjamin & Ohetokee Educity	Insert of a 5/0/097		10 100	STA
INDIGENT PENSION	Paint of human		Witness my hand and Executed in presence	ATE OF GEORGIA
Name Benf. Fr. Thompson		21	st Language and resulting the state of	Gounty.
Approved1897.		U	day of Jan.	of allan
WARRANT HANDED TO			hack white	hereby au
490. V. BARRIOU, OTATO PRINTERS, ATHLOTH-			-   β	thorize

	£.	(A))					STATE OF GEORGIA,
STA	ATE OF GEORG	4	1			1	ahorethoe Coun
	cherches	County	.1			1	Bang & Thompson
	I, Beaufisiers	nen & Than	Lion	bere	by authorise	1	to avail himself of the Pension Act approved being duly sworn true answers to make to the
							1. What is your name and where do you
•	2, 711 A. 2000		of allan				2. Where did you reside on January 1st, 1
to rec	ceive and receipt for the p	ension allowed and re	equest that he remit same	e to X Ca Ca		1	in cherehoe ba la he
	reling	at bankar	ba by co	Sock			3. When and where were you born?
	. 2	/ h	year gara	. bulus .	mio com	1	4. When and where and in what company
	Witness my hand and	seal this	day of	/ /	1897.	د ا	La Root,
	Executed in presence of	· )	Wong, Fix Jan	mpson		8	5. How long did you remain in such comp
	Witness my hand and Executed in presence o	·				8	1865 al Gurrenda
						В	6. For how long a period did you dischar
					,	<b>b</b>	7. When, where and under what circumsta
						9	svas discher se al s
						4	8. What is your present occupation?
						Q	9. How much can you earn (gross) per ant
						μ	10. What has been your occupation since
		1 7	,			Ð	11. Upon which of the following grounds
						ប្រ	poverty," second "infirmity and poverty" or t
						P	12. If upon the first ground, state how lon your support? If upon the second, give a for
							upon the third state whether you are totally
_		The same of the sa	A Said	the state of the s		1	Indiamist & Porcate
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5 4	15 2			198		ž	14. What property, effects or income did y
1 2	K 3			19		Ö	did you make of same? All each of
Ky	H ST					Ь	a much of Douschold
0000	1					1	15. In what County did you reside during
7 51	1 4 5					, B	I railed in chowker
3 1	l sign 1					Ó	16. How were you supported during the
2 67	t ( d.					i "	and my farrale,
Or or	3						17. How much did your support cost for e
92.02			makerin				by your own labor or income? Cao
50	to be a serie of the series of	Annual Control of the	AND A SOUR		10		18. What was your employment during
3			1897				19. Have you a family? If so, who com
美 1	<b>'</b> ≌	8				- 1	a bomestead? None Magaton
343	2	3		8	15	1	since of them able to
- B		à		9	li.	\ ·!	- The state of the
40	5 K	2		9	1 11 0		20. Are you receiving any pension, if so v
23	0	1 2		H		\	Sworn to and subscribed before me thi
3 2		* 3		RA3	1	· 1	6. 1 day of Lary
B 64	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	to be	(+)	NA N		. 34	A bebonn
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		1 2	-03/25/2013 - 1-1-1		1000	14.75	

POWER OF ATTORNEY.

	Questions for Applicant.
	STATE OF GEORGIA,
	abonetho e County.
	to avail himself of the Pension Act approved December 15th, 1894, 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) Nally Spanner . Co.
	Bend F. Thompson Rosade m charles bearing to
	2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State?
	3. When and where were you born? Clock les la pri the year 1800
	When and where and in what company and regiment did you enlist or serve M. Chaoches
	burnty be June 1861 & Entisted in bempon & 10 th
8	5. How long did you remain in such company and regiment? Isin P 14 day of aproals
ĕ	1865 al Currenda of Lees my
В	6. For how long a period did you discharge regular military duty? A harsh it would
Bea	7. When, where and under what circumstances where you discharged from service?
9	svas discher se. at Surrender of does or my miles
P	
m	8. What is your present occupation!
ሿ	9. How much can you earn (gross) per annum by your own exertions or labor? List or the deliber
۲.	10. What has been your occupation since 1865? Last rading & Francisco
0	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"?
ĥ	12. If upon the first ground, state how long you have been in such condition that you could not earn
Þ	your support? If upon the second, give a full and complete history of the infirmity and its extent? If
À	upon the third state whether you are totally blind and when and where you lost your sight?
А	Intermed & Porenty I have do ales and alter
g	of the transfer of the transfe
Question	13. What property, effects or income do you possess and its gross value ? Name Sanall
Ö	a mice set of Nousehold & hatation from Terre worth & 4000
5	14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any,
G	did you make of same? All Good of those years of returned a small
Ь	a mount of rousehold & Rolation gumiliere
EVery	15. In what County did you reside during those years and what property did you then return for taxation?
Б	I resided in abovekee burnt and returned as a base station
ά	16. How were you supported during the years 1895 and 1896? A. Ame, all faces ad
•••	and my famale, Some what they rust to bell me
	and my famale, More what They recell to help 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? Can Some 586 or the following the source.  18. What was your employment during 1898 and 1896? What pay did you receive in each year?
	18. What was your employment during 1895 and 1896? What pay did you receive in each year?
	Homene Received me Cay and what we made on game
	19. Have you a family? If so, who composes such family? Give their means of support? Have they
	a bomestead? Nove stafe tong salf at Nome the children Morrad
	sience of them able to date me home no Womenhand
	20. Are you receiving any pension, if so what amount and for what disability? Money
	Sworn to and subscribed before me this the
	6. Applicant.
	A la burry Ordinary.
	County.

to receive and receipt for the pension allowed and request that he remit same to Ale Corre Executed in presence of 0 77.3 ) INDIGENT PENSION

	m cherekee 60, 60 have Been in this state 60 grown
	3. When and where were you born? Clock les les in the year 1030
	4. When and where and in what company and regiment did you enlist or serve m chankles
	lewant, ba June 1861 & Entisted in bompon of 18.18
್ದ	5. How long did you remain in such company and regiment? Latt P tholay of aprole
ä	1865 al Eucreside of Low many
Ø	1805 at Distriction of the state of
Answered	6. For how long a period did you discharge regular military duty? A best to year
b	7. When, where and under what circumstances where you discharged from service?
Ą	was discharged at surrender of does my miles
4	
	8. What is your present occupation? Francisco
8	9. How much can you earn (gross) per annum by your own exertions or labor? Rest or He dellar
,,,	10. What has been your occupation since 1865? Raskrading & Francisco
H	11. Upon which of the following grounds do you base your application for pension, viz.: first "age and
Ø	poverty," second "infirmity and poverty" or third "blindness and poverty"?
	12. If upon the first ground, state how long you have been in such condition that you could not earn
Ū	your support? If upon the second, give a full and complete history of the infirmity and its extent? If
À	upon the third state whether you are totally blind and when and where you lost your sight?
4	Informat V' Porserty I have deateles and alter
H	Arentles"
Question	
Ö	13. What property, effects or income do you possess and its gross value " Kane Sanalle
ď	14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any,
K	did you make of same? All Back of Share years of reduced a Small
U	a mound of muschal hataban pumblere
b	изинова д Учинский положений зитими
Every	15. In what County did you reside during those years and what property did you then return for taxation?
Б	I resided in aboveker beamy and returned as a base stated
h	16. How were you supported during the years 1895 and 1896? A. Amerale Secret
п	and and famely days of that The right to hall me
	17. How much did your support cost for each of those years, and what portion did your contribute thereto
	by your own labor or income? Can Some Sist or the dellar done all Sacrate?
	18. What was your employment during 1895 and 1896? What pay did you receive in each year?
	Formene Received ne by ont what we made on farm
	19. Have you a family? If so, who composes such family? Give their means of support? Have they
	a homestead? Nase stage ting salf at Name Y to children Morrad
	wine of them able to hate me home no Nomestand
	plicated the state was the state of the stat
	20. Are you receiving any pension, if so what amount and for what disability?
	Sworn to and subscribed before me this the
	A Co. borre Ordinary.
	of characters. County.
<b>MEAN</b>	

Where did you reside on January 1st, 1894, and how long have you been a resident of this State?

TAIL OF	GEORGIA,				
11/4	2 h. (	County.			
	i Parket	-	of said State and	County, having bee	n presented
	pport of the applica				
a witness in su	proved December 15	th 1894 and aft	er being duly sw	orn true answers to	make to the
llawing appartic	as, deposes and answe	re se follows:	er being and	,	,
1 What is you	s, deposes and answer	o von reside ?	dia il tu	distr. I'll	2 1/20 /1
i. What is you	mame and where d	o you remac			
	4 4 mily	1. 11/	/		
	uninted with				plicant, is of
ow long have vo	u known him?	Whirly	1214 : 416 x	2 W	, ,
	he reside, and how l			our all the	hunter
3. Where does	he reside, and how i	long has he been	a resident of this	State 1-passassissississississississississississi	7
& January de	w of his having serv	and In the Confed	lamte same on the	Georgia militia 9	How do you
	4		ierate army or the		
now this ?	Casa and Lada		······································	ametinish di gadan heberdi milihibi.	
s When when	e and in what compa			Land and	4
			and the suffice control		/ /
	<u> </u>				
8. Were you a	member of the same	company and re	giment ?	de la de lang	
7. How long d	id he perform regula	ar military duty,	and what do you	know of his service	as a Confed-
ate soldier, and	the time and circum				an and the same of the same of the said
1.1		y when its.	La La maria	wind imple	2
				/	
and the second second					
	and the same of the	SHOW KAN WALL	applicant y 70le	vonr means of	knowledge.)
8. What prop	erty, effects or in	come has the	applicant 7 (Giv	your means of	knowledge.)
8, What prop	erty, effects or in	scome has the	applicant Y (Giv	your means of	knowledge.)
1 2		+		in it seems to	Lining
22	rty, effects or income	+		your means of	Lining
9. What prope	rty, effects or income	+		in it seems to	Lining
9. What prope		+		in it seems to	Lining
9. What prope	rty, effects or income	e did the applican	t poseed in 1895	and 1896, and what	Lining
9. What prope	rty, effects or income	e did the applican	t poseed in 1895	and 1896, and what	Lining
9. What prope	rty, effects or income	e did the applican	t poseed in 1895	and 1896, and what	Lining
9. What prope	rty, effects or income	e did the applican	t poseed in 1895	and 1896, and what	Lining
9. What properry did he make	rty, effects or income of same?	e did the applican	t posses in 1896	and 1896, and what	Lining
9. What properry did he make	rty, effects or income	e did the applican	t posses in 1896	and 1896, and what	Lining
9. What properry did he make	rty, effects or income of same?	e did the applican	t posses in 1896	and 1896, and what	Lings
9. What properry did he make	rty, effects or income of same?	e did the applican	t posses in 1896	and 1896, and what	Lining
p. What property did he make the state of th	rty, effects or income of same?	e did the applican	t posses in 1896	and 1896, and what	Lings
9. What proper my did he make 0. What is the 1. Is the appli	rty, effects or income of same?	o did the applicantion and physicial ort himself by la	condition?	and 1896, and what	Lining
9. What prope ny did he make 0. What is the 1. Is the appli 2. How was h	applicant's occupational unable to supp	o did the applicantion and physicial ort himself by la	condition?	and 1896, and what	disposition, if
9. What prope ny did he make 0. What is the 1. Is the appli 2. How was h	rty, effects or income of same?	o did the applicantion and physicial ort himself by la	condition?	and 1896, and what	disposition, if
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O. What properly did he make O. What is the	applicant's occupational unable to supp	ort himself by la	condition?	f so, why?	disposition, if
What property did be make  O. What is the  L. Is the appli  How was be  What profit  Give a full	applicant's eccupation of his supported for and complete statement	ort himself by la	condition?	f so, why?	disposition, if
9. What properly did be make  1. Is the appliance  2. How was be  4. Give a full	applicant's eccupation unable to supported for a support for	ort himself by la	condition?	f so, why?	disposition, if
9. What prope ny did he make 0. What is the 1. Is the appli 2. How was he 3. What portion	applicant's eccupation of his supported for and complete statement	ort himself by la	condition?	f so, why?	disposition, if
9. What prope ny did he make  10. What is the application of the appli	applicant's eccupation of his supported for and complete statement	ort himself by la	condition?	f so, why?	disposition, if
9. What prope ny did he make 10. What is the application of the second o	applicant's eccupation of his supported for and complete statem	ort himself by lather two years went of the applica	condition?	f so, why?	disposition, if
9. What prope ny did he make 0. What is the 1. Is the appli 2. How was he 14. Give a full ander the Act of	applicant's occupation of his supported for and complete statem of December 15th, 1	ort himself by la the years 1815 as these two years v ent of the applica	condition?	f so, why?	disposition, if
9. What prope ny did he make 0. What is the 1. Is the appli 2. How was he 14. Give a full ander the Act of	applicant's eccupation of his supported for and complete statem	ort himself by la the years 1815 as these two years v ent of the applica	condition?	f so, why?	disposition, if
9. What prope ny did he make  0. What is the  1. Is the appli  2. How was had.  3. What portion  4. Give a full under the Act of the	applicant's occupation of his supported for and complete statem of December 15th, 1	ort himself by la the years 1815 ar these two years v ent of the applica	condition?	f so, why?	disposition, if

ZUDULIUNU LUN 11111-

TATE OF GEORGIA,
Cherokee County.
Personally came, before meand
W & Coleman, both known to me as reputable physicians
f said county, who being severally sworn, say on oath that they have examined carefully Down
nch personal examination say that his precise physical condition is as follows:
Sabelis, and own yestern Carrier angeline
ynus .
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
illowed.
Sworn to and subscribed before me, this  the sent day of falls 1897.
the 5 day of fare 1897.
Lebarre Ordinary.
ORDINARY'S CERTIFICATE.
ORDINARI D CERTIFICATION
STATE OF GEORGIA,
County.
I. J. 6.6 cm., Ordinary in and for said County, hereby certify that
the applicant Bang, H. Than passer resides in said County, and was a bona
fide resident of this State on the first day of January, 1894, and that the witnesses, viz:
mm. Salay. W. L. beloman and O. W. Palmany
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 witnesses
before same was signed.
I further certify that the tax digests of the select County show that applicant
returned for taxation in his name in 1898, For 5, and dollars
of property, and in 1896, Kerl one dollars of property.
In my opinion the foregoing clain ismade in good faith.
Witness my hand and seal of office, this 5. 14 day of fary 1897.
A la learn Ordinary
of chareheel County.

Before any questions are answered, the Ordinary shall swear applicant and the will be to the following words: "You shall true answers make to each of the questions saked of you, and the evidence you shall give will be the whole truth, so help you God." Additional sindarits may be statched if blank spaces are insufficient.

STATE OF GEORGIA,	
cherode County.	
I, R. F. Thompson	hereby authorize
W. A. Wright of Manta la	
to receive and receipt for the pension allowed, and request that	he remit same to
M. C. Com andry beston Ga	Maria Santa Anna Maria Andrea Anna Anna Anna Anna Anna Anna Anna An
by Chook	
Witness my hand and seal, this day of	1900.
B. F. Wildows for	[L. S.]
Executed in presence of	
d, b, burn, and	

SOLDIER'S PENSION

1900.

INDIGENT

GODE SEC. 1254. (For These Aiready Enrolled.)

NO.1704

## POWER OF ATTORNEY. STATE OF GEORGIA, Charokee County. I. B F. Thompson hereby authorize I b burn andig of Charotice burns to receive and receipt for the pension allowed and request that he remit same to at banken la Witness my hand and seal, this ? day of fare B Fathern hand Executed in presence of Ab born Groling SOLDIER'S PENSION (For Those Aiready Enrolled. WARRANT ISSUED OHN W. LINDSEY, INDIGENT

JOHN. W. LINDSEY,

WARRANT ISSUED

monday

B. F. Thankson

County Cherehee

## For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
laherokee County.
Dersonally appears B. St. There pear of Bhanke e)
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 theday of1844; that he is 65years old and
by occupation a farmer ; that he enlisted in the military service of the Confed-
erate States (or of the State of) during the war between the States,
and served for the term of 4 years in Company 2, of /s th Regiment of
fraction in the term of the term of the service of
follows: has hidney and Live Trusble plat
able to Labor
and the value
that his property consists of the following items for all amount
that his property consists of the following items.
of Viene haled and hitch furniture
of the value of Dollars, that by reason of his physical
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 the year 1900.
county been allowed a pension for the year 189
Sworn to and subscribed before me, this, the  day of flace 1900.
day of
ordinary.
State of Georgia,
State of Georgia, County.
I. d. 6. Corri Ordinary of said County,
do certify that I am well acquainted with B. 32, Thumphon 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 fan 1900.
your
M. B. Surm
Ordinary choserhoo County.
Nors.—The blank spaces must be filled. Nors.—A fildavit should not be attested before January 1st, 1900.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	
County.	
Dersonally appears B. F. Thompson	
County, State of Georgia, who being duly sworn, and resident of said County and State, and has	
since theday of	
by occupation athat he e	mlisted in the military service of the Con-
federate States (or of the State of	during the war between the
States, and served for the term of Quer 4, 200	in Company , of /8 th Regiment
of la r'obunteers	; that his physical condition is as
follows: Nervius and kilm	ex traible sist
. able to do any Labor	
that his property consists of the following items	Naus Now & Kitchen
fermatione	· Section 10 - Section and Control of Contro
-	E. C.
of the value of S SO	Dollars, that by reason of his physical
condition and poverty he is unable to support h	
that he receives no pension but the one herein	applied for.
Deponent desires to participate in the ben	efits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and mak is entitled for the year 1901. I have heretofore county been allowed a pension for the year 1 2少	as a resident of le heretice
Sworn to and subscribed before me, this th	v v v
4. day of funy. 1901	B FX Throngeon
A b.born	Ordinary.
STATE OF GEORGIA,	
Charekee County.	
1, d. 6. 60 mm	Ordinary of said County,
do certify that I am well acquinted with	Tr. Thornhow the
applicant in the foregoing affidavit, and am well	
in his said affidavit are true, and I know he is the	
and that he resides in this County.	
Given under my official sig	nature and seal, this
	1901.
Affin	d. b. burre
eal )	y charekoe County.

Note —The blank spaces must be filled.

Note —Affidavit should not be attested before January 1st, 16

#### POWER OF ATTORNEY.

Churle County.	
I. B. F. Thankon hereby authorize	
A b. born of bander be	
to receive and receipt for the pension allowed and request that he remit sam	e to
Witness my hand and seal, this day of the 1902.  By Tright 1902.	L. S.]
Executed in presence of	
Jan Pre	

Name It The cefester

#### POWER OF ATTORNEY

STATE OF GEORGIA,  County.
I, B. M. Thompson hereby authorize
pm A. Wright of allanta ba.
to receive and receipt for the pension allowed and request that he remit same to A. G. Corre and and a Cambor ha.
Witness my hand and seal, this 6" day of farming 1903.  A. Friffic Asian [L. S.]  Executed in presence of
Executed in presence of
Alleberre, Ording.

Shompson, 13, 7 Cobs SECTIONIES (GR THOSE ALREADY ENFOLLED)	No. 4364 INDIGENT	SOLDIER'S PENSION 1903.	Name B.H. Thursdy, 1100.C.	WARRANT ISSUED
No.	,,	01	2 0 0	!

il data

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

\* \*

JOHN W. LINDSEY,

WARRANT ISSUED

Regiment

1

WARRANT HANDED TO

no date

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CODE SECTION 1254.

( FOR THOSE ALREADY ENROLLED. )

No. 3647

F. El residuent

SOLDIER'S PENSION

1902.

INDIGENT

## FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cherrker County.
Personally appears Of Thamps on of Charoline
County, State of Geoogia, 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 1835; that he is 67 years old and
by occupation a Loran that he enlisted in the military service of the Con-
) during the war between the
States and served for the term of 4700 in Company of / 8 th Regiment
of 20 hate colors; that his physical condition is as
States, and served for the term of 470 in Company Arof & th Regiment of 2 kate culeur ; that his physical condition is as follows: Kidney from alle heart translets
Mundan Lices
that his property consists of the following items
Learning transfer to the total and the total
See Son Andreas Mr. Mills William
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 the control of the year 170 / Sworn to and subscribed before me, this the day of the year 1902.  Ordinary.
STATE OF GEORGIA,
County.
I Ordinary of said County,
do certify that I am well acquainted with I hampse
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
1909
(AMI)
ber Ordinary Cherker County.
Note.—The blank spaces must be filled.

## FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF	GEORGIA,	
Chens	County.	
	- ,	ason of clarabed
County, State of G	eorgia, who, being duly sworn	a, says on oath that he is a bona fide citizen
		s resided in said State continuously ever
since the	_day of	1836; that he is 64 years old and
		e enlisted in the military service of the Con.
federate States ( or	of the State of	) during the war between the
States, and served	for the term of 4 yeur	in Company of the th Regiment
of la ve	Limbons	; that his physical condition is as
follows :	not able to	; that his physical condition is as
		$\sigma$ $\sigma$
that his property	consists of the following item	18: Neuschald furnitaire
that are property		· .
of the value of	8.40	Dollars, that by reason of his physical
condition and nor	erty 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 des	sires to participate in the ber	nefits of the Act, approved December 15th,
1894, and the Acts	amendatory thereof, and mal	kes application for the pension to which he
is entitled for the	vear 1903. I have heretofor	re as a resident of che roke
	ed a pension for the year 152	
	subscribed before me, this the	
14	1903	<b>\</b>
ريال ا	a france	Ordinary. B FXThornfisor
		much
	F GEORGIA,	
Cheni	County.	
I. es.	6,60mi	Ordinary of said County,
do certify that I	am well acquainted with	B JA. Thompson
the applicant in t	he foregoing affidavit, and am	well satisfied that the statements made by
him in his said af		
	fidavit are true, and I know h	e is the individual he represents himself to
be and that he res	fidavit are true, and I know h sides in this County.	
be and that he res	fidavit are true, and I know h sides in this County.	
be and that he re	fidavit are true, and I know had in this County.  Given under my official signature.	gnature and seal, this 6
be and that he res	fidavit are true, and I know h sides in this County.	gnature and seal, this 6
Affix pair seal here	fidavit are true, and I know hades in this County.  Given under my official signary of facts of facts.	gnature and seal, this

Nors.—The blank spaces must be filled.

Nors.—Affidavit should not be attested before January 1st, 1900

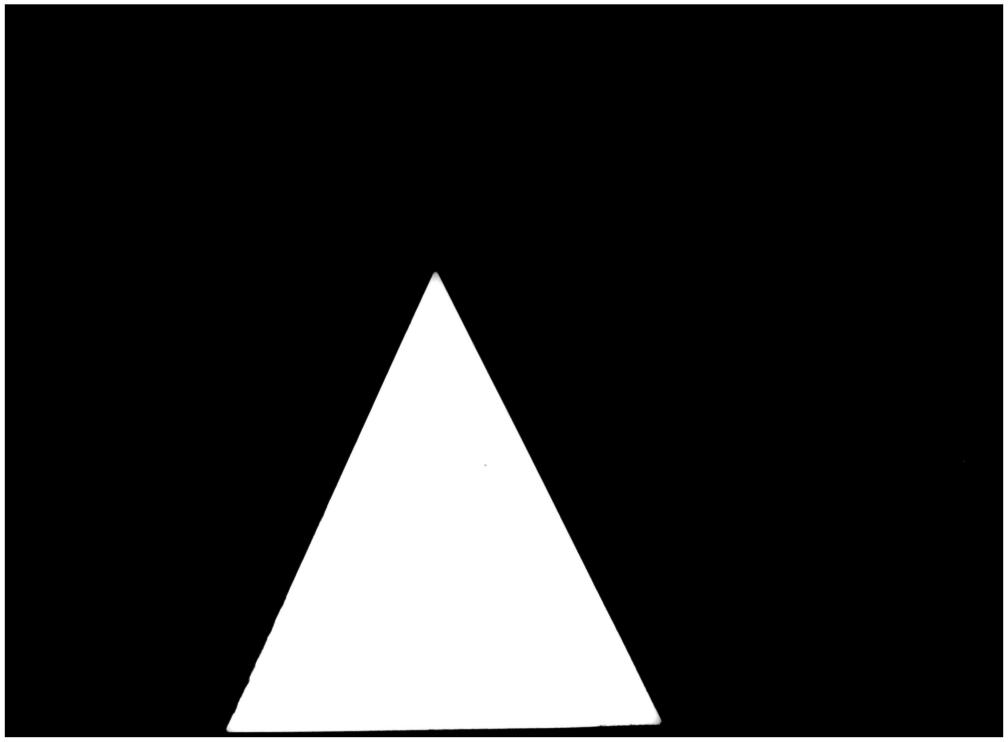
#### POWER OF ATTORNEY.

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	STATE OF			}		
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## FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	
County.	
Personally appears B & Thumpson	of cheartee
County, State of Georgia, who, being duly sworn, says o	
nd resident of said County and State, and has reside	
nce the day of 1841.	
y occupation a has been farmer, that he enliste	
ederate States (or of the State of 4 years	during the war between the
tates, and served for the term of 4 year in C	
	; that his physical condition is as
ollows: mot able to do	any Labor
nat his property consists of the following items:	rale amunt
House Hald books	
	llars, that by reason of his physical
ondition and poverty he is unable to support himself	by his own exertion or labor, and
hat he receives no pension but the one herein applied	
Deponent desires to participate in the benefits of	
894, and the Acts amendatory thereof, and makes appl	
s entitled for the year 1904. I have heretofore as a res	sident of chemoles
County been allowed a pension for the year 1508	p dis
Sworn to and subscribed before me, this the	B, FX Thompson
5' day of Acry 1 1904.	77.1
day of gary 1904. S. C. Cordin	erv
Oldin	iniy.
STATE OF GEORGIA,	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
County.	
2.1	Will a state of the state of th
I, J. 6.60000	Ordinary of said County,
o certify that I am well acquainted with B. F.	
he applicant in the foregoing affidavit, and am well y him in his said affidavit are true, and I know he is t	natisfied that the statements made Tradition that the statements made the individual he represents himself
be, and that he resides in this County	"
Given under my official signature and s	eal, this
day of Jary 1	904.
FORT :	bons
Ordinary	County.
Ordinary	

Uffedavil of Phy Sisine Sale of Kinging Elynoker County Men Or Lag and g M Bales both Known to me and Refulable Physics of Said County Who Bing Dearnally Swam day on oath The they have warning Comfully Ben & Thompson afflicant for fandion ander the act of 1894 and after Such examination by The his praise flysical Candition is ad fallows. He has Rhimmalism of the back kip & legs With Kidning Thouble being much like Diabelis. He is lacon sufferen generally We further day on sall that the Thysical cundition of afficient minders him mable to labor at any work or alling Sufficient & same a Suffait for hindelf & the we have no intent me said fendin being allowed Mu Mis Mar 1" 1899 Mr Balis mit A & Born Ording) of charthood out to



# STATE OF GEORGIA,

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No. 1950				y officia	tie	certify that	id affidavit are true	foregoing	well a
Application for Allowance	,		chi	Given under my official signature	P. S.	ts himsel	ic, and		acquainted
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County, Cherones .			ary .	this .	made a	E H	ed, to	II sat	200
Amount. 50 Date of Warrant, Meh 2			6	10	of said County, and the said	F.	the c	satisfied	3
Date of Warrant, Then		1:	hum	d.	power id Cour	i i	extent he	that	The same
Meh x 189/		1	KLL	ay of	of at nty, as	in this County		the s	and
mix				A	attorney and the	unty	claims,	statements	Ordinary of said
SECRETARY EXECUTIVE DEPARTMENT.				in	was		and		<b>5</b> 7 of
WARRANT HANDED TO			-	town	signed, affidavits		I kno	made	said
an Raherto			County	189	wits		I know he	by	County,
Geo. W. Harrison, State Printer, Atlanta, Ga.			Ţ.	91.	and		<u>r.</u>	him	nty,

Application for Allowance	Meadles and house of the asked country. They of The asked country. They of the asked the country. They of the asked the country. They of the asked the country.	Entered on record  MRA 7. 189  MATK  SECRETAR EXECUTE OFWERENT.	WARRANT HANDED TO  W. W. Harrion, Rate Printer, Alberta on
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SOLDIER'S PENSION.

1892.

POR THE YEAR ENDING OCTOBER 26, 1892.

NAME J. Mandalled Armed

Amounts \$ 50 @

W. H. HARRISON.

Security Security of American Se

STATE OF GEORGIA.

do certify that I am well acquainted with 9 0 Thryshan

individual he repesents himself to be, and that he resides in this county.

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

Given under my official signature and seal, this neemeday of march

For Applicants Heretotore Allowed Pensions, state of GEORGIA.

#### For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA. Cheroken PERSONALLY appears Thomas Of Throwner 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 19 = day of Systember 185/; 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 Organic in Company 4, of 15 th Regiment of Volunteers Characon 's Brigade; that whilst engaged in such military service at the battle of malusm Hall in the State of The non the Reconst day of July 1862, he was wounded as follows: I prod bhat in forgonnet of a Bourt shell strakens The corm sulutimerally and summaly poster 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 \_\_\_\_ dollars, for specific 1870 Sworn to and subscribed before me, this, the Specific sp POWER OF ATTORNEY. STATE OF GEORGIA. County. Know all Men by these Presents, That I. Thanks of County, State of Georgia, do hereby appoint 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 day of Filing 1891. Executed in the presence of us: Il Painum Commany

County, Georgia.

Send money to me as follows, by

ST	ATE OF GEOF	RGIA,		
	Sohwokeel	County.		
Pa	SONALLY appears	9	D. Bhucher	
	Cherolin	County,	State of Georgia, who	, being duly sworn, says
on oath	that he is a bona fide o	citizen and residen	of Georgia, and ha	s been such continuously
since the		_day of	rus programment vary	48; that he enlisted
in the mi	litary service of the C	onfederate States	(or of the State of	)
during th	e war between the St	ates, and served a	a Private	in Company H,
	th Regiment of		Volunteers	**************************************
Brigade ;	that whilst engaged i	in such military ser	vice at the battle of	
in the St	CONTRACTOR OF THE PROPERTY OF		on the	day of
		186 , he	vas wounded as follow	18: Long Short Shot
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and	esometrally se	reless	and the second s	
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Der	opent desires to parti	icinate in the benef	its of the Act, approv	ed October 24, 1887, and
the acts	amendatory thereof, a	and makes applicat	ion for the allowance	to which he is entitled for
the year	ending October 26, 1			• ***
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Deec	and day of mon	ch 1892	1	
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		Later Later		
	POW	ER OF	ATTORN	EX.
ST	ATE OF GEO	RGIA,		
	Scherolcee	County.	200	,
Kn	ow all Men by these	1 5	J. J. Three	her
	A		Cloperol	lev
County	in said State, do here	by appoint	rai Jones	
	Lanta Finters	A Company of the Comp	(/	lawful attorney in fact, for
me and	in my name, to recei	ive and receipt for	whatever amount of	money I may be entitled to
from the	State of Georgia by	reason of the inju-	ry received as aforesa	id in the military service of
my said	attorney to receipt in	my name for any	Warrant that may b	affidavit; hereby authorizing e issued by the Governor, aforesaid.
or for ar	ny sum of money which	ch may be coming	to me for the reason	aforesaid.
	WITNESS WHER	CEOF, I have here	unto set my hand and	seal this second
day of_	marchi	11 10 06' July 1984	A A A	carles - 5 al
True	ecuted in the presence	to the first the second	10 the plant he cla	1918 911 L. S.
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			County, Georg	*
-0	A STATE OF THE PARTY OF THE PAR		NATIONAL PROPERTY OF THE PARTY	BEST STORY

For Applicants Heretofore Allowed Pensions

POWER OF ATTORNEY. blose 1800 County. Know all Men by these Presents, That I The 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, of for any sum of money which may be coming to me for the reason aforesaid. IN WITNESS WHEREOF, I have hereunto set my hand Executed in the presence of us: Milan, 6, born, ordinary Send money to me as follows, by la Allen & come ordanary Choosede County, Georgia. STAL E OFICEORGIAM

For Applicants Heretofore Allowed Pensions.

	POWER	OF ATI	URNEY.	
1.1	GEORGIA, COU by these Presents.	NTY.)	haaphin Bisothi iam Y Haa	/
County, State of G	eorgia, do hereby appo	in Wall	my true and lawful a	ttorney in fact, for
me and in my name State of Georgia b States (or of this ney to receipt in m	e, to receive and receip y reason of an injury: State), as stated in y name for any Warra ing to me for the reaso S WHEREOF, I hav	ot for whatever amous received as aforesaid in the foregoing affida- un aforesaid.	nt of money I may be on the military service of wit; hereby authorizing by the Governor, or for and and seal, this.	entitled to from the of the Confederate g my said Attor- any sum of money
A. to b		DIRECTION		
(For Those Aiready Enrolled.)	Soldier's Pepsion.	County Le horodese Disability Sti & am	Amount, \$ 50.04.  W. H. HÁRRISON, Secretary Executive Department.	WARRANT BANDED TO

	D County S	1 11	
Personally appear		lar of the	
		rn, says on oath that he is a	
resident of said State, a	nd has resided therein o	ontinuously ever since the	1940
		t he enlisted in the military	
federate States (or of the		during t	he war between the
States, and served as a	Private	in Company N,	of //- th Regiment
of Lesonesa	Volunteers	mmens 's Brigade; th	at whilst engaged in
such military service at	the battle of	luis Will day of July	in the State
	on the	bible In GOI	186.24 he was
wounded as follows:	De to som	OSBITCH SON GOG!	asm Kelm
Abe MIST and	De Bour freis		
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	r 26, 1893. I have here	efits of the Act, approved Oction for the allowance to whe tolore been allowed a pensionars, for	on of Fiffs
	March 1893	1. OF Ma	elier
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Norn—State fully nature of heability, resulting from the work STATE OF GE  I,	CORGIA, County, Sacquainted with ag affidavit, and am well	satisfied that the statements	made by him in his
Nora—State fully nature of the ability, resulting from the work STATE OF GE  I,  lo certify that I am well applicant in the foregoin aid affidavit are true, as	CORGIA, County, State of disease wand or disease.  CORGIA, County, State of County, State o	satisfied that the statements	made by him in his
Nora—State fully nature of insability, resulting from the work STATE OF GE  I,  do certify that I am well applicant in the foregoin said affidavit are true, as dividual he represents him to the said affidavit are true, as	CORGIA, County, County	satisfied that the statements the extent he claims, and I resides in this County.	made by him in his
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Nora—State fully nature of meability, resulting from the work STATE OF GE  I,  do certify that I am well applicant in the foregoin and affidavit are true, as dividual he represents his I further certify that perfore whom the foregoing in the foregoing of the control of the co	wound or character of diseases wand or disease.  CORGIA,  County,  I acquainted with  ag affidavit, and am well  and that he is disabled, to  imself to be, and that he  thing affidavits were as  enuine.  Sing affidavite and seal,	satisfied that the statements the extent he claims, and I resides in this County.  ade. and power of attornal of said County, and the county of said County and this A walley of the county of the cou	was signed, is a he said artidayits and
Nora—State fully nature of nashbitty, resulting from the work STATE OF GE  I,  Io certify that I am well pplicant in the foregoin aid affidavit are true, as lividual he represents hi I further certify that sefore whom the foregoing ignatures thereto are greatures thereto are greatures thereto are greatures thereto are greatures thereto are greatures.	wound or character of diseases wand or disease.  CORGIA,  County,  I acquainted with  ag affidavit, and am well  and that he is disabled, to  imself to be, and that he  thing affidavits were as  enuine.  Sing affidavite and seal,	satisfied that the statements the extent he claims, and I e resides in this County.  ade. and power of attorney this of said County, and this	was signed, is a he said affidavits and
Norn—State fully nature of heability, resulting from the work STATE OF GE  I	wound or character of diseases wand or disease.  CORGIA,  County,  I acquainted with  ag affidavit, and am well  and that he is disabled, to  imself to be, and that he  thing affidavits were as  enuine.  Sing affidavite and seal,	satisfied that the statements the extent he claims, and I e resides in this County.  ade. and power of attorney this of said County, and this	was signed, is a he said affidavits and

For Applicants Heretofore Illowed Pensions

### For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.
STATE OF GEORGIA, ( Show RIV County.)
PERSONALLY appears J. Thranksa of County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
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 19
day of John Dom Day 188/; that he enlisted in the military service of the Con-
States, and served as a Sannan 's Brigade; that whilst engaged in such military service at the battle of Malward in the State
of Liongia Volunteers Rommanne 's Brigade; that whilst engaged in
such military service at the battle of Maldonial in the State
of Val., on the day of down 1862, he was
wounded as follows: Ry Lannohat on Gott gam Rundling
Rund in Gaid anon & almost making Gaid anim
wounded as follows: By Liamphot in Gott arm Renotang Rene Ind.  Rene in the State  of Val., on the day of from 1862, he was wounded as follows: By Liamphot in Gott arm Renotang Rene Vand arm Valmost making Yand arm  Madd arm Valmost making Yand arm

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application or the allowance to which he is entitled for the year ending October 26, 1894. I have heretofore been allowed a pension of 2 and day of Manch

Normalistic fully the nature of wound or character of disease which causes the disability, and explain particularly the extent

STATE OF GEORGIA. I, Ordinary of said County.

do certify that I am well acquainted with T. J. Thoophia 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 & emd

day of Manch

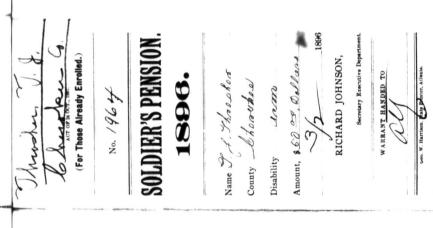


Ordinary School County.

#### POWER OF ATTORNEY.

STATE OF GEORGIA,  lehented County.		
KNOW ALL MEN BY THESE PRESENTS, That I, I of Thranker		
County, State of Georgia, do hereby appoint W. D. Wanght		
of Further band 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 February [1]		
Executed in presence of us  D. C. Corro & Annay		
Send money to me as follows, by beat le D. le borre a relana		
County, Georgia.		
SOLDIER'S PENSION,  1895.  Solding Choose Mes.  Amount, & Co., or Harrows, Mare Trees, Mare Toward.  WARRANT HANDED TO  WARRANT		

POWER OF ATTORNEY.
STATE OF GEORGIA,
County.
I, If Threaker hereby authorize Ale Com
I, If Thresher hereby authorize A le borns
to receive and receipt for the pension paid hereon and request that he remit same to
the man and
as bankon ba.
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 50
day of Jany 1808.
Executed in presence of us



## For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	ty. }
personally appears J.f. Tha	osher of bhoroked
County, State of Georgia, who being duly and resident of said State, and has resided	sworn, says on oath that he is a bona fide citizen
day of 187/; t	) during the war between the
States, and served as a Pravate	
of Louisea Volunteers, Ro	manage 's Brigade; that whilst engaged in
such military service at the battle of	in the State
of Halvin Will , on the	day of dame 1862, he was
wounded as follows: By Rumb	had in loft arm
1. 6 born andanas	dollars, for the year 189/22=874 his, the J G J Lacher 1895.  1896.  Ileense which causes the disability, and explain particularly the extent
STATE OF GEORGIA,	)
bhowher Count	tv }
	-
I, Dle bonn	Ordinary of said County,
do certify that I am well acquainted with	m well satisfied that the statements made by him
	he is the individual he represents himself to be
and that he resides in this County.	The second secon
	official signature and seal, this 144
day of Fish	1895.
Amx your soal	D. le . kom
here	
	Ordinary of bearder County

## For Applicants Heretofore Allowed Pensions.

Dersonalin	annears of 1 Three sheet of Schon sheet
• •	
day of Selet	1852; that he enlisted in the military service of the Con-
federate States (or	of the State of) during the war between the
States, and served	in Company , of /5 th Regiment
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 nititled for the year ending October 26th, 1896.  Sworn to and subscribed before me, this, the your day of face and subscribed before me, this, the your day of face and subscribed before me, this, the your day of face and subscribed before me, this, the your day of face and subscribed before me, this, the your day of face and subscribed before me, this, the your day of face and subscribed before me, this, the your day of face and subscribed before me, this, the your day of face and subscribed before me, this, the your day of face and subscribed before me, this, the your day of face and subscribed before me, this, the your day of face and subscribed before me, this, the your day of face and subscribed before me, this, the your day of face and subscribed before me, this, the day of face and subscribed before me, this, the your day of face and subscribed before me, this, the your day of face and subscribed before me, this, the your day of face and subscribed before me, this, the your day of face and subscribed before me, this, the your day of face and subscribed before me, this, the disability, resulting from the wound or disease.  STATE OF GEORGIA,  Decorate and I know he is the individual he represents himself to be	
	exponent desires to participate in the benefits of the Act, approved October 24th, 1887, the acts amendatory thereof, and makes application for the year ending October 28th, 1896. I ave heretofore as a resident of the year 1895.  The off the year 1895.  Worn to and subscribed before me, this, the day of substitute of wound or character of disease which causes the disability, resulting from the wound or disease.  TE OF GEORGIA,  Left 1807, the was wounded, required the substitute, and explain particularly the extent of disease.  TE OF GEORGIA,  County.
of feely	State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen ent of said State, and has resided therein continuously ever since the 1807; that he enlisted in the military service of the Constates (or of the State of during the war between the in Company & of 150 th Regiment would served as a locate in the State of in Company & of 150 th Regiment would be served in the State of locate in the State of one of the Act, approved on the state of locate in the benefits of the Act, approved October 24th, 1887, acts amendatory thereof, and makes application for the pension to which he is for the year ending October 26th, 1896. If we heretofore as a resident of locate of county been allowed a pension of locate of county been allowed a pension of locate which causes the disability, and applain particularly the extent lity, resulting from the wound or character of disease which causes the disability, and applain particularly the extent lity, resulting from the wound or disease.
o de	croonally appears of the short of lessaces.  The short of Georgia, who being duly sworn, says on oath that he is a bong fide citizen sident of said State, and has resided therein continuously ever since the test of the Consider of the State of the Consequence of the Consequence of the Consequence of the Consequence of the State of the State of the Consequence of the State of the Consequence
Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the year ending October 26th, 1896.  Sworn to and subscribed before me, this, the John Sworn to and subscribed before me, this, the John Sworn to the disability, resulting from the wound or disease.  STATE OF GEORGIA,  Deponent a subscribed before with John STATE OF GEORGIA,  Ordinary of said County, do certify that I am well acquainted with John 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 Columny Green under my official signature and seal, this Columny Green under my official signature and seal, this Columny Green under my official signature and seal, this Columny Green under my official signature and seal, this Columny day of Jane 1896.	
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	The second control of
Deponent des	ires to participate in the benefits of the Act, approved October 24th, 1887,
	consile appears I Therefore of Cheanter  States of Georgia, who being duly sworn, says on eath that he is a bone fide citizen ent of said State, and has resided therein continuously ever since the 1807; that he enlisted in the military service of the Constates (or of the State of
entitled for the	year ending October 26th, 1896. I heretofore as a resident of
dollars, for the year	ar 189.5.
Sworn to and	subscribed before me, this, the
TO It day	of /4 00 h 1896
uay .	
Norn-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.
Charen	State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen ident of said State, and has resided therein continuously ever since the 1807; that he enlisted in the military service of the Constitution of the State of during the war between the sand served as a Parabola. In Company A., of A. the Regiment of Company A., of A. the Regiment of States of the State of the Act, approved October 24th, 1897, acts amendatory thereof, and makes application for the pension to which he is for the year ending October 26th, 1896. I save heretofore as a resident of for the year 1892.  The state fully the nature of wound or character of disease which causes the disability, and explain particularly the extent allity, resulting from the wound or character of disease.  TE OF GEORGIA,  County.  State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent allity, resulting from the wound or disease.  TE OF GEORGIA,  County.  Ordinary of said County, the at a m well acquainted with I was a made and that the statements made by him aid affidavit are true, and I know he is the individual he represents himself to be the resides in this County.  Given under my official signature and seal, this Co.  Given under my official signature and seal, this Co.
1 00	resonable appears of Shacker of Leacher  y, State of Georgia, who being duly sworn, says on oath that he is a bong fide citizen sident of said State, and has resided therein continuously ever since the 1807; that he enlisted in the military service of the Contestate of the State of during the war between the states (or of the State of the St
do certify that I as	Illy appears of Shandar of Shandar of Shandar of Georgia, who being duly sworn, says on oath that he is a bone side citizen of said State, and has resided therein continuously ever since the 1807; that he enlisted in the military service of the Construct of the State of State of Shandar of Shanda
applicant in the fo	Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, the acts amendatory thereof, and makes application for the pension to which he is titled for the year ending October 28th, 1896.  Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, the acts amendatory thereof, and makes application for the pension to which he is titled for the year ending October 28th, 1896.  Sworn to and subscribed before me, this, the day of fact and subscribed before me, this, the licant in the foregoing affidavit, and am well satisfied that the statements made by him his said affidavit are true, and I know he is the individual he represents himself to be that he resides in this County.  Given under my official signature and seal, this Add and of facts.  Given under my official signature and seal, this Add and of facts.  1896.
·	who being duly sworn, says on oath that he is a bone fide citizen to the description of the continuously ever since the description of the Constate of the company of the constate of the Company of the Regiment dunteers, Company of the Regiment dunteers during the Regiment d
POUT }	S. b. bom
(here.)	

#### POWER OF ATTORNEY.

Chocofice County.
I, Information hereby authorize Will A. Warate
of Allanta la
to receive and receipt for the pension paid hereon and request that he remit same to
A, b, born anding by chock
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this.
day of fares 1 1898. 58 3 " (a) ( [L. 8.
Executed in presence of
A. 6.6 wordy }

POWER O	F ATTORNEY.
STATE OF GEORGIA,	No.
1, If Thornshen	of Allanta La
	aid hereon and request that he remit same to
A belown only	by chock
a Cantin ba	
IN WITNESS WHEREOF, I have	e hereunto set my hand and seal, this
day of	& & Street [1. 8]
Executed in presence of	
A 6 burn Only	

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## For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
charelson County.
Dersonally appears of thereshed of abouted
County, State of Georgia, who being duly sworn, says on oath that he is a tona fide citizen
and resident of said State, and has resided therein continuously ever since the
10.00 at a 1 and the military service of the Con-
federate States (or of the State of) during the war between the
States and served as a forested in Company the of fith Regiment
Volunteers Remarks A's Brigade; that whilst engaged
States, and served as a franchi in Company ##, of #ith Regiment of Wolunteers, Resmings 's Brigade; that whilst engaged in such military service in the State of 20 , on the day
1860 he was wounded, injured or diseased as follows:
of feet, 1860, he was wounded, injured or diseased as follows:  A sy warmed new Soft arms for arm  84 follows: St Rennib Chell
A special no soft arregister
Exfolasion of Rumb Vall
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 hereofore under said law as a
resident of Sauran county been allowed an invalid pension of
D. H Co. Ab 190 5
Sworn to and subscribed before me, this, the SS Street 2
1808 POSTOCKECK
17 day of any 1898. POST-OFFICE A 6 Course Grace or
A. 6 Course Ordinory
Norr-biate 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.
CTATE OF GEODGIA
STATE OF GEORGIA,
character County.)
I, A. lo. locare Ordinary of said County, do certify that I am well acquainted with the statements made by him
do certify that I am well acquainted with
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 _/ ?
Your A. C. boxxv
Ordinary checkes County.
Ordinary.

## For Applicants Heretofore Allowed Pensions.

TATE OF GEORGIA,
Deponent makes application for the pension to which he is entitled for the year adding October 26th, 1900. I have heretofore under said law as a resident of an absorbed before me, this, the  Deponent makes application for the pension to which he is entitled for the year and go of face and substituted before me, this, the  Deponent makes application for the pension to which he is entitled for the year and go of face and substituted before me, this, the  Deponent makes application for the pension to which he is entitled for the year and go of face and go of
personally appears of thrushen of Chowkow
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
18 day of Solat 18/1; that he enlisted in the military service of
he Confederate States (or of the State of) during the war be-
ween the States, and served as a Crevale in Company N, of 151 th
Regiment of La Volunteers, Roman, 's Brigade; that whilst
engaged in such military service in the State of Qa, on the
day of July, 1861, he was wounded, injured or diseased as follows:
Rumb Shell in Lett and rendering
Jack Come alement weekens
Mina and and and the
A SECURITY OF THE PROPERTY OF
AND THE RESERVE OF THE PROPERTY OF THE PROPERT
The state of the s
Programme Section 1997
Deponent makes application for the pension to which he is entitled for the year
County been slowed an invalid pension of
Feitt Dollars, for the year 1892.
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 Dollars, for the year 1892.  Sworn to and subscribed before me, this, the  Jean of Lofal Telegraphs.  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 law of Lay 1, that he enlisted in the military service of the Confederate States (or of the State of law 1, of 15, the law was between the States, and served as a law as a law wounded, in Company 1, of 15, the Regiment of Law 1862, he was wounded, injured or diseased as follows:  Actual Scheller and September of the pension to which he is entitled for the year ending October 26th, 1900. I have heretofore under said law as a resident of Dollars, for the year 1892.  Sworn to and subscribed before me, this, the September of the year 1892.  Sworn to and subscribed before me, this, the September of the County Law 1900. POST OFFICE Me County Law 1900. State of the disability, and explain perticularly the extent of the disability resulting from the wound or disease.  STATE OF GEORGIA,
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day of day of good post oppics de construction
X 6 born Carl
Nors. State fully the nature of wound or character of disease which causes the disability, and explain perticularly the
extent of the disability resulting from the wound or disease,
STATE OF GEORGIA,
(alanukar) Cometa
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I. A 6 6 County, Ordinary of said County,
do certify that I am well acquainted with Holy Thrasher the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
Deponent makes application for the pension to which he is entitled for the year and of County and subscribed before me, this, the county be nature of reduced to the county and subscribed before me, this, the county be nature of subscribed before me, this, the county be nature of subscribed before me, this, the county be nature of subscribed before me, this, the county be nature of subscribed before me, this, the county be nature of subscribed before me, this, the county be nature of subscribed before me, this, the county be nature of subscribed before me, this, the county be nature of subscribed before me, this, the county be nature of subscribed before me, this, the county be nature of subscribed before me, this, the county be nature of subscribed before me, this, the county be nature of subscribed before me, this, the county be nature of subscribed before me, this, the county be nature of subscribed before me, this, the county be nature of subscribed before me, this, the county be nature of subscribed before me, this, the county be nature of subscribed before me, this, the county be nature of subscribed before me, this, the county be nature of subscribed before me, this, the county be nature of subscribed before me, this the statement hilly the nature of subscribed before me, this county be nature of subscribed before me, this co
Detronaling appears of the states of Control of Concrete and County, state of Georgia, who being duly sworn, says on oath that he is a bone fide citizen resident of said State and County, and has resided therein continuously ever since the states of said State and County, and has resided therein continuously ever since the states of said States (or of the State of ) during the war being the states, and served as a served a
X 6 homes
Ordinary Chone has County.
Ordinary Change to D. County.

	POWER	OF ATTORNEY.	
STATE OF	GEORGIA,	, sir	County
Che	rekee_ County.	}	
I This	nas & Thomasto	hereby authorize	The photogram of the ph
		of charehoe land	_
		n paid hereon and request that he rem	7 /
	me	by	11 ALT ( )
	n la	x 1	rade on trans
IN WITH	NESS WHEREOF, I	have hereunto set my hand and seal this.	100
day of	us/ tone	901.	-1
	- 11	38 Theshe	[L. s.]
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) 1	ited in presence of		
Jalon .	Goth Alesh	86.	
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E		Le La	77
Those Aiready Enrolled No. 2460.	DISABLEI IER'S PE 1901.	Sisables and Share see a	. 2 E
AIR	A S	3 3 3 3	9
copii	SIC CENTER	N N	T.
For		Name Adoos County Disability D. Amount, \$ &	3 '
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County.	Ordinary, 1. Controls
1. Thomas I Thrush	bereby authorize A & learn
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	n paid hereon and request that he remit same to
and the second	who make a contract the second of the contract
at Kint on La Pic to the south study of	dud on well satisfied that the secondaries male b
	10.48 July 10. 10. 10. 10. 10. 10. 10. 10. 10. 10.
IN WITNESS WHEREOF, I h	ave hereunto set my hand and seal this
day of code00.	28 21
STATE OF GEORGIA,	38 Shasher [L.s
	Let 9
Executed in presence of	the state of the s
A. B. Burn briling	, jon 4. M
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Thomas Co.	NOV ENROL	16 X	LED		Thomas	inent han	7	14	INDSRY,	RANT HANDED TO
sher,	OSE ALRE	d		190	grown f.	S. Regi	ary of		HN W. L	TABRANT HA
Thras	(FOR TH	ing so	T T T		Name IA	County Co.Sy.	Disability.	70	O.	0

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STATE OF GEORGIA, 1

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

For The Heaville Here's fore Allowed Pensions.

## For Applicants Heretofore Allowed Pensions.

STATE OF	•	}		
	County		, ,	18 19 19
Personally ap	pears Thomas	thrusher of Ch	010700	_
County, State of Geor	gia, who being duly swo	orn, says on oath that he	is a bona fide citi	zen
and resident of said S	tate, and has resided the	erein continuously ever s	ince the /5	
day of Seft	1852; that h	e enlisted in the military	service of the C	on-
federate States (or of	the State of	in Company. W.,	the war between	the
States, and served as	drivate	in Company. W.,	of 16 th Regin	ent
of Ga.	Volunteers, Bear	's Brigade;	that whilst enga	ged
in such military servi	ce in the State of	~~, or	the	day
of July	1861, he was	wounded, injured or dise	ased as follows:	
The same	stationing &	itt. ann		
Jana, C.				1
	***		B	
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	recit			
day of	fang)			
ularly the extent of the disa	bility resulting from the wound	or disease.		
	County.			
		Ordin		
do certify that I am	well acquinted with	Thomas f. J.	hrasher	the
		vell satisfied that the state		
		is the individual he repre		
and that he resides in		•	* 1 M 479107	
		signature and seal, this.	10	
day of	Januar	CH . 6 . Box		
AMx }	-			
rour seal bere	Ord	inary chandre	Con	inty.
		WITTOWKER!		

### FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

STATE OF GEORG			100
Cherokee	County.		
Personally appears Thom	a D. Thrashor	of blease	Bank
County, State of Georgia, who be			
and resident of said State, and h			Part of the second
day of Sept 18	32 ; that he enlisted i	n the military service	of the Con-
federate States (or of the State o		) during the war	
States, and served as a	Sate in Com	pany OY , of 15	th Regiment
of La Voluntee	rs, Bennings	's Brigade; that w	hilst engaged
in such military service in the St		, on the	
	he was wounded,		
Garante	in Left ass	n Belween	Seba.
and rest forts	<b>T</b>	harmon management of the state	-
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jen	,		
2	×	7.3	1 1
Deponent makes application	for the pension to	which he is entitled	for the year
ending October 26th, 1902. I			
Cherchee		een allowed an inval	
#a \$5	Dollars, for t	ne year 1901.	4
Sworn to and subscribed before	ore me, this the	8 Shush	n
K" day of fary	1902. Post-o	ffice	
d. b. bernon	die		
NorsState fully the nature of the		ase which causes the disabi	lity, and explain
A STATE OF THE PARTY.	ang irom the would or quant		
STATE OF GEORGIA,	1		. P
bheroher Cou	nty.		
I, About	Name of the last o	name of Oedinama of	said County
do certify that I am well acquai			
the applicant in the foregoing affi			
him in his said affidavit are true,	THE THE PARTY OF T	<b>医医院性医院 经</b> 1000 1000 1000 1000 1000 1000 1000 1	of the contract of the contrac
be and that he resides in this Cou	CONTRACTOR OF THE PARTY OF THE	\$25 march 1 (1) 10 mg   1 do 1 do 1 mg   1 do 1	778
	my official signature as		· 1.
day of ga	The second secon	Mr. Carrieral A.	3
	operent of	Barrey.	

STATE OF GEO Book Will soldpers and alliquits must pear date after January 1, 1903

POWER OF ATTORNEY.

POWER OF ATTORNEY.
STATE OF GEORGIA,
Chandres County.
I, that J. thrusker hereby authorize
Mil A. Wright of attenta ba
to receive and receipt for the pension paid hereon and request that he remit same to
Ale Gorne, anding by which
at Cantos a la
IN WITNESS WHEREOF, I have hereunto set my hand and seal this
day of faco; 1903.
Executed in presence of
A, b, borner, antice
93 8

Name Thos. Ithrush

County Chevolet

JOHN W. LINDSEY,

Amount, \$5.2,2.0

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SOLDIER'S PENSI

1903.

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Executed in presence of	F + 7	8 Stras	[L. 6.]
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		<b>8</b> 100 100	in the little state of the stat
PENS	Lora sho	LINDSEY,	HANDED TO
E ALBERT	Shew Brangh	148 18 18 JOHN W. LA	WARRANT HA
	2	mount,	

POWER OF ATTORNEY.

STATE OF GEORGIA,

## FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County.
Personally appears This of Threaten of chenches
County, State of Georgia, who being duly sworn, says on oath that he is a bone fide citize
and resident of said State, and has resided therein continuously ever since the
day of 1811; that he enlisted in the military service of the Co
federate States (or of the State of) during the war between the States, and served as a
States, and served as ain Company, of th Regime
of Sa Volunteers, Sermane 's Brigade; that whilst engage
of
of fully 1862, he was wounded, injured or diseased as follows:
Gancilot and lift amore
Removement of the second of th
County, been allowed an invalid pension  County, been allowed an invalid pension  Dollars, for the year 1902.  Sworn to and subscribed before me, this the  day of fary 1903.  Post-office  Norn-State fully the nature of the worm or character of disease which causes the disability, and explorationarly the extent of the disability resulting from the wound or disease.
STATE OF GEORGIA, )
County.
I, Ordinary of said Count
do certify that I am well acquainted with Market and American American
•
the applicant in the foregoing affidavit, and am well satisfied that the statements made
him in his said affidavit are true, and I know he is the individual he represents himself
be and that he resides in this County.
Given under my official signature and seal, this
day of
(Alle)
your gal here Ordinary cheroches County
Note.—Fill all blanks and of Company and Regiment.
Note.—Fill all blanks and of Company and Regiment.  Note.—All vouchers and affidavits must bear date after January 1, 1908.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

Chland	F GEORGIA County	A Table of the Control of the Contro	INT A STA	
Personally s	appears Than f.	Thrasher	of should	ie_
County, State of G	eorgia, who being du	ly sworn, says on o	ath that he is a bona	fide citizen
	d State, and has resid	ed therein continu	ously ever since the	Hermonia who jiliya a yahara
day of	1834 ;	that he enlisted in	the military service	of the Con-
federate States (or	of the State of		) during the war l	etween the
States, and served	as a Rose Note	in Compan	y 0/ , of /5' th	Regiment
of Ha	Volunteers &	min	's Brigade; that whi	lst engaged
in such military se	ervice in the State of	No. 2	on the	day
of Jul /	1860	, he was wounded,	injured or diseased	as follows:
00	burnshot ,	in lott an	mi.	
	CC PA			
	J. 184.			
	C-9 -			
	Van	The state of the s		
***************************************				******************************
ending October	akes application for 26th, 1904. I have	e heretofore, unde	er said law, as a	resident of
Sworn to and day of the state fur particularly the extent of	26th, 1904. I have	County, been Dollars, for the this the 1904. Post of dor character of disease much wound or disease.	er said law, as a sallowed an invalid he year 1903.	pension of
Sworn to an  /2 " day  Nors.—State for particularly the extent of	d subscribed before monof floring of the disability resulting from GEORGIA.	County, been Dollars, for the the 1904. Post of or character of disease m the wound or disease.	er said law, as a sallowed an invalid se year 1903.	pension of
Sworn to an  /2 " day  Norn.—State fur particularly the extent of  STATE Of	d subscribed before me of factor of the wound of the disability resulting from F GEORGIA	County, been Dollars, for e, this the 1904. Post of or character of disease m the wound or disease.	er said law, as a sallowed an invalid ac year 1903.  Soffice	pension of
Sworn to and the state for particularly the extent of the state for particularly the catent of the state for the state for particularly the extent of the state for the st	d subscribed before monof floring of the disability resulting from GEORGIA.	County, been Dollars, for the, this the 1904. Post of deep or character of disease make wound or disease.	er said law, as a sallowed an invalid he year 1903.  J. J	pension of
Sworn to an  /2 " day  Nors.—State for particularly the extent of  STATE Of  L,  do certify that I at the applicant in the	d subscribed before mon floring of the wount of floring County of the disability resulting from well acquainted whe foregoing affidavit, the foregoing affidavit.	County, been Dollars, for the the 1904. Post of character of disease on the wound or disease.	er said law, as a sallowed an invalid ac year 1903.  Soffice  Ordinary of sallowed that the states	resident of pension of sasker and explain aid County, and explain the made
Sworn to an    2 " day     Nora - State to particularly the extent of  STATE Of    Cherry   I,       do certify that I athe applicant in the said	d subscribed before me of flexible and subscribed before and subscribed and	County, been Dollars, for the the 1904.  Post of character of disease method wound or disease.  Post of the start of the s	er said law, as a sallowed an invalid ac year 1903.  Soffice  Ordinary of sallowed that the states	resident of pension of sasker and explain aid County, and explain the made
Sworn to an  /2 " day  Norn—State fuparticularly the extent of  STATE Of  L,  do certify that I a the applicant in the said to be, and that he	d subscribed before mon floring of the wount of floring County of the disability resulting from well acquainted whe foregoing affidavit, the foregoing affidavit.	County, been Dollars, for e, this the 1904. Post of or character of disease m the wound or disease.	ordinary of sissed that the staten individual he represent	resident of pension of sasker and explain aid County, and explain

Notz.—Fill all blanks and of Company and Regiment.

Notz.—All vouchers and affidavits must bear date after January 1, 1904.

POWER OF ATTORNEY

Affix your Besi bere.

1891.

Maimed Soldiers.

Voucher No. 1950

1891.

COMPTROLLER GENERAL.

Paid to I. J. Thrasher

For arm disabled.

Included in warrant No.

issued to Treasurer.

1891.

WARRANT-CLERK.

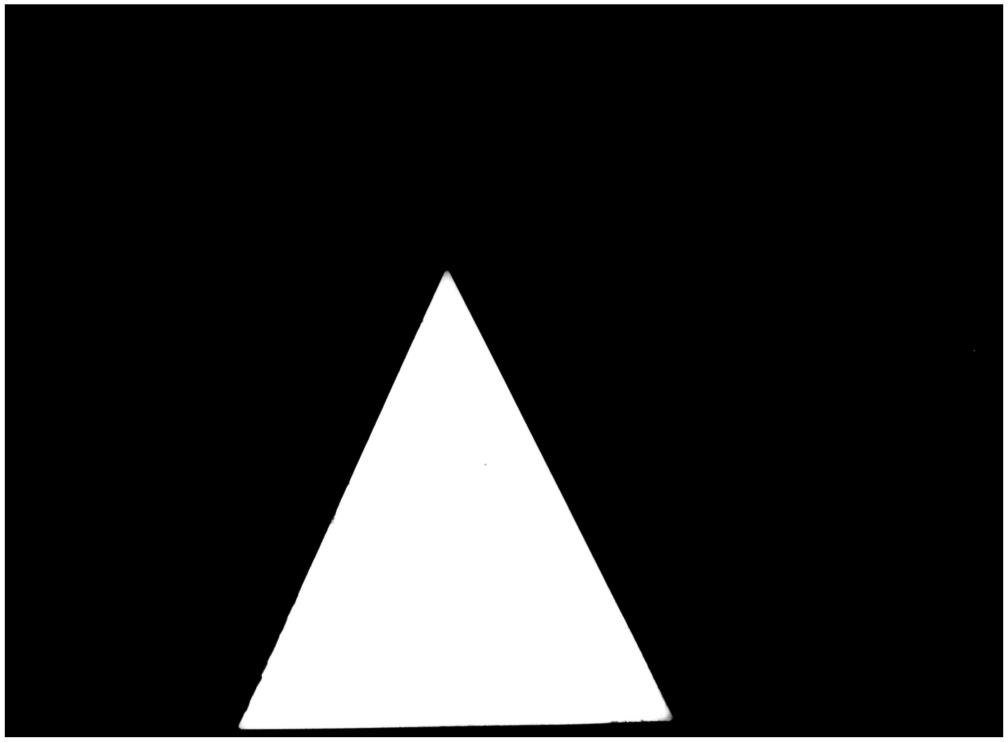
amRoberto

STATE OF GEORGIA,

EXECUTIVE DEPARTMENT.

No. 1950 Allanta, Ba. Meh V 1891.

Mr. Thas . J. Thrasher of the Courty
of having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Acts
approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for
Stow disables
He is entitled to receive the sum of JiftyDollars
for such disability, the same being the allowance ductor the year ending October 24, 1891.
The Treasurer will pay the same and brothis recent on this voucher and return same to
Executive Department for warrant.
By the Governor.
SEC'Y EXECUTIVE DEPARTMENT.
,50
RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia.
Fifty roof, soDollars,
Those of Heraphy In
AM Robert



## ORDINARY'S CERTIFICATE

Widow's Application To Be Put on Roll in Her Own Right When Husband Was on the Indigent Roll or Put on Under Act of July 11, 1910— As Amended by Act of 1919.	8. 1. Befere any questions  'Yes do notemaly a  'Yes do notemaly a  yes shall give will be  Yes a shall give will be  I Additional affairst must b  I. All affairst must b  I. All affairst of the shall opin  All affairst of Diabled  survice—became be	(SEAL)	Sworn under my hand	e signing the respective affidavits		that I also know	she represents herself	H C M
ine the G & James didow of 20 & James 1912	s are nawcred the Ordinary tear that you will true assess the truth. So help you God. "" may be attached if blank spa made before the Ordinary refud prior to first January, I a of marriage kiennes if obtaines Pensioners must use the Blue nade no proof of service and		hand and official seal of office	affidavits, and		, ,	If to be, and that she is a b	Sollipiel
giment Z V 7 7	shall sever applicant and the re make to such of the question for the county of residence, soil, are satisfied. If not, power marriage able. If not, power marriage Application Blank and state a was not required to do so.	m Souge	e this 30 day o	that they are truthful and trustworthy	that both of the foregoing	1908	bona fide continuing resident of said County and	Ordinary of su
J. W. LINDSEY, Commissioner of Pensions.  Byrd Printing Co., State Printers, Atlanta.	witness in the following workstime school yes and the cridence t, by some person, or by general and prove full term of husband's	Ordinary.	001- 1915	orthy and their statement	were du	marriage and I also know	ent of said County and w	aid County, do eertify that ecnsion, and that she is the

10-31-1919

ORDINARY'S CERTIFICATE
STATE OF GEORGIA,
Lauren County.
I, Ordinary of said County, do sertify that I
know Mrs the applicant for this pension, and that she is the
person she represents herself to be, and that she is a bona fide continuing resident of said County and was
on the day of 190%.
That I also know witness as to marriage, and I also know
; that both of the foregoing were duly sworn by me
before signing the respective affidavits, and that they are truthful and trustworthy and their statements
are entitled to full faith and eredit.
Sworn under my hand and official scal of office this 30' day of 1979
(SEAL.) M Sell-gill Ordinary.
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 hely 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 of residence.  4. Only widows who married prior to first January, 1881, are entitled.  5. Attach certified copies of marriage lieness of obtainable. If not, prove marriage, by some person, or by general reputation.  6. Widows of Diaabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because he made no proof of service and was not required to do so.

himmy of the hand

Widow's Application
To Be Put on Roll and for New Repts When
Husband Was on the Indigent Rell or
Put on Under Act of July 11, 1816—
As Amended by Act of 1818.

County Chartee

County Alberthan

Name Phro of A June

Widow of W & June

Company G.

Regiment 23/ 72

Approved

J. W. LINDSEY, Commissioner of Pession

Byrd Printing Co., State Printeen, Adhanta.

10-31-1919

Georgia, Cherokee county.

I hereby certify that William D. Timmons and Georgia A. Sams were joined together in the Holy Bonds of Matrimony by me on the 14th day of June 1874.

Joshua Cantrell, M.G.

Recorded Aug. 13th 1874.

C. M. McClure, Ordinary.

Office of Ordinary Cherokee County, Ga. Oct. 30th 1919.

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

Ordins y & Clerk Court Ordinary.

Georgia, Cherokee County.

Personally appeared before me an officer aimhhorized by law to administer oaths comes F.M.Blackwell, who after being duly sworn saith as follows:

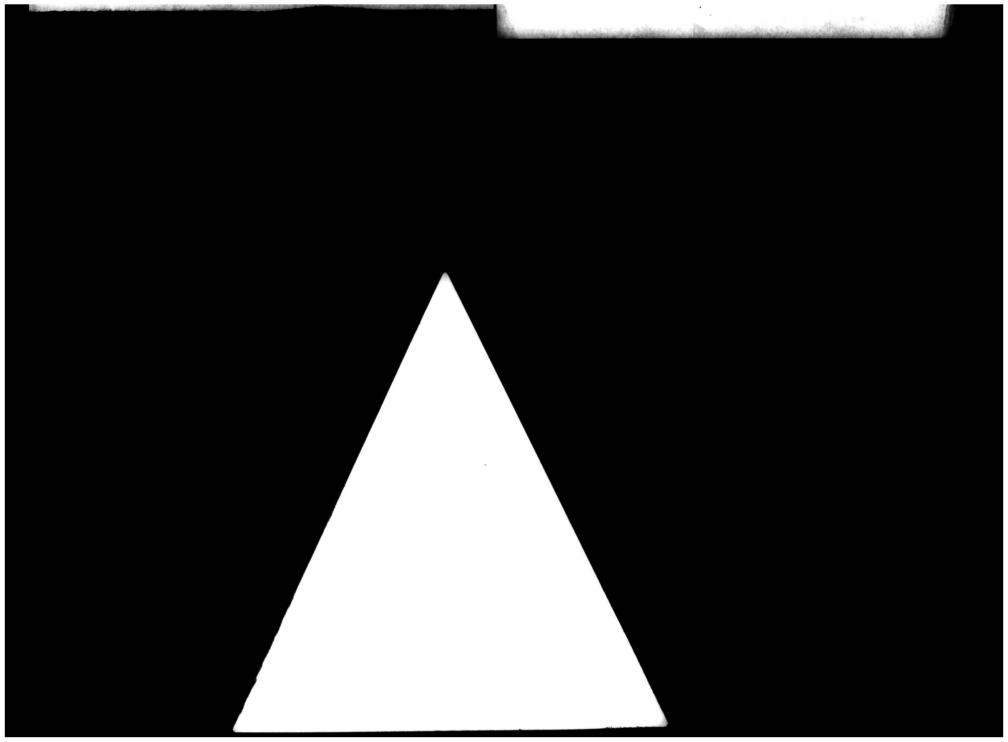
That he was Clerk Court ordinary of Cheroker County during the year 1912, and that to the best of his knowledge W. D. Timmons was placed on the Pension Roll of said County for 1912, and that after his death in 1912, his wife, Mrs. G. A. Timmons was paid \$60.00 for the Pension that was due him for 1912.

Sworn to and subscribed before me this 31st day of Oct. 1919.

Jm Salla pill Ordinary

#### WIDOW'S AFFIDAVIT

STATE OF GEORGIA,
COUNTY.
Personally before me comes Mrs S. A Jimmes of said County,
who, after being duly sworn, says that she is the widow of
to whom, in the County of State of State of she was married on
the 2 day of 1874, and that she remained his wife, and resided with him to the
date of his death in Oct 2-4. 19/2 and that she has not since his death remarried. At
the time of his death he was a resident of
of Georgia, and he was on thePension Roll of the State and paid a pension
of \$60 in Chartle County for 1962 per annum, on account of being a soldier in
Company Regiment 13 Survey (Volunteers or State Militia)
That she is now a bona fide resident citizen of said County ofand she
has so continuously resided since day of 67 7 and 1864
Sworn to and subscribed before me, this the
Am South Ordinary Mrs. La. Timmons
of Charles County.
(SEAL)
Affidavit of Witnesses to Prove Mariage and to Whom.
Date of Death of Husband
Date of Death of Husband
STATE OF GEORGIA,  Line COUNTY.
Date of Death of Husband  STATE OF GEORGIA,  COUNTY.  Personally before me comes. H. H. Zhunds known to be
Date of Death of Husband  STATE OF GEORGIA,  COUNTY.  Personally before me comes. H. H. When to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that
Date of Death of Husband  STATE OF GEORGIA,  COUNTY.  Personally before me comes. H. 11. Tolumbs
Date of Death of Husband  STATE OF GEORGIA,  Libertle COUNTY.  Personally before me comes. H. H. Whomas who after having been duly sworn, say: that of their own personal knowledge Mrs. S. A. Trimmers, who made the foregoing affidavit, is the lawful widow of Mrs. The same who died in Albertle.
Date of Death of Husband  STATE OF GEORGIA,  COUNTY.  Personally before me comes. 71. 11. Defends  known to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. 22. Trinners, who made the foregoing affidavit, is the lawful widow of 22. Trinners, who died in Africa.  County in said State of 19/2.
Date of Death of Husband  STATE OF GEORGIA,  COUNTY.  Personally before me comes. H. H. Defends known to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. S. J. Who after having been duly sworn, say: that of their own personal knowledge Mrs. S. J. Who after having been duly sworn, say: that of their own personal knowledge Mrs. S. J. Who after having been duly sworn, say: that of their own personal knowledge Mrs. S. J. Who after having been duly sworn, say: that of their own personal knowledge Mrs. S. J. Who after having been duly sworn, say: that of their own personal knowledge Mrs. S. J. Who after having been duly sworn, say: that of their own personal knowledge Mrs. S. J. Who after having been duly sworn, say: that of their own personal knowledge Mrs. S. J. Who after having been duly sworn, say: that of their own personal knowledge Mrs. S. J. Who after having been duly sworn, say: that of their own personal knowledge Mrs. S. J. Who after having been duly sworn, say: that of their own personal knowledge Mrs. S. J. Who after having been duly sworn, say: that of their own personal knowledge Mrs. S. J. Who after having been duly sworn, say: that of their own personal knowledge Mrs. S. J. Who after having been duly sworn, say: that of their own personal knowledge Mrs. S. J. Who after having been duly sworn, say: that of their own personal knowledge Mrs. S. J. Who after having been duly sworn, say: that of their own personal knowledge Mrs. S. J. Who after having been duly sworn, say: that she have a state of their own personal knowledge Mrs. S. J. Who after having been duly sworn, say: that she have a state of their own personal knowledge Mrs. S. J. Who after having been duly sworn, say: that she have been been duly sworn to be the state of the say of
Date of Death of Husband  STATE OF GEORGIA,  Shartles COUNTY.  Personally before me comes HH to whom to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. Shartles who died in shartles who d
STATE OF GEORGIA,  COUNTY.  Personally before me comes. H. H. Who after having been duly aworn, say: that of their own personal knowledge Mrs. S. H. Who after having been duly aworn, say: that of their own personal knowledge Mrs. S. H. Who after having been duly aworn, say: that of their own personal knowledge Mrs. S. H. Who after having been duly aworn, say: that of their own personal knowledge Mrs. S. H. Who after having been duly aworn, say: that of their own personal knowledge Mrs. S. H. Who after having been duly aworn, say: that of their own personal knowledge Mrs. S. H. Who after having been duly aworn, say: that of their own personal knowledge Mrs. S. H. Who after having been duly aworn, say: that of their own personal knowledge Mrs. S. H. Who after having been duly aworn, say: that of their own personal knowledge Mrs. S. H. Who after having been duly aworn, say: that of their own personal knowledge Mrs. S. H. Who after having been duly aworn, say: that of their own personal knowledge Mrs. S. H. Who after having been duly aworn, say: that of their own personal knowledge Mrs. S. H. Who after having been duly aworn, say: that of their own personal knowledge Mrs. S. H. Who after having been duly aworn, say: that of their own personal knowledge Mrs. S. H. Who after having been duly aworn, say: that of their own personal knowledge Mrs. S. H. Who after having been duly aworn, say: that of their own personal knowledge Mrs. S. H. Who after having been duly aworn, say: that of their own personal knowledge Mrs. S. H. Who after having been duly aworn, say: that of their own personal knowledge Mrs. S. H. Who after having been duly aworn, say: that of their own personal knowledge Mrs. S. H. Who after having been duly aworn, say: that of their own personal knowledge Mrs. S. H. Who after having been duly aworn, say: that of their own personal knowledge Mrs. S. H. Who after having been duly aworn, say: that of their own personal knowledge Mrs. S. H. Who after having been duly aworn personal knowledge Mrs. S. H. Who aft
Date of Death of Husband  STATE OF GEORGIA,  Libertly  COUNTY.  Personally before me comes. H. H. Defends  responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. Libertly  affidavit, is the lawful widow of M. H. Defends  County in said State of Libertly  and that she has not since remarried. That she became the wife of
Date of Death of Husband  STATE OF GEORGIA,  Shown to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs.  Output in said State of Shown on day of Shown on the same man who was on the pension roll of said State  County when he died.
Date of Death of Husband  STATE OF GEORGIA,  Libertly  COUNTY.  Personally before me comes. H. H. Defends  responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. Libertly  affidavit, is the lawful widow of M. H. Defends  County in said State of Libertly  and that she has not since remarried. That she became the wife of

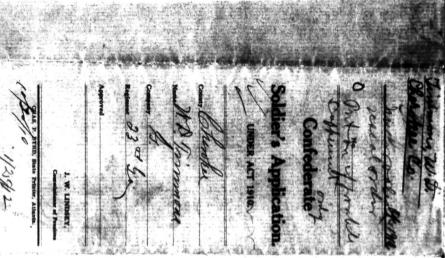


Soldier's Application. UNDER ACT 1910

Penaton offine -18-18-1910.

The Dependent cannot accept the valuation of property based on tax valuation or approximately there? As a mile the true setual salable cash value will exceed the tax valuation from one INITIX half oc to one third in value. Apply this rule to appliant's tax valuation and you will be close on to the actual cash value of the property.

J. W. Litht -y Con of Pensions.



#### APPLICATION FOR SOLDIER'S PENSION UNDER ACT ions for Applicants to Answer. TATE OF GEORGIA of said State and County, hereby ap-sion provided by Act of 1910, to Confederate Soldiers, and submits his sworm statement, my to make out the same, and after being duly sworn true answers to make to the quest propounded, answers as follows, to wit: What is your name and where do you reside? (Give County and Post-office). O Immous Ball round Charten as to 2. How long and since when have you been a continuous resident citizen of this State?... all my life except 1870-1872 been in this state since 3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State 6. Did you easis in the Army of the Consequence States or of the Organized Militia of this State from 1861 to 18655 Mil. 4. When any where, and it what Company and Regiment did you enlist? (Give the arm and class of Service) Attack of Company and Regiment in the actual Military Service with said Company and Regiment? (Give date of discharge) Attack of the Army o 7. Were you actually present with your Command when it was surrendered or discharged 20 200. 8. If you were not actually present, state specifically and clearly where you were at home m Chenter Doud a. Where was your Command when you left it? The Reserved Val 1862 Some time in b. When did you leave the Command? alhorteed on account of disab c. For what cause did you leave?... By whose authority did you leave? Augustal Marrieday For how long was your leave granted? In what way? Freed deschare disable and much for service Why did you not return to your command after leave pired? Herry g. In what way were you prevented? Meyer What effort did you make to return? Reser ably Were you captured during the war? 20, j. If so, when, and where? In what prison were you held and when were you released?.... 9. What property of every description was owned, in the use, possession and control of yourse wife, and its cash value on the & Nov. 1008" (Make list by items and value) 226 come of les 1600 come of the fact through 500 come hat re Jana hold \$ 2500 10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov.. 1908. To whom and for what price?.... none 11. What property of any description of any kind, and of any value now owned and in the use, session and control of yourself and wife and its cash value? (Make itemized list). as arrawared to 12. What annual or monthly income or earnings of yourself and wife and the source derived have 18. Are you drawing a pension of any amount from this State or the United States? 27 5 14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was 270

not allowed?....

Sworn to and subscribed before me, this the

STATE	OF GEORGIA.		A STATE OF	
0/	County.	THE PERSON	Transfer in	STORES CAN
161	6. 6 dwards	of said Stat	e and County is hereby p	resented
as a witnes	s in support of the application of	THE IN PROPERTY OF	for the pension p	of the second second
by the Act	of 1910, in said State, and after bein	g sworn true answers to r	nake to the questions prop	ounded,
answers as	follows:	The second second	and the second second	
	What is your name and where do you	ou reside? 16 16. 60	luord, Viese	deni
2. F	How long and since when have you	known 95 2 9	the ap	nlieant?
11	own him sim			
3. V	Where does he now reside, and since	when has he been a bon	a fide, continuing resident	in this
State and h	how do you know? Level	w County	been in this	State
	the state of the s	2000 1971	8/872	The same
4. V	When, where and in what Company as	nd Regiment did	1 Turing enlis	during
	361 to 1865? (Give date and place)	I IMI A	husku Co, tout.	3-23
5. H	How did you obtain your information	of this Service?	was mint	er
1	ane comp		The state of the s	2.0
	How long within your own personal	knowledge did he nerf	orm actual military servi	in with
	ny and Regiment? (give date)		1	62
	When and where was his Command s			W. 11
14	runsboro n.C	discharge of discharge	(give date and prace)	***********
		NIA		
	Were you personally present at the Su			************
9. I	If not, where were you and how came	you there?		*******
10. V	Was the applicant personally present	with his Command at s	urrender? 210.	
11, 1	pot where was he and how came him	there! he wo	a discharge	ed.
afri	2 1862 for a	cabille		
12. W	When did he leave his Command?	april 18	2 Where was his Co.	mmand
when he left	(D') 1 15	for what cause did he	lava discher	-
sichne	By whose authority did he leav	1 mil	1	nd how
one was he	e granted leave? it was	Sin al	Hew do you	
4	have stated to be true? If of your ow	p knowledge (Tell clearly		1 Know
1.	rsonal kno	while	and specifically)	
7/	n what way was he prevented from re		An the	- 1
		eturning to his Command		ww
Iow do you			0-	И
14. W	What effort did he make to return to h	is Command and how do	you know? Con	~
#	ay .	20-		
15. W	Vas applicant captured as a prisoner.	10	en and where?	-
-	In what prison was he held?		and when re	leased?
Sworn	n to and subscribed before me, this	the)	6	
23		3 27.27.	Edwards	alway.
-145	no Mith	A. Ordinari		
2000 NO	1	1 7		

OUESTIONS FOR WITNESS AS

#### AFFIDAVIT OF TWO FREEHOLDERS

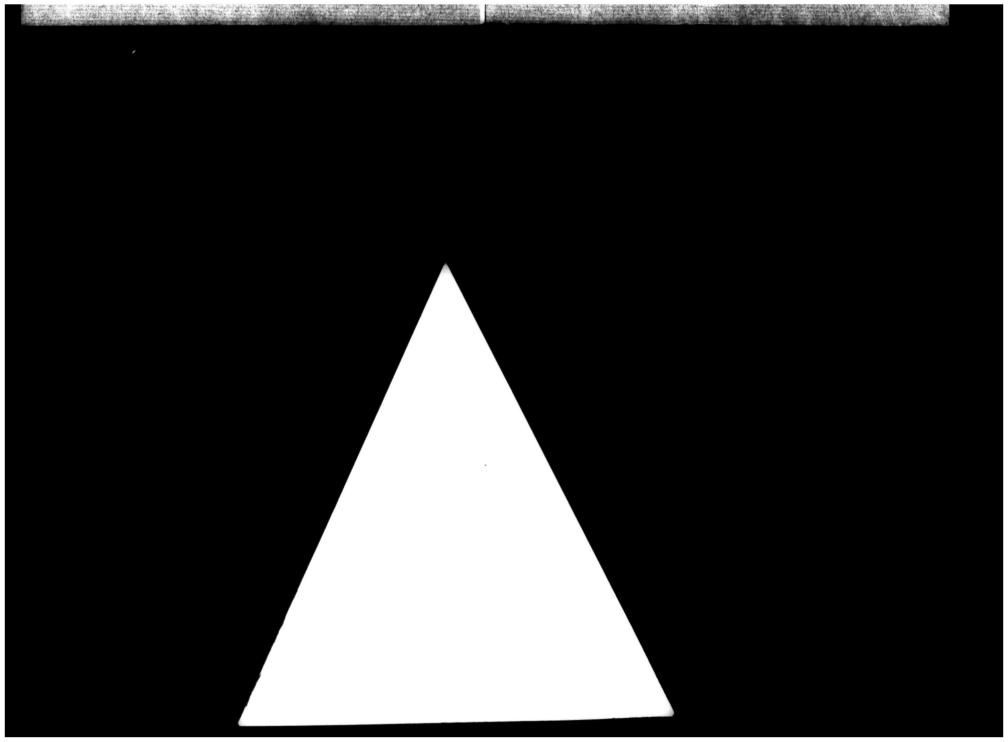
188			関を見り	加度發生		122 3
. 22	STAT	增一]	$(e_1)$		<b>CONTRACT</b>	
	10	7. 字音图	1 119		200 X (5) (1930)	SPECT DIS
12.12	100	0.000	e compa		С	ounty

	Personally before me some HB Quelitt X J.P. Sprage who on each
the app	at they are tresholders residing in said County and we know I have a 1720-1720-1720-1820-1820-1820-1820-1820-1820-1820-18
has	u 101 \$ 3000 one envision How hord \$25
200	. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov (State is fully by items.)
	When and to whom was it sold or given to?
	. What was the price paid or stated to be paid?
	. What relation is the party to applicant?
	. What disposition was made of the proceeds of the sale?
	Was the disposition of this property made in good faith and full values?
or was	it made to obtain a pension?
P	worn to and subscribed before me, this the 2 3 day of light 1910 AND Recreated Williams, of Cheroku County.
	ORDINARY'S CERTIFICATE.

STATE OF GEORGIA	
. 918	Ordinary of said County, certify that I know
said County. That I also know	for Pension is the person be represents himself to be and resides in
they are all residents of said Cou	uro A W.B. Revercet who are freeholdere, than the part who are duly sworn by me before signing the foregoing affidavit and the statements are entitled to full faith and credit. That the
Tax Results of Oker	sheet shows that and wif
	231 for 1909 8 / 2 93 for 1910 8 3 3 C
NOTES 1. Defers any questions are	of Cherokee County  assessed the Gridney shall grow applicant and all vinescens in the following word that you will give assessed make to make question each you and the evidence you

In form any quantities are manufact the Ordinary shall even applicant and all winesseein the following work. Or the selection of water that you will other seneurs us he to each question eaked you and the ordinary you shall be her writer to the ordinary you.
 All of the shall be her writer to the head of the ordinary of the

SCOTEMEY.



Jindey Milest					6	ı	1 00
INDIGENT PENSION	1			Executed in	receive and receip	( Louis	Church OF
1898.				presence of	at for the pension	wight	GEORGI
Name Miles W Firstey County Cherotee		. 1			ellowed and reque	1-	IA.
Approved 1898.				mus u	set that he remit	of au	
RICHARD JOHNSON,  Commissioner of Ponsione,  WARRANT HANDED TO		 . 1		Kilmi	Chee A	tente &	
OFO. W. HARRISON, STATE MINTER, ARANTA				(1.8)	6. Com	bereby authorize	
erene en				n dishe	۶.		, A

STATE OF GEORGIA. Cheroke COUNTY. I, miles W Juntey Coise A wrightto receive and receipt for the pension allowed and request that he remit same to 24 Witness my hand and seal this Executed in presence of weah WARRANT HANDED TO 1898.

### Questions for Applicant.

Constructive 1.1 days are selected by the selected selected by the selected selected by the selected selected by the selected sel
STATE OF GEORGIA,
Chirofu County.
to avail himself of the Pension Act approved December 15th, 1894, 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 realed? (give State, County and post office.) Trilles to Jimiley Thie Home Cheroku Co, Georgia
2. How long and since when have you been a resident of this State?
Been in State ener since 1849 left 1825
8. When and where were you born? Farm in ble in left 1825
4. When and where and in what company and regiment did you enlist or serve? Exclisited us
Jerupa Ca. Marine Jan
5. How long did you remain in such company and regiment? Air Months
o. How long the you remain in such company and
6. For how long a period did you discharge regular military duty? home months
When where and under what circumstances were you discharged from service? Oscharged
at attanta in longuet 1864 and Sent Back Home,
and was under graham in Jorryth to the hurringer.
8. What is your present occupation?
9. How much can you carn (gross) per annum by your own exertions or labor? 20 Aollano
10. What has been your occupation since 1865? Sarring
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"? Argumuly & Forelly
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"? Argumuly, & Corwily 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 ware you lost your sight?
Hore a Midney trauble out Pains all through
my Stomach.
Hore a Stidney Granble and Fains all through my Stomach.
13. What property, effects or income do you possess and its gross value? No Property.
14. What property, effects or income did you possess in 1894, 1895, 1896 and 1897 and what disposition,
if any, did you make of same? No Chopunty.
I may and you make or miner
15. In what County did you reside during these years and what property did you then return for taxation?
Chiroku County. Had no Oroperty.
16. How were you supported during the years 1896 and 1897? Thy own Color.
and the help of my neighbors.
17. How much did your support out for each of those years and what portion did you contributed by your own labor or income? July Sollars, a contributed about
18. What was your employment during 1896 and 1897? What pay did you receive in each year?
Trump to farm, what little I reed from my own labo
19. Have you family? If so, who composes such family? Give their means of support? Have they
a homestead? I have a wife and one Insome chied. Suppo
By my later and the help of my neighbors.
0
20. Are you receiving any pension, if so, what amount and for what disability?
Sworn to and subscribed before me this the
E.
24 day of 14 1898.) mark Applicant.
allen & Course Ordinary.
of County.

# QUESTIONS FOR WITNESS.

STATE OF GEORGIA.	1		
Forty the County	}	1 · 1 · 1	
M 1.00 7 1110	,		
Municipal Variote	mio ne	County, having been pre	
as a witness in support of the application of			ension
under the Act approved December 15th, 1894, following questions, deposes and answers as follow		A- 1	
1. What is your name and where do you resi	de? Thurlas	C Jaible	le
That is your many and saying as your	6.77	'	
2. Are you acquainted with M.	Trusley	, the applican	, if so
how long have you known him? Yes,	I have K	www. hin 49	
3. Where does he reside, and how long and sin		/	/ · · · · ·
Hee level recent the faces	between The	rate + Cherone	Crusto
4. When, where and in what company and reg	ment did be enlist and	how do von know ? Jes	1863
In First CV, in G. J	Charachet	Lieuvi	,
7			
<ul><li>Were you a member of the same company</li><li>How long did he perform regular military</li></ul>			onfed-
rate soldier, and the time and circumstances of h			
was the time and directions and continues of in	711 9 1110	1 this. Her an	ag
Carline Lar sundere a	it & Deriver	at some efte	6 Gren
Love, - menderved with Sa	tellouts about	I 3 months	
7. What property, effects or income has the app	olieant? (Give your n	neans of knowledge.)	
Has no Property. I	line near	him.	ten-accordinates a
		<b>\</b>	
8. What property, effects or income did the ap			tion, if
ny, did he make of same? Had re	o properly	<u> </u>	
9. Has he conveyed away any of his property i	n the last three years,	if so, what was it and to	vhom?
Had no Peroperty to	corney au	ray.	
0. What is the applicant's occupation and physi	cal condition ?	wys to far	m,
He has Kidney Trait	le and ro	unable to	laun
his Support.			
1. Is the applicant unable to support himself by	labor of any sort, if so	, why? Ite us	not
able to support him	my on a	ecount of	his
being sick.	B	2:	2.1
2. How was he supported during the years 189	6 and 1897?	nu awn	ovor
no help of his neigh			
3. What portion of his support for these two ye	ars was derived from hi	s own labor or income?	_
4. Give a full and complete statement of the ap			
nder the Act of December 15th, 1894?	has ruan	y aranou as	is not
able to earn his own	Defender.	7800	
	your.	mark	· · · · · · · · · · · · · · · · · · ·
5. What interest have you in the recovery of a	pension by this applicar	nt? Arric	-
' Sworn to and subscribed before me, this	1 7/	17:111	
be 1716 day of February 1898	) monido	With	less.
that netress is if mestimented	delec		
Corwand, ordinary	nary.	12.	
porojth County of	The second second	C. Ash	24
	THE REAL PROPERTY AND ADDRESS OF THE PARTY O	BOUGHT BOOK TO THE	

WARRY CONTROL OF A CONTROL AND A STATE OF THE ACT OF TH	
STATE OF GEORGIA,	
Cherostel coun	200 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Personally came before me	m Prier mg and
Wh Colehu	, both known to me as reputable physicians
9/11 // //	on oath that they have examined carefully III LES
W. Tusky	, applicant for pension under the Act of 1894, and after
uch personal examination say that his precise	
Epronio Prostate	
to void his us	
old age and	several nervous debility
and linfimity	
/ /	
	al condition of applicant renders him unable to labor at any
ork or calling sufficient to earn a support for	himself, and that we have no interest in said pension being
llowed.	Am Price m. 6.
Sworn to and subscribed before me this the	[W.L. Coleman m.D.
2 # day of Ful 189	18,5 ( W.D. Loleman, M.D.
Allen 6 Com	
Ordina	ary.
ORDINARY	S' CERTINCATE.
OnDinani	
	0 02.111.20.112.
STATE OF GEORGIA,	1
Chrose Count	ty.}
Chirolice County, Allen & County	ty.
Cherolica Count I, Allen & Count at the applicant Miles W Jin	, Ordinary in and for said County, hereby certify
Country Country Country I, Allen & Country Cou	, Ordinary in and for said County, hereby certify
Cherolica Count I, Allen & Count at the applicant Miles W Jin	ty.) , Ordinary in and for said County, hereby certify
I, Mules & Count  I, Mules & Count  and the applicant Miles W Jin  teen a bona fide resident of this State since the and that the witnesses, viz.: J. M. Cur	ty.
Churcher Count  I, Men & Count  and the applicant Miles W Jin  teen a bona fide resident of this State since the add that the witnesses, viz.: J. M. Gur  Nopur	ty.  Ordinary in and for said County, hereby certify  Ley resides in said County, and has  in day of 1849  Leolumon and John
Churcher Count  I, Men & Count  and the applicant Miles W Jin  teen a bona fide resident of this State since the and that the witnesses, viz.: J. M. Gra  Rophur  re of trust worthy character and that their sta	ty.  Ordinary in and for said County, hereby certify  Ley resides in said County, and has  in day of 1849  Leolumon and John
ATATE OF GEORGIA,  Churolice Count  I, Allen & Count  and the applicant Miles W Jin  een a bona fide resident of this State since the  nd that the witnesses, viz.: J. M. Gra  Nopura  re of trust worthy character and that their sta  I further certify that before answering	, Ordinary in and for said County, hereby certify  resides in said County, and has  day of
I, Men & Count  I, Men & Count  In the applicant Miles W Jim  the one is a bona fide resident of this State since the and that the witnesses, viz.: J. M. Cir.  Tophus  Tophus  I further certify that before answering the oath hereon prescribed, and that the full the efore same was signed.	, Ordinary in and for said County, hereby certify  resides in said County, and has  day of
I further certify that the tax digests of	, Ordinary in and for said County, hereby certify  stey resides in said County, and has  the day of 18\$4.9  Locurary and John  attendents are entitled to full faith and credit.  the forgoing questions, the applicant and each witness took text of the affidavits was read to the applicant and witness  County show that applicant
I further certify that the tax digests of	, Ordinary in and for said County, hereby certify  resides in said County, and has  the day of 18\$4.9  Attended to full faith and credit.  the forgoing questions, the applicant and each witness took text of the affidavits was read to the applicant and witness
ATATE OF GEORGIA.  Churolice Count  I, Meer & Count  In the applicant Miles W Jim  een a bona fide resident of this State since the and that the witnesses, viz.: J M Count  Roperate of trust worthy character and that their state I further certify that before answering the coath hereon prescribed, and that the full the efore same was signed.  I further certify that the tax digests of esturned for taxation in his name in 1898.	, Ordinary in and for said County, hereby certify stey resides in said County, and has be day of 1849 to U. L'allow and John atements are entitled to full faith and credit. the forgoing questions, the applicant and each witness took each of the affidavits was read to the applicant and witness took county show that applicant and county show that applicant
ACCEPTATE OF GEORGIA,  Churoscue Count  I, Mules & David  that the applicant Miles w Jim  een a bona fide resident of this State since the nd that the witnesses, viz.: J M Count  Rophus  re of trust worthy character and that their sta  I further certify that before answering the coath hereon prescribed, and that the full the efore same was signed.  I further certify that the tax digests of eturned for taxation in his name in 1896	, Ordinary in and for said County, hereby certify  resides in said County, and has  the day of 1849  Attended to Leolumon and John  attended to full faith and credit.  the forgoing questions, the applicant and each witness took  text of the affidavits was read to the applicant and witness  County show that applicant  Dollars of property.
ACCOUNTY OF GEORGIA,  Charoteae County  I, Mules & David  that the applicant Miles w Jim  een a bona fide resident of this State since the and that the witnesses, viz.: J M County  Profuse  re of trust worthy character and that their state  I further certify that before answering the coath hereon prescribed, and that the full the efore same was signed.  I further certify that the tax digests of eturned for taxation in his name in 1896.  If property, and in 1897.  In my opinion the foregoing claim is	, Ordinary in and for said County, hereby certify  resides in said County, and has  de day of 1849  Atements are entitled to full faith and credit.  the forgoing questions, the applicant and each witness took text of the affidavits was read to the applicant and witness  County show that applicant  Dollars  Dollars of property.
Churofeu Count  I, Mules Count  In the applicant Miles which the applicant Miles which the since the side of this State since the side of the state since the side of the state since the side of the state side of the state side of the	, Ordinary in and for said County, hereby certify  ley resides in said County, and has  ne day of 1849  Atements are entitled to full faith and credit.  the forgoing questions, the applicant and each witness took text of the affidavits was read to the applicant and witness  County show that applicant  Dollars  Dollars of property.
character County  I, Men & County  I, Men & County  In the applicant Miles w Jim  has the applicant Miles w Jim  heren a bona fide resident of this State since the and that the witnesses, vis.: J M Tu  Ropus  Ire of trust worthy character and that their sta  I further certify that before answering the oath hereon prescribed, and that the full the  sefore same was signed.  I further certify that the tax digests of the turned for taxation in his name in 1896  for property, and in 1897  In my opinion the foregoing claim is —  Witness my hand and seal of office, this	, Ordinary in and for said County, hereby certify  resides in said County, and has  day of

FOWER OF ATTORNEY.

STATE OF GEORGIA,

Charles County.

I. Miles W. Zinseles , hereby authorize

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

A heren order at leaston lea

by cheek

Witness my hand and seal this 2" day of gang 1899.

Executed in presence of

A heren order

Witness my hand and seal this 2" day of gang 1899.

Executed in presence of

A heren order

La heren order

Myonelly (1. 8.)

Object Nac. County

Coor sea, 1284.

(For These Already Enrelled.)

INDIGENT SOLDIER'S PENSION

me Mily Milanales

1899.

RECHARD JOHNSON,
Commissioner of Prasina

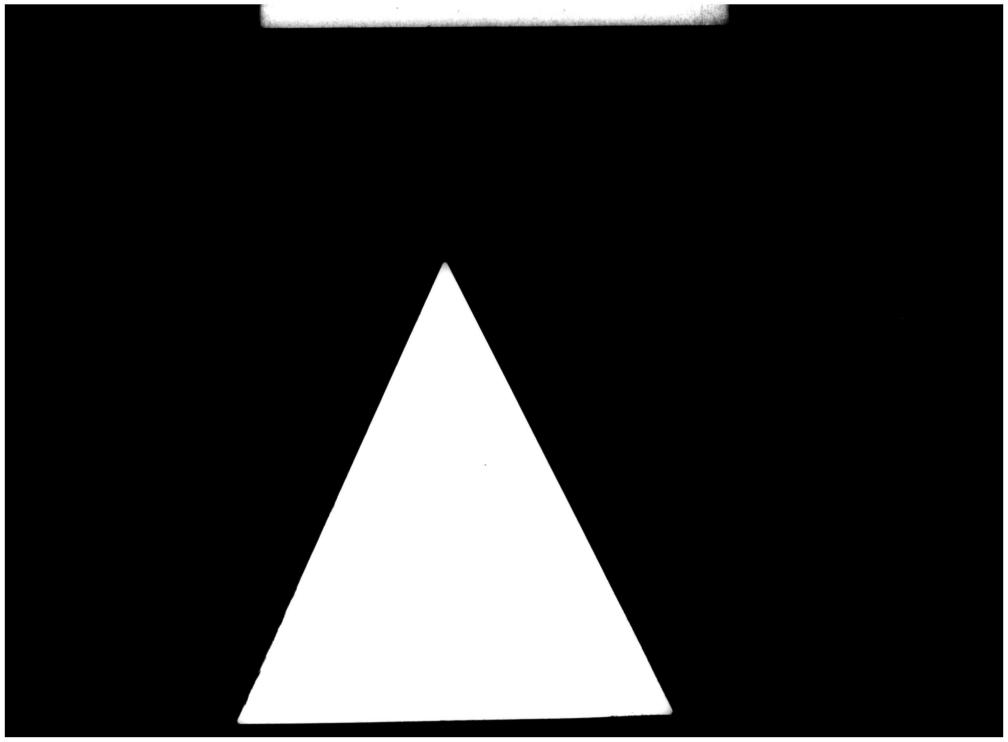
RANT HANDED TO

My Leston Sesse Present A.

# For Applicants Heretofore Allowed Pensions.

STATE OF G	BEORGIA, County.
•	
County State of Ge	appears Miles M. Translay of Cherekov orgia, who being duly sworp, says on oath that he is a bona fide citizen
	County and State, and has resided in said State continuously ever
since the	•
	; that he enlisted in the military service of the Confed-
erate States (or of the	he State of during the way between the States
and served for the te	or of the The in Company of Rush Rossian
The te	the State of) during the war between the States, orm of the states in Company for the Regiment of
CII O	cops ; that his physical condition is as
Alimacho	set verenpentent of awale and
that his property co	possists of the following items finall arrivered of
	Dollars, that by reason of his physical
	y he is unable to support himself by his own exertion or labor, and
	ension but the one herein applied for.
Deponent desi	ires to participate in the benefits of the Act, approved December 15th,
	nendatory thereof, and makes application for the pension to which he
s entitled for the ye	ar 1899. I have heretofore as a resident of chandle of application appending of the year 1895 on a said application was to pro-
county been allowed	a pension for the year 1898 64 a Said off Frank new work of frank
Sworn to and	subscribed before me, this, the of facing 1899.
£ " day	of faring 1899.
	Ordinary.
	· ·
State of Geo	rgia,
chance	County.
Ι,	A. S. County,
	well acquainted with Males W Zinely the
	going affidavit, and am well satisfied that the statements made by him
	are true, and I know he is the individual he represents himself to be
and that he resides i	Given under my official signature and seal, this
da	y of face 1899.
da	y UI
~~~	
Affix your seal	d.l.lum

Nors.—The blank spaces must be filled. Nors.—Affdavit should not be attested before January 1st, 1899.



Cherohee	Co.
No.	of 1907
INDIGENT	
196	61907
Name George It County County Charon	ree
Approved	190
JOHN W. LI	NDSEY,
WARRANT HA	NDED TO
Ordinary will write name o	of Applicant, Company ated above.
Franklin Printing and Publishing C Atlanta, Geo	9/20 /06

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STATE OF GEORGIA,

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Executed in presence of	Witness my hand and seal, this	1	receive and receipt for the pension allowed and request that he remit same to		
ргеневое	hand and		ipt for th		
٩,	seal, thi	at	e pension		
ř			allowed		
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			uest that		
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[L 8.]		1			hereby authorize

I,Coun	4.5	(1) .	bereby authorize
	of		
ceive and receipt for the pension allowed an	nd request that he remit same to	)	March March Control of Charles Brown
Witness my hand and seal, this			
Executed in presence of			
			, .
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		-	
		<del>(Special series se</del>	/0
N. H.	90		ompany or Mg.
SION. 907	190	) TO	ant, Company ere.  Barton, Agr.,  720 / 76
ENSION.	SEY,	VDED TO	bove.
PENSION.  PENSION.  PENSION.	SEY,	HANDED TO	bove.
INDIGENT PENSION.  1907  1907	County CHUSOLL  Co. & Philips Lycard Regi.  Approved  JOHN W. LINDSEY,  Commissioner of Prasions.	WARRANT HANDED TO	A above.

	The state of the second	
govern.	QUESTIONS FOR APPLICANT.	320
om . m	E OF CHORCIA	181
0-	E OF GEORGIA,	Ywed !
	COUNTY COUNTY	12
	simeelf of the Pension Act (Section 1254 Code), hereby submits, his proofs, and after being duly sworn reres to make to the following questions, deposes and answers as follows: at is your name and where do you reside. (Give, State, County and Postoffice.)	362
to avail i	simeelf of the Pension Act (Section 1254 Code), hereby submits his proofs, and after being duly sworn	12.2
1 Wh	ers to make to the following questions, deposes and answers as follows:	2.12
9	erroge W. Tippen Chantes Co. In P.Q. Joelley Ja	122
	0 801 - 1 4.5	9.75
2. How	long and since when have you been a resident of this State?	313
	1 60 Mil - Day 10/10/20	143.
8. Wh	en and where were you born? In Al herster Country Cot, 17"/838	82 2 2
4 Wh	en and where and in what company and regiment did you enlist or corye ?	3 2 2 3
60.0	o. Vally Logion in the fall of 1861, very with when	- 30 30
centi	le sping 1862 was descharged on arch & disability	Ch rece
5. Hov	long did you remain in such company and regiment? I slend with the	West
	anil Core untill fall of 01864. I was then	3 1
Link	owed home by my Commanding office,	13 2
	en and where was your company and regiment surrendered and discharged!	3/27
o. Wh		A 32
	appromatto CHouse Va	1904
	1 August 1	They
7. We	re you present with your company and regiment when it was surrendered? Was on of	1220
8. If i	not present, state specifically and clearly where you were, when you left your command, for what cause	13.5
nd by	2771	326
ny	y offices, being unable to get back to they	62913
9. Hd	much can you earn (gross) per amum by your own exertions or labor? About	7
0. Wh	at has been your occupation since 1865?	
1. Upo	on which of the following grounds do you base your application for pension oz: first, "age and poverty,"	
econd, "	'infirmity and poverty," or third, "blindness and poverty"? Sufficiently & Ovorty	
12. If 1	upon the first ground, state how long you have been in such condition that you could not earn your	
	If upon the second, give a full and complete history of the infirmity and its extent? If upon the third,	
tate whe	ther you are totally blind and when and where you lost your sight? The while of	
D		
Chi		
	And the second s	
18. Wb	nat property, real and personal, or income, do you possess, and its gross value? \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
14. Wh	at property, real of personal, did you possess in 1901, 1902, 1903, 1904 and 1905, and what disposition,	•
	by sale or gift, have you made of same? I had no supported	-
r any, o	by sale or girl, have you made of same.	
15. In	what Copaty did you reside during those years, and what property did you then return for taxation?	
	V Chewfeel county I had no ments	
	w were you supported during the years 1901, 1902, 1903, 1904 and 1905? by What	
Con	will do what the treets of my with	
7. Ho	w much did your support cost for each of those years, and with portion and you contribute thereto by your or income? Court Museur new very success.	
wn lab	or or income? - dout there are very much	
18. Wh	at was your employment during 1901, 1902, 1903, 1904 and 1905? What pay did you receive in each year?	
	Farming what little I did	
	ve you a family? If so, who composes such family? Give their means of support. Have they a home-	*
tead, or	other property! Their ages and now employed:	
	wife	
-	011	
20. Are	e you receiving any pension? If so, what amount and for what disability?	
	to a will the to any hour of the but I think it was	1 ,
21. Ha	ve you ever made an approximation for pension before:	on
22. Ho	w many applications have you ever made and under what class?	
	0	
18	worn to and subscribed before me this the Lewise Williams	A
19	day of tept. 190 6 \ Mork / Applicant.	6.79
	M. Well Ordinary.	
	of Cherokee County.	16 80 1 1 1
		Charles Or

STATE OF GEORGIA,
Packers County.
Personally came before me St. J. Mills + St. J. W. West and
Company of the second
of said County, who, being severally sworn, say on oath that they have examined carefully
1 Ar 7.41
, applicant for pension under Section 1254, Code, and after
such personal examination say that his precise physical condition is as follows:
gentines of him and voucet alle
Sportness of beath due to indigestion
trauble being crome dales find
of Things to be crome affection
Which will curse applicant to suffer on account of a
and that we have no interest in said pension being allowed.
Sworn to and subscribed before me, this the
day of the 1906
Ordinary. St. D. Phomour R.J.
ORDINARY'S CERTIFICATE.
STATE OF GEORGIA,  County.
Ordinary, in and for said County, hereby certify
that the applicant County, hereby certify
The state of the s
that the applicant County, and has been a bona fide resident of this State since the day of the 189#
that the applicant lewas N Tippens resides in said County, and has been a bona fide resident of this State since the day for the state of the least
that the applicant level W Johnson resides in said County, and has been a bona fide resident of this State since the day for the state of the state of trustworthy character, and that their statements are entitled to full faith and credit.
that the applicant level W Johnson resides in said County, and has been a bona fide resident of this State since the day of the state 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
that the applicant levings Wippers resides in said County, and has been a bona fide resident of this State since the day of the statements and that the witnessees, viz.:  And that the witnessees, viz.:  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.
that the applicant  Leving North Period  resides in said County, and has been a bona fide resident of this State since the day of the statements are entitled to full faith and oredit.  If urther 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 digest of Calcultice County shows that applicant returned for taxation in his name in 1901  Dollars of
that the applicant  Leving North Period  resides in said County, and has been a bona fide resident of this State since the day of the state of trustworthy character, and that their statements are entitled to full faith and credit.  If 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.  If further certify that the tax digest of Calculture County shows that applicant returned for taxation in his name in 1901  No Action  Dollars of property, and in 1902  Dollars of property; in 1903
that the applicant less than the state since the day for the statements are entitled to full faith and oredit.  If or there certify that the full text of the affidavits was read to the applicant and witness before same was signed.  If our there certify that the tax digest of Callustice County shows that applicant returned for taxation in his name in 1901.

Ordinary. MOTE.

In my opinion the foregoing claim is.

Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following
words: "You shall true answers make to each of the questions asked of you, and the exidence you shall give will be
the whole truth, so help you God."
 Additional addiavits may be attached if blank spaces are insufficient.
 The weary case the ordinary must certify to the character of the witness, and as to the execution of the proof

,	COUNTY.		
I		47. 4	hereby at
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ve and receipt for the pen	sion allowed and request that he	remit same to	
	sion allowed and request that he		
The second secon	-	by	The state of the s
The second secon	. at	by	enders on a designation to a life adjustment and a second of the second

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NDIGENT PENSION.

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# 30/01/b

WARRANT HANDED TO

JOHN W. LINDSEY,

#### **QUESTIONS FOR APPLICANT**

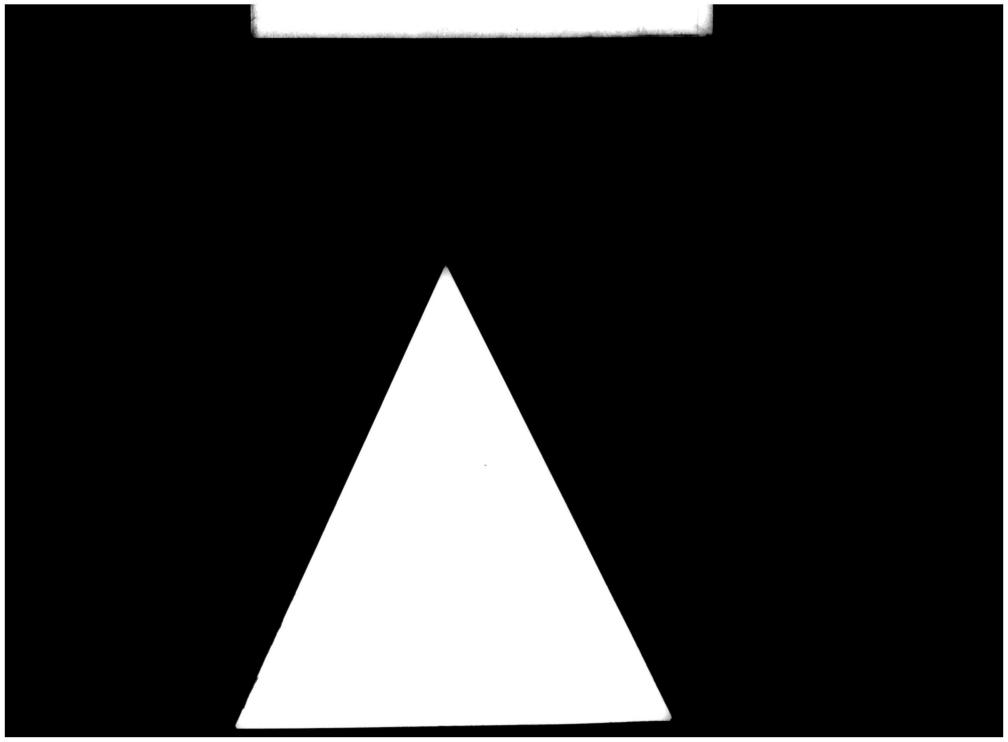
QUESTIONS FOR APPLICANT.	XY
STATE OF GEORGIA,	16
Cherofile COUNTY	Ever
	4 6
to avail himself of the Pension Act (Section 1254 Code), hereby submits, his proofs, and after being duly aworn true answers to make to the following questions, deposes and answers as follows:  1. What is your name and where do you reside; (Give, State, County and Postoffice.)	23
true answers to make to the following questions, deposes and answers as follows:	3.4
Leonge W. Siphen Chenkee Co. In P.C. Joelley La	5 8
	12
2. How long and since when have you been a resident of this State? Coll my life.	3.
	131
8. When and where were you born? When Cherolle Coverity (90/17"/838	3231
Whan and where and in what company and regiment did you enliet or error & first lines to the following the fall of 1861. Starte with them	S 24
60.6. Vailifu togion in the fall of 1861. Stages with them	3 m 3
entile spring 1862 was descharged on Och I disability	3 2 08
5. How long did you remain in such company and regiment?	
maring core untill fall of 01864, I was then	32
Furlowed home by my Chamenauding office	337
6. When and where was your company and pagiment surrendered and discharged?	3/220
appromattor CHouse va	0 263
	130
7. Were you present with your company and regiment when it was surrendered? I was out	The
	33.20
8. If not present, state specifically and clearly where you were, when you left your gommand, for what cause and by whose authority? I was at home or Surface by Buckery	200
I my offices, being unable to get back 6 men	233
9. How much can you earn (gross) per amount by your own exertions or label? Chest	294
10. What has been your occupation since 1865?	1.1
11. Upon which of the following grounds do you base your application for pension of the following grounds do you base your application for pension of the following grounds do you base your application for pension of the following grounds do you base your application for pension of the following grounds do you base your application for pension of the following grounds do you base your application for pension of the following grounds do you base your application for pension of the following grounds do you base your application for pension of the following grounds do you base your application for pension of the following grounds do you base your application for pension of the following grounds do you base your application for pension of the following grounds do you base your application for pension of the following grounds do you base your application for the following grounds do you base your application for the following grounds do you base your application for the following grounds do you be application for the following g	4
second, "infirmity and poverty," or third, "blindness and poverty"?	1
12. If upon the first ground, state how long you have been in such condition that you could not earn your	100
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! Storwers of	1
	3
Nouvell The Frowells and Finer	
13. What property, real and personal, or income, do you possess, and its gross value? I have	3
no Berline	
14. What property, real of personal did you possess in 1901, 1902, 1903, 1904 and 1905, and what disposition,	. 1
if any, by sale or gift, have you made of same? I had no what	9
18. In what County did you reside during those years, and what property did you then return for taxation?	
Mr Quentel County I had no whote	
16. How were you supported during the years 1901, 1902, 1903, 1904 and 1905? What	4
17. How much did your support cost for each of those years and with portion by your cost this though the	
17. How much did your support cost for each of those years, and what portion and you contribute thereto by your own labor or income? Christ Chinese Market were Much	
18. What was your employment during 1901, 1902, 1903, 1904 and 1905? What pay did you receive in each year?	3
tamures what wille I did	3
19. Have you a family? If so, who composes such family? Give their means of support. Have they a home-	1
stead, or other property? Their ages and how employed? Myself and	1
wife /	• 3
1 - 1	
20. Are you receiving any pension? If so, what amount and for what disability?	
The state of the s	- 4
	ort.
21. Have you ever made an application for pension before? Due best I think it was to	ort.
21. Have you ever made an application for pension before? Due best I think it was 12.  22. How many applications have you ever made and under what class?	ort.
21. Have you ever made an application for pension before? Due best I think it was to	ort.
21. Have you ever made an application for pension before? The best I think it was 12.  22. How many applications have you ever made and under what class?	ort.
21. Have you ever made an application for pansion before? Due book I think it was to 22. How many applications have you ever made and under what class?  Byorn to and subscribed before me this the Henry Manager of the Subscribed before me this the	ort.

STATE OF GEORGIA,	COUNTY. Spey	1	hereby authorize
to receive and receipt for the	pension allowed, and r	request that be	e remit same to
Executed in presence of	Gev. M	ay of Sur The property	
	J		
NOIGE)	Chesses Chesses	1907. Y.	TO
No. 7994 INDIGENT	Cheraltic	HUS 20	AREANT HANDED TO
	County A	*	*

LAU WILLIAMIS UPUPIALAND WPPAMPA LEUSIAUS
State of Georgia.
bl. In /
Changel County.
Personally appears Set. W. Sippers of Churches
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 18.39; that he is 68 years old
and by occupation a Farmer, that he enlisted in the military service of the Con-
federate States (or of the State of Stary) during the war between the
States, and served for the term of 2 min Company 6, of th Regiment
of Phillipp Legion ; that his physical condition is as
follows: age Infirmity and poverty
that his property cousists of the following items: Small and
Home hold
of Thursday and the same of th
of the value of Juanty fire 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 the bearing to which he
County, been allowed a pension for the year 1906.
Sworn to and subscribed before me, this the
day of Jan 1907.
M.A. Melo Ordinary.
Ordinary.
State of Georgia,
Cherokee County. )
I, Ordinary of said County,
do certify that I am well acquainted with George W. Tippen
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.
N. G. We ble
Ordinary Church County.
Ordinary County.
Name The blank seems must be #IIad

Norz.—The blank spaces must be filled.

Norz.—Affidavit should not be attested before January 1st, 1907.



Q- Ks+	926263
WIDOW'S	APPLICATION
Husband Was	in Her Own Right When on the Pension Roll Georgia.
County Name NUTS-18	Age .
Widow of Story	e Our Coppose
Regiment	etr. Da . No
Date of Husband's Date of Marriage	May 12 Pm 1862
Approved	a collect

# Certificate

STATE	
OF	
GEORGIA	

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and credit.	ar
davits, and that they are truthful and trustworthy and their statements are entitled to full faith	da
marriage, and that both the foregoing were duly sworn by me before signing the respective aff	m
January 1st, 1920; that I also know J. B. D. LION the witness as to	Ja
she represents herself to be, and that she is continuously a bona fide resident of said County since	sh
know Mrs. MRS.RHODY TIPPINS the applicant for pension; that she is the person	kı
I, FRANK P.BURTZOrdinary of said County, do certify that I	

(SEAL OF ORDINARY)

STRUM CHEROKEE

WA TO WE WELL

OCTOBER

192 5.

Given under my hand and official seal of office this

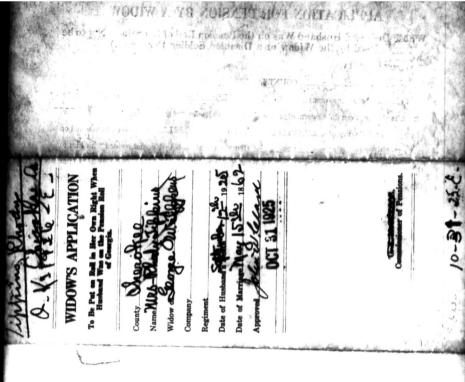
Instructions.

Before any questions are answered the Ordinary shall swear applicant and the witness in the following words:

You solemnly swear that you will true answers make to each of the questions asked you sad the evidence
you shall give will be the truth. So help you God.

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#### Ordinary's Certificate

STATE OF GEORGIA, CHEROFFE

	County
(SEAL OF OR	DINARY) Ordinary,
Given under my	y hand and official seal of office this 20THiay of OCTOBER 192 5.
and credit.	*
davits, and that the	ey are truthful and trustworthy and their statements are entitled to full faith
	both the foregoing were duly sworn by me before signing the respective affi-
January 1st, 1920;	, the witness as to
she represents herse	elf to be, and that she is continuously a bona fide resident of said County since
Allow Mars.	RHODY TIPPENS, the applicant for pension; that she is the person
	NK P.BURTZ Ordinary of said County, do certify that I
CHEROKEE	COUNTY.

Instructions.

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words:
"You 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. Additional affidavits may be attached if blank spaces are insufficient,

4. Children's may be made before the Ordinary of the County of residence.

4. Children's may be made before the Ordinary, 1881, are entitled.

5. Attach certified complete of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

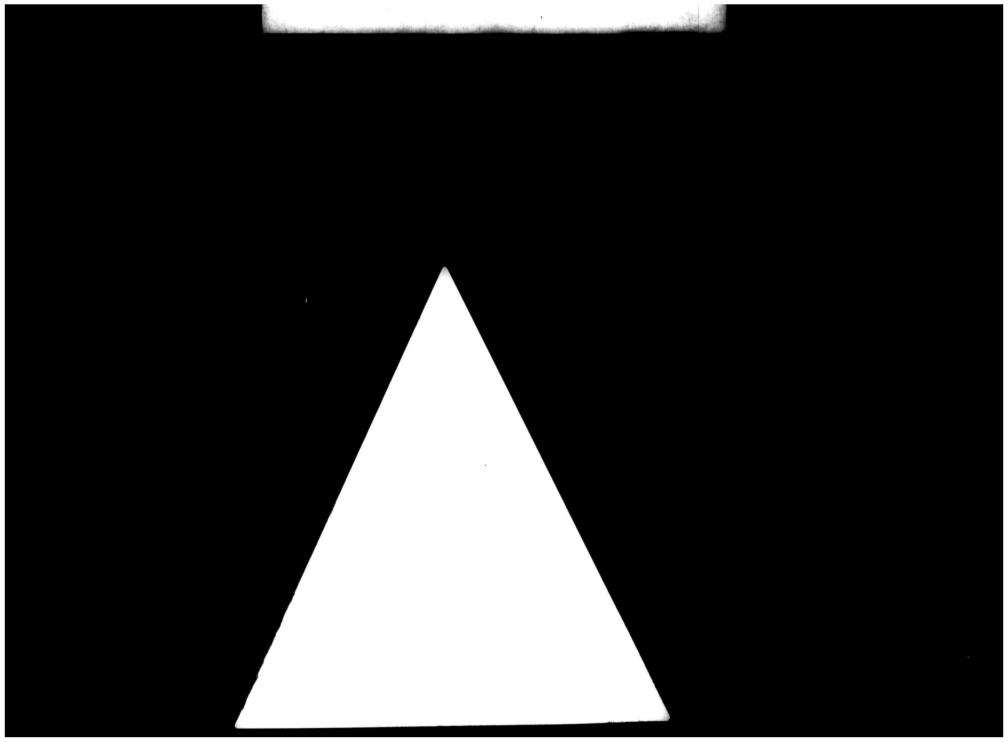
6. Wiclows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because Disabled Pensioners made no proof of service and were not required to do so.

#### APPLICATION FOR PENSION BY A WIDOW

Whose Deceased Husband Was on the Pension Roll of Georgia. (Not to be Used by the Widow of a Disabled Soldier Pensioner.)

STATE OF GEORGIA,
CHEROKEE COUNTY.
Personally before me comes MRS. RHODY TIPPENS of said County,
who, after having been duly sworn, says that she is the widow of GEORGE W.TIPPINS
to whom, in the County of CHEROKEE State of GEORGIA she was married on
the I5TH day of MAY 1862, and that she remained his wife, and resided with him to
the date of his death & SEPT 12TH 19.25 and that she has not since his death remarried; at
the time of his death he was a resident of PICKEMS County, in said State
of Georgia, and he was on the SERVICE SOLDIER Pension Roll of the State and paid a pension
of \$ 100 · in CHEROKEE County for 19.25 (per annum), on account of being a soldier in
Company Regiment (Volunteers or State Militia).
That she is now a bona fide resident citizen of said State of GEORGIA and she
has, continuously, resided there ALL LIFE.
Sworn to and subscribed before me, this the
From Ordinary
(SEAL OF THE ORDINARY.)
The state of the s
Affidavit of Witness to Prove Marriage and Date of Death of Husband.  STATE OF GEORGIA.  CHEROKEE
a responsible and truthful person, residing in said County, who after having been duly sworn, says
hat of deponent's own personal knowledge, Mrs. HODY TIPPENS, who made the foregoing
iffidavit, is the lawful widow of GEORGE W.TIPPENS who died in PICKENS
County in said State of GEORGIA on the 12TH day of SEPTEMBER 19 25,
and that she has not since remarried; that she became the wife of GEORGE W.TIPPENS on
he 15TH day of MAY , 18 62; that she and he had resided together as husband
nd wife, continuously, since FIRST day of JANUARY 1825., and that
was the same man who was on the pension roll of said State GEORGIA from CHEROKEE
GEORGIA I KNEW THIS COUPLE AS HUSB.
Sworn to and subscribed before me, this the
20TH day of OCTOBER 1925.
Drawle & Burty Ordinary C. B. Moss.
CHEROKEE

(SEAL OF ORDINARY)



INDIGENT PENSION 1897.	Firms sy land and Breezed in presence	STATE OF GEORGIA  A how the 1  Then, A . Mark  To make and manife for the pensite
Name farmer Mobile Tollier T. County Charles C. Approved 7/1 1897.	st leaston la by a least this 30 day of Deel of James, M	GIA,  County.  My Leaf h. of Ollar  pension allowed and request that he remit sa
WARRANT HANDED TO-  ON OWN  ON V. HARRING, STATE PROTES, ATLANSA	Lash  1897.  Wata Best  And	hereby authorize

STATE OF GEORGIA,

Aboache & County.

1. fames Il Fall of Illanta ba

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

witness my hand and seal this 20 day of Dec 1897.

Executed in presence of

Ale lawy and and seal this 20 day of Dec 1897.

same ?.	PENSION	Tolland.	1897.	NA W	THEORY ALASTA.
00 Ser. 12 Les	INDIGENT PENSION 1897.	James Mile	1/2	WARRANT HANDED	1/13/9/

	STATE OF GEORGIA,
	County.
	James M. Yalkerd of said State and County, desiring
	to avail himself of the Pension Act approved December 15th, 1894, 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) Windley Meal.
	2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State?
	3. When and where were you born? Alas Borned Mag 1 1834 m the state of ba
	<ol> <li>When and where were you born? Allas Samos May 1 18 4 mm 18 2 18 18 18 18 18</li> <li>When and where and in what company and regiment did you enlist or serve 22 Sparal 1861</li> </ol>
	in cheaples burnt has & Intested in sompony B, sat
j	Sa. Rost,
9	5. How long did you remain in such company and regiment? from home I smitisted in office 1862 lette Surrender of the army in 1865
D >	
> n	6. For how long a period did you discharge regular military duty? a best & your
Ë	7. When, where and under what circumstances where you discharged from service?
1	at Sugarandon of the State of No. 6, africe 1865
•	8. What is your present occupation? Day what I aan on faran
5	9. How much can you earn (gross) per annum by your own exertions or labor? a local small a mount
	10. What has been your occupation since 1865? Transang
ם ח	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"?
5	12. If upon the first ground, state how long you have been in such condition that you could not earn
į	your support? If upon the second, give a full and complete history of the infirmity and its extent? If
7	upon the third state whether you are totally blind and when and where you lost your sight?  Informate and, Powert Flores abronso, barech
4	und, Pares, also and Brapes, fied feet and
í	Lago Swell
D	13. What property, effects or income do you possess and its gross value? Small a manait
ť	14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any,
3	did you make of same? m 1894 1895 Ire turned one Sot of Sandt some
>	The Ake Sand I did not has per hat reverted Back for the owner the Atook I have die passes of them to get Something Ladive on 15. In what County did you reside during those years and what property did you then return for taxation?
d	15. In what County did you reside during those years and what property did you then return for taxation?
>	m cheretoe, 60 3 rolumow prospert as a bove State
4	16. How were you supported during the years 1895 and 1896? Ded what becased and
	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 & Same 60 ex 45 dellas
	18. What was your employment during 1895 and 1896? What pay did you receive in each year?
	Oid all I sould on form married no pa
	19. Have you a family? If so, who composes such family? Give their means of support? Have they
	a homestead? have wafe this Morraica aboldren all
	Poor have no home of their Curo
	20. Are you receiving any pension, if so what amount and for what disability?
	Tocoprell on pansin
	Sworn to and subscribed before me this the
	day of Sec 1896 Applicant,
	Ordinary.
	of charehoe County.

STATE OF GEORGIA.	
charokes County.	STATE OF GEORGIA,
folin, W. Me mal , of said State and County, having been presented	Chuster County.)
	Personally came   before me, Pro. / Latesand
as a witness in support of the application of Annes M. talkert for pension under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the	C Picial , both known to me as reputable physicians
following questions, deposes and answers as follows:	,
1. What is your name and where do you reside of the It Mexica	of said county, who being severally sworn, say on oath that they have examined carefully
I reside in chewhoe learns	acres M Selders, applicant for pension under the Act of 1894, and after
2. Are you acquainted with finels Al Yalbort , the applicant, is of	such personal examination say that his precise physical condition is as follows:
how long have you known him? I am hower knowshin Jame 85 m 40,9000	This physical Condition is such that
3. Where does he reside, and how long has he been a resident of this State?	he Comed laribe lack a support for timely
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you	for the fact of cour, has been under tradunt ( bots)
know this? I Rree he Level in compederate any	frethe fact I'm year, his also a suffer from Files
I So seed with besieve	We further say on oath that the physical condition of applicant renders him unable to labor at any
5. When, where and in what company and regiment did he enlist? 201 aprel 1862 for	work or calling sufficient to earn a support for himself, and that we have no interest in said pension being
chore how beaut ba he solished in Bompe R SU Sa , Toget	
6. Were you a member of the same company and regiment?	allowed.  Sworn to and subscribed before me, this
7. How long did he perform regular military duty, and what do you know of his service as a Confed-	Sworn to and subscribed before me, this
erate soldier, and the time and circumstances of his discharge from the service? Ne wee mi	the 90 day of 600 1897.)
erate soldier, and the time and circumstances of his discharge from the service.	the day of Deal 1897.)  A belower Ordinary.
So rice three years he was as good or Saldien as	
was in the work turned toll the Surrender	
8. What property, effects or income has the applicant? (Give your means of knowledge.)	ORDINARY'S CERTIFICATE.
Nas a Vere Small a mar at the Household	
9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if	STATE OF GEORGIA,
	chowhoe County.
any did he make of same? He Cuned Your Personal Peroforas that	N belower to , Ordinary in and for said County, hereby certify that
he Roser used as a finance dand that he returned no vorted sach to the word as he miles pointed same 10. What is the applicant's occupation and physicial condition?	the applicant famiss M. Talles A resides in said County, and was a bona
- does what he can in poon from his looks bee's	fide resident of this State on the first day of January, 1894, and that the witnesses, viz :
Very feable is not able to Labor for a terpport.	f.M. Bakes, 6, Prokell and folu. 11. Merran well
11. Is the applicant unable to support himself by labor of any sort, if so, why?	are of trustworthy character and that their statements are entitled to full faith and credit.
he is serieble to Saber for a Suspiport have	I further certify that before answering the foregoing questions, the applicant and each witness took
Broke down benevalf & has a camplication of disrage	the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witnesses
12. How was he supported during the years 1895 and 1896? We did all heavens	before same was signed.
13. What portion of his support for these two years was derived from his own labor or income?	I further certify that the tax digests of cheaches County show that applicant returned for taxation in his name in 1895, Asso harmlass dollars
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension	of property, and in 1896, Love of property.
under the Act of December 15th, 1894 " hours Old and fooble	In my opinion the foregoing clain is all made in good faith.
and Wealth is Generall, Bad	Witness my hand and seal of office, this 30th day of Seemals 1897.
	This NO ONDORTY WORTH A le lecens Ordinary
15. What interest have you in the recovery of a pension by this applicant?	this is avery worth & be become Ordinary to serve Property No turnod of abovehow County.
Sworn to and subscribed before me, this	M to horm, ordanars) NOTE.
the day of dee 1897. The Witness.	Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answers make to such of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God." Additional addavits may be statehed; if blank spaces are insufficient.
A, b, barrel Ordinary.	

	POWER	OF ATTO	DRNEY.		e, and
STATE OF		}			
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13	receipt for the per				mit same to
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,	my hand and seal thi	a 2 da	y of	my	1899.
	in presence of	, ,	zufi.	· Marke	rt (L. S.
	Com	} X	m	isrk	(L. 8
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	<u> </u>	¥	188	siens.	
<b>2</b>	<u> </u>	James m 2068e		S,	
(For Thase Aircady Earelled No. /4/6	INDIGENT IDIER'S PENSI	. 3	WARRANT ISSUED	RICHARD JOHNSON Commissioner of	WARRANT HANDED TO
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30 V S	9 24 9	200	RR	HAR	RRAI
No.		8	₩ ]	CIC	* 2
Fe				-	WARRANT HANDED TO
	8	Name			<b>+</b>

Month James M. (For Those Aiready Enrolled.) NO. 2 85

INDIGENT

SOLDIER'S PENSION, Name of words Al. Folkint County chows Roll 1258. WARRANT ISSUED

RICHARD JOHNSON,

Omnissions of Pres. WARRANT HANDED TO 120

GODE SEO. 1254. nedate

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, County.
Personally appears farmed. M. Talbort of characters  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 loy 1864; that he is 64 years old and by occupation a farmed; 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 system in Company & of 44 th Regiment of that his physical condition is as follows:    Real Characters Since he Cite and a Lance of Broak dearn set able to work
that his property consists of the following items I would a musint
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 1898. I have heretofore as a resident of characters occurry been allowed a pension for the year 1897.  Sworn to and subscribed before me, this, the day of cany 1898. I have heretofore as a resident of characters of the year 1897.  Ordinary.
State of Georgia,  Cherence County.  I, A County Ordinary of said County, do certify that I am well acquainted with fasces, M. Jabeat 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 th
day of facety 1898.  After pour pour here.  Ordinary cherettee County.  Note.—The blank spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cherokee County.
Personally appears James M. Polbert 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 May 1834; that he is 64 years old and
by occupation a Saxuer; that he enlisted in the military service of the Confed-
erate States (or of the State of Lorgia ) during the war between the States,
and served for the term of 3 years in Company 3, of 34 th Regiment of
and served for the term of 3 years in Company B, of 34 th Regiment of Georgia Voluntures; that his physical condition is as
follows: Physically disabled to do much Lator
Has Chronic Diarhoe a and also has Pyles
and read able to do received work
that his property consists of the following items Household + Hitch
Lucility.
Junitaria.
A 01-
of the value of Righter 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 1899. I have heretofore as a resident of Cherokie
county been allowed a pension for the year 189 g
Sworn to and subscribed before me, this, the las mx rolbert
allen & Com Ordinary.
allen & Charles
Ordinary.
2:
State of Georgia,
Cherofice County.
I, allen C Commen Ordinary of said County,
do certify that I am well acquainted with Jas M. Felest 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 Jacry 1899.
Affir Pour Cler County.  Ordinary Cher oke County.
Ordinary Cher okes County
County.

NOTE.—The blank spaces must be filled.

NOTE.—Affidavit should not be attested before January 1st, 1899.

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Ames M.

olbert.

#### POWER OF ATTORNEY.

bhene had County.
I, J. M. Folbort hereby authorize  N. 6. born. conday of Cheroko Corney
to receive and receipt for the pension allowed and request that he remit same to at Banton ba
Witness my hand and seal, this y day of fame 1901.

Executed in presence of A g construct

SOLDIER'S PENSION. Glant, Barnes M. (For Those Aiready Enrolled.) No 3692. INDIGENT 1901.

WARRANT HANDED TO

JOHN W. LINDSEY,

WARRANT ISSUED

Name

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,  County.
personally appears James M, tosbert of Cherence.
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 18.14; that he is 65 years old and
by occupation a farmer; that he enlisted in the military service of the Confed-
erate States (or of the State of) during the war between the States,
and served for the term of J year in Company & , of Jk, th Regiment of
: that his physical condition is as
follows: his austration is very Rad bus Sune traile
follows: his auntition is very Bad has Sung traible
The state of the s
that his property consists of the following items eine of the second of
from a hold week Retering and setting
The probability of the control of th
of the value of SO 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 such 200
county been allowed a pension for the year 1895
Sworn to and subscribed before me, this, the day of fan 1900.
day of
Ordinary.
State of Georgia,
State of Georgia, County.
I. A f. 1222 Ordinary of said County,
do certify that I am well acquainted with fuser distalkent 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 1900.
total hors.
0 6,6, 200
Ordinary Place County.
Nors.—The blank spaces must be filled. Nors.—Affidavit should not be attested before January 1st, 1900.
14

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, County.
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
States, and served for the term of Incompany O, of Incompany O
follows: Physical and little is Bad not ville
that his property consists of the following items where had a facountaine
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 benefits.  Sworn to and subscribed before me, this the day of factorial and the Acts and Santa and
STATE OF GEORGIA, County.
I, — Ordinary of said County, do certify that I am well acquinted with for Jack of 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 few 1901.  N. C. Corrections  Ordinary chorus for County.
Note —The blank spaces must be filled.  Note — Affidavit should not be attested before January 1st, 1901

STATE OF GEORGIA,  khorokes County.	411.0
I, fames M. Solbent hereby authorize  1. 6. benevoordry of behanded la	,
to receive and receipt for the pension allowed and request that	
by at Barton La	
Witness my hand and seal, this /4 day of	1902.
·	[L. S.]
L. L. la see C. Ordsy	
7	

POWER OF ATTORNEY.
STATE OF GEORGIA,
Lehenoher County.
I, & M. Yalbert hereby authorize
Mrs. A. Wright of the attenta has
to receive and receipt for the pension allowed and request that he remit same to  A. C. Lower, crary at banker ha:
Witness my hand and seal, this " day of fang 1903.  J. Mary albert [L. S.]
Executed in presence of
A b. bern erdig

1903.

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of of	,
3	6

SOLDIER'S PENSION (FOR THOSE ALREADY ENROLLED.) 4382. INDIGENT No.

JOHN W. LINDSEY,
Commissioner of Pensions Regiment 34 ha Name J. W. 3000001 WARRANT HANDED TO WARRANT ISSUED cherohes 5/10

Regiment 84 " Sea.

WARRANT ISSUED

Games. M. 30 Cool

Cherohoe

County Name

SOLDIER'S PENSION

1902.

INDIGENT

Tolkert, James m.

( FOR THOSE ALREADY ENROLLED. )

No. 3 6 × 5~

JOHN W. LINDSEY,

411

WARRANT HANDED TO

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

Personally appears Jume M. Telbent, of Chenchee
reisonally appears fulling the section of to her or les
County, State of Geoogia, 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 theday of184\(\psi\); that he is \(\left(\psi\) years old and
by occupation a farmen that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served for the term of Ahreen year in Company a., of the Regiment
of la vae ; that his physical condition is as
of be val ; that his physical condition is as follows: Broke hum benerally, have chronic
Busel Trusber und a heneral Breake dus
that his property consists of the following items Sanall amount
of the value of Javear 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 bhoro here
Super to and subscribed before we this the
Sworn to and subscribed before me, this the family the Tolbort
2 & B, G PON Ordinary.
Ordinary.
STATE OF GEORGIA,
I. S. C. County, do certify that I am well acquainted with fames M. Talbert
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
Affix your d. b. Borne,
Ordinary chembles County.
Norz.—The blank spaces must be filled.  Norz.—Affidavit should not be attested before January Ist. 1902.

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF	GEORGIA,	
Church	County.	
Personally app	cars & M. Gelbert, of Cherohea)	
County, State of Ge	sorgia, 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 May 1854; that he is 65, years old and	
by occupation a_#	, that he enlisted in the military service of the Con-	
	of the State of) during the war between the	
States, and served f	or the term of J was in Company Q. of 4 th Regiment	
of barre	in Company A., of J4 th Regiment; that his physical condition is as	
follows:	wohe down not able to work	
TOTTOMA .		
and the second of the second o		
that his property of	mists of the following items: Small a mant y	
- Carre ha	12 haves,	
Mark to the second seco		
	Dollars, that by reason of his physical	
	rty he is unable to support himself by his own exertion or labor, and	
	pension but the one herein applied for	
	res 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 y	rear 1903. I have heretofore as a resident of cherohow	
county been allowed	a pension for the year 1502	
Sworn to and s	abscribed before me, this the	
	fung 1903. O' mal	
Sworn to and subscribed before me, this the  y day of frey 1908.  A le frey Ordinary.		
	GEORGIA,	
- bher	County.	
I,	6.60 Ordinary of said County,	
do certify that I an	a well acquainted with f. M. Falbert	
the applicant in the	foregoing affidavit, and am well satisfied that the statements made by	
him in his said affid	avit are true, and I know he is the individual he represents himself to	
be and that he resid	es in this County.	
	Given under my official signature and seal, this	
	day of Almy 1908.	
Affix	day of gary 1908.	
Beal here		
~~	Ordinary Cherehee County.	
	Nora.—The blank spaces must be filled.  Nora.—Affidayit should not be attested before January lat, 1908.	
	FILL ROLL ALTORNEY	

STATE OF GEORGIA,	COUNTY. bereby authorize
	of allanta ba
to receive and receipt for the	pension allowed and request that he remit same to
- 1. le lecre . L. Ora	try at Cartine bee.
Witness my hard and seel this	s /2 day of Just 1904.
Witness my hand and sear, this	1 the sold de
Executed in presence of	- 1. Mitalioent [L. 8]
	x *
in to the sees that	7
	1394.
S (SION	1 Acc. 1904.
ENBOLLED.)  VT  ENSION	UED
DENSION	iment? 4 fea.  188UBD  188UBD  188UBD  ANDED TO  ANDED TO  A.
SCOS BENSION  SCOS  IGENT  SPENSION  SPENSION	PAR BORL  Regiment I fa.  Regiment I fa.  7 / 8 1944.  Vermitationer of Penators  NT HANDED TO  7 / 5  Ourselver Advance.  on State Private.
E ALREADY EMPOLLED.  SANS BENSION  SR'S PENSION  BOA.	Regiment of La.  Regiment of La.  Regiment of La.  7/8 1944.  Ommissioner of Pensions  REANT HANDED TO
No. SOCS BROLLED. No. SOCS BROLLED. No. SOCS BROLLED. INDIGENT INDIGENT INDIGENT	G. W. LONGER L. & La.  Regiment. & La.  Regiment. & La.  J. ( S. 1904.  J. ( S. 1
FOR THOSE ALREADY ENROLLED, No. STOS INDIGENT INDIGENT IOOO A.	County Cherry Reserved  Co. A Regiment I that  LOHN W LINDSEY.  WARRANT HANDED TO  Constitution of Preserved  WARRANT HANDED TO  Constitution Share France.

· W. & more

#### POWER OF ATTORNEY.

STATE OF GEORGIA,  County.  I. Jollust hereby authorize  To receive and receipt for the pension allowed, and request that he remit same to							
by	***************************************		at at				
	ecuted i	ny hand and seal		X Mis	Hol.	best	[L. S.]
Character Coor section 1284. (FOR THOSE ALREADY ENROLLED.)	No. 56 47	SOLDIER'S PENSION	Name J.M. Jolbert	Co. K. Regiment 34	FLB 23 1906.	JOHN W. LINDSEY, Commissioner of Pensions.	WARRANT HANDED TO  (C)  ORG. V. RAMBON, ANALOR, FOR EVAT PREFER, ATLASTA.

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## FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	
County.	
Personally appears of Mi Follort of Cheroker	
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citize	11
and resident of said County and State, and has resided in said State continuously eve	r
since the day of 1834; that he is 40 years old an	d
by occupation a Famen , that he enlisted in the military service of the Cor	1-
federate States (or of the State of ) during the war between the	
States, and served for the term of Tyears in Company & of Uf th Regimen	
of Lee ; that his physical condition is a	as
follows: not able to Lubar his Ling brande	
that his property consists of the following items: Small amount of	
House hard formatione	
of the value of Dollars, that by reason of his physic	
condition and poverty he is unable to support himself by his own exertion or labor, an	ıd
that he receives no pension but the one herein applied for.  Deponent desires to participate in the benefits of the Act, approved December 150	1.
1894, and the Acts amendatory thereof, and makes application for the pension to which l	
is entitled for the year 1904. I have heretofore as a resident of Che. whele	
County been allowed a pension for the year 1523	
Sworn to and subscribed before me, this the	
12 day of face 1904.	
2. 6.6 ext & Ordinary	
STATE OF GEORGIA,	
Cherotei County.	
I, 20.6.6. 2012 Ordinary of said Count	у,
do certify that I am well acquainted with _ J.M. Follow . 1	
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 himse	elf
to be, and that he resides in this County	
Given under my official signature and seal, this	
day of	
Anti-	
here Ordinary Cody	y.
Norm. The blank spaces must be filled.  Norm Affidayla should not be attented before Japanary (st. 1994).	

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Charotree County.
Personally appears J. M. Tolbert of Churche
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 1834; that he is years old and by occupation a farmer, that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served for the term of 3 in Company B, of 34 th Regiment
States, and served for the term of 3 in Company B, of 34 th Regiment of ; that his physical condition is as follows:    Partition   Partit
follows: Infirmity age and
poverty
that his property consists of the following items: House Nold
24
of the value of Dollars. I am now earning by my labor, Molling Dollars per month. That by reason of his
physical condition and poverty he's unable to support himself by his own exertion or
labor, and that he receives no pension but the one hereit 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 Cheroflee
County been allowed a pension for the year 1904.
Sworn to and subscribed before me, this the \ \ My Solbert
2 day of Jan 1905. Some Ordinary.
STATE OF GEORGIA,
Chirofice County.
I, W. J. Meta Ordinary of said County
do certify that I am well acquainted with & M Talbest
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 1906,
I Triba
Ordinary Churches County.

Norn.—The blank spaces must be filled. Norn.—Affidavit should not be attested before January 1st, 1905.

STA	TE OF GEORGIA,  Overelle County  I, I, Inda	Tolber Center	hereby authorize
to re	ceive and receipt for the pension	n allowed, and request that	he remit same to
•	WITNESS my hand and seal, this_	2 day of ten	1906. Les [L. S.]
	Executed in the presence of		

Coor Berrior 1294.

# SOLDIER'S PENS INDIGENT No. 6026

STATE OF GEORGIA,	er .
W. & M. Polber	, hereby authorize
to receive and receipt for the pension allowed,	and request that he remit same to
WITNESS my hand and seal, this	day of 2007.
1	Mary lbest [L. S.
Executed in presence of	

JOHN W. LINDSEY, Commissioner of FEB 13 1907.

COOR SECTION 1254.

(FOR THOSE ALREADY ENROLLED.)

No. 2867

SOLDIER'S PENSION INDIGENT

m Inbent 1908.

Shewilles

WARRANT ISSUED FEB

JOHN W. LINDSEY.

WARRANT HANDED TO

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Chentles County.
Personally appears J. M. Polber of Cherifice
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 theday of1842; that he is 73 years old and
by occupation a Fann, that he enlisted in the military service of the Con-
federate States (or of the State of 99 ) during the war between the
States, and served for the term ofin Company 13, of 3# th Regiment
and the state of t
follows: Aufurnity and fiverty
ionows.
Management of the second secon
that his property consists of the following items: Wous Chold
that his property consists of the following items:
Bearing the state of the Manufacture of the Control
7. 7. (1:
of the value of the value of Dollars. I am now earning
by my labor, North 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 Churoflee
County, been allowed a pension for the year 1905.
Sworn to and subscribed before me, this the
Mat. Victa Ordinary.
V
State of Georgia,
County.
I, W. J. Proble 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 affidayit 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 1906
M. J. Mach
Affix Tour The Comment of the Commen
ordinary County.
Norn.—The blank spaces must be filled.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
Charles County
Personally appears and M Tolbert of Chentree
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 May 1834; that he is years old
and by occupation a Harry, that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served for the term of in Company 13, of 14th Regiment
of ya god ; that his physical condition is as
follows; Infirmity and proverte
that his property consists of the following items: Nuthing
of the value of Dollars. I am now earning
by my labor,
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 applies on for the pension to which he
is entitled for the year 1907. I have heretofore, as a resident of tohur week
County, been allowed a pension for the year 1906.
Sworn to and subscribed before me, this the
day of 1907.
Ordinary.
State of Coords
State of Georgia,
County.
IOrdinary of said County,
- Annual Control of the Control of t
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
day of
The same to be the same of the
ABI
Ordinary County.
Norm The blank apages must be filled.

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

Tolhert, James M.

CHEROKEE

County

1925

#### Application for Pension **Due Deceased Pensioner**

(UNDER ACT 1919)

192 6, Date of Death

Approved and ordered paid

Amount &

1925 amissioner 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



Sold to Mr W A Adams, For the Funeral Expense J M Tolbert

TERMS

Casket 125.00 Service 10.00

135 00

GEORGIA-CHEROKEE COUNTY;

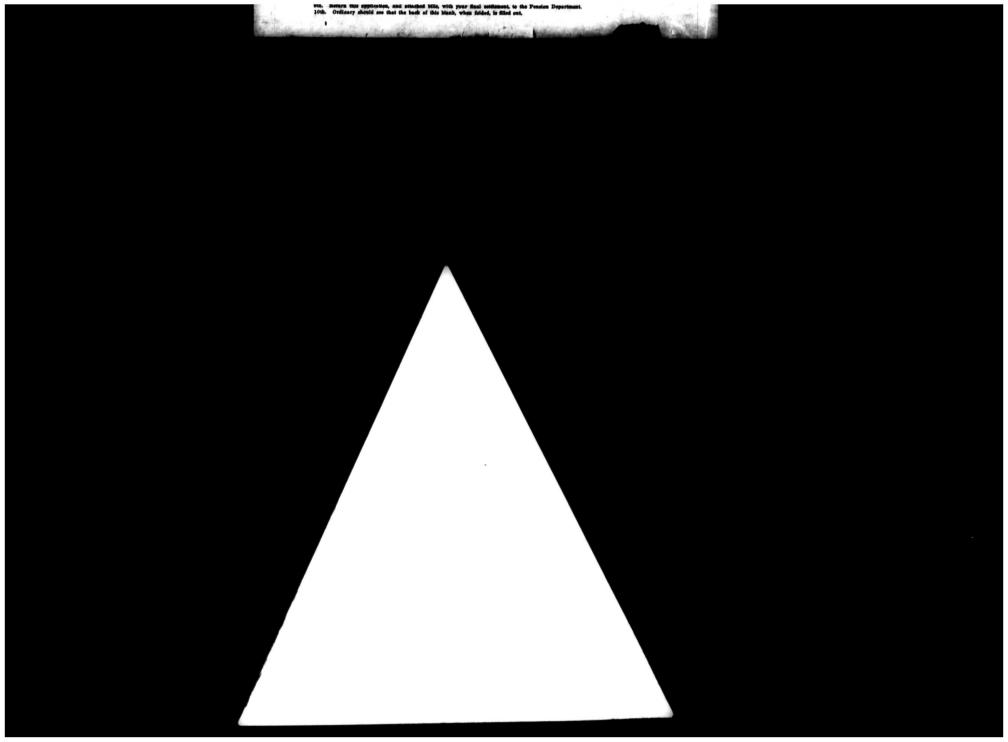
HE ABOVE AND FOREGOING ACCOUNT IS RENDERED FOR FUNERAL PENSES OF JAMES M. TOLBERT WHO DIED WITHOUT OWNING SUF-

SWORN TO AND SUBSCRIBED BEFORE ME,)
THIS THE 6TH DAY OF MAY 1926.

ORDINARY.

# 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, County.
Personally before me, the Ordinary of said County, comes
Of said County, who, after being sworn, on oath
says that he knew JAMES M. TOLSERT 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 FIRST day of MAY 192, and that
a Pension of THO HUNDRED AND SIXTY (\$ 260.00 ) Dollars was due pensioner and
unpaid at the time of pensioner's death, and that pensioner left no widow or dependent children surviving,
and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of
per sworn statements fully and completely ITEMIZED hereto attached.
Sworn to and subscribed before me  This SIXTH day of MAY  Tough Courts  CHEROKER
(Seal of Ordinary)
CERTIFICATE OF ORDINARY GEORGIA, CHEROKEE County.  I. FRANK P.BURTZ , Ordinary of said County, do certify that I personally know, 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 knewJAMES M. TOLBERT
was the same person whose name appears on the Pension Boll of CHEROKEK County, and
vas paid a Pension of ONE HUNDRED AND FORTY (\$ 140.00 ) Dollars
n said County for 192 5., and I now believe said pensioner to be dead; and that the instructions at the foot
f this voucher have been carefully observed in making up this voucher and the bills which are attached
ereto.
Given under my and and official seal, this day of 192
(Seal or Ordinary) CHEROREE, Ordinary
County
INSTRUCTIONS:  1st. For use in all cases where pensioner died after January 1st, had not been out of State longer than twelve months, and did not
leave sufficient property to pay such asymmes. THE WIDOW OF A SOLDIER, IP SHE IS LIVING, MAS PRIOR CLAIM OVER THESE EXPENSES, AND MUST MAKE APPLICATION ON TELLOW BLANK.  EXPENSES, AND MUST MAKE APPLICATION ON THE LOW BLANK.  The second of the such second is a such as the second of the second sec
the value of it, and soch date.  2rd. Ranning accounts cannot be paid—only those connected with the last illness, just before death when pensioner grew weres to dis.  3rd. Ranning account must be sworn to before the Ordinary, and in the following form: (Do not use the terms: "just, true, due, un-
"The above and foregoing account is rendered for services in the last lilness (or for funeral expenses, as the case may be) of
5th. The Ordinary must see to it that each kill is perfectly legitimate in every respect, and properly swern to, and all attached neatly to this blank, after this blank has been properly completed as indicated.



CODE SECTION 1864.  (FOR THOSE ALREADY ENROLLED.)  Trom Factor 1902	STATE OF GI
SOLDIER'S PENSION 1903.	POWER  ATE OF GEORGIA,  Co  L. CO ALMAGAL  Mitness my hand and seal, this  Executed in presence of  Co  Co  Co  Co  Co  Co  Co  Co  Co
County Character  Co. 6 Regiment / Trace	unity.
JOHN W. LINDSEY,  Commissioner of Pensions.	hereby authorize  ATTORNEY.  hereby authorize  Althorize  Lacowed and request that he  he and lear ha  hay of flay  Althorize
WARRANT HANDED TO	remit same to [1903.
no duta	

11 1 16

STATE OF GEORGIA,	( with
Lekenokee County.	
In Al A Hallison hereby authorise of Allow to be	-
to receive and receipt for the pension allowed and request that he A. b. borne at bankon ha	e remit same to
Witness my hand and seal, this 2 day of fary	1903,
Bixecuted (in presence of 5	[t. s.]
A. b. barre arding	

FOR THOSE ALREADY ENROLLED.)  ADDIA AND AND AND AND AND AND AND AND AND AN	Name Kiel Yollison. County Manakae Co. b. Regiment Mac.	WARRANT ISSUED  2 //6 1006  JOHN W. LINDSEY,	WARRANT HANDED TO
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#### POWER OF ATTORNEY.

STATE OF GEORGIA,  Lahenshee County.
I. Wal. Fallacer hereby authorize
pm. 1. Wright of attenta la
to receive and receipt for the pension allowed and request that he remit same to  A. b. borne. Order at beasternelsa:
Witness my hand and seal, this 5 day of Jay 1904.  Witness my hand and seal, this 5 day of Jay 1904.  [L. 8.]
Executed in presence of
6.6cm, Ording,

SOLDIER'S PENSION  1904.	Name Holt County Chan Hell Co. Le Regiment of WARRANT ISSUED  THE 1904. JOHN W. LINDSEY. Commissioner of Pensions.	
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2141. 4.010K

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS!

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

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lehend	Coun	ty.)
Personally ap	pears Na Sy	elism dalinaheel
		worn, says on oath that he is a bona fide citizen
and resident of said	d County and State, and	has resided in said State continuously ever
since the _5	day of May	18d4: ; that he is 64 years old and
by occupation a	week Wason, the	at he enlisted in the military service of the Con-
federate States ( or	of the State of	) during the war between the
States, and served	for the term of 4 year	in Company L, of I th Regiment
of ba	The second second	; that his physical condition is as
follows:	as Ruplane	; that his physical condition is as
Noant		
ě.		
that his property o	ousists of the following	items: ma Congrand
of the value of	100 - 100 100 - 10	Dollars, that by reason of his physical
Deponent des 1894, and the Acts	pension but the one her ires to participate in the amendatory thereof, and	benefits of the Act, approved December 15th, makes application for the pension to which he
Deponent des 1894, and the Acts is entitled for the county been allowe Sworn to and	pension but the one her ires to participate in the amendatory thereof, and year 1908. I have here ed a pension for the year subscribed before me, this	ein applied for.  benefits of the Act, approved December 18th, makes application for the pension to which he tofore as a resident of Zeellon  is the J. A. Albason
Deponent des 1894, and the Acts is entitled for the county been allowe Sworn to and	pension but the one her ires to participate in the amendatory thereof, and year 1908. I have here ed a pension for the year	ein applied for.  benefits of the Act, approved December 18th, makes application for the pension to which he tofore as a resident of Zerloss  sthe) H. A. Tolks Son
that he receives no Deponent des 1894, and the Acts is entitled for the county been allowe Sworn to and day o	pension but the one her ires to participate in the amendatory thereof, and year 1908. I have here ed a pension for the year subscribed before me, this facy, 1	ein applied for.  benefits of the Act, approved December 18th, makes application for the pension to which he tofore as a resident of Zeellon  is the J. A. Albason
that he receives no Deponent des 1894, and the Acts is entitled for the county been allowed Sworn to and the Acts of the County been allowed Sworn to and the Acts of the County been allowed Sworn to and the County been allowed Sworn to and the County been allowed to the County been allowed	pension but the one her ires to participate in the amendatory thereof, and year 1908. I have here ed a pension for the year subscribed before me, this face is a face in the pension of the year subscribed before me, this face is a face in the year is a face in the	ein applied for.  benefits of the Act, approved December 18th, makes application for the pension to which he tofore as a resident of Incl.  s the 908.  Ordinary.
that he receives no Deponent des 1894, and the Acts is entitled for the county been allowed Sworn to and day of the STATE OF	pension but the one here ires to participate in the amendatory thereof, and year 1908. I have here and a pension for the year subscribed before me, this of facy, 1	ein applied for.  benefits of the Act, approved December 18th, makes application for the pension to which he tofore as a resident of Zeelfore  the  1102  the  Ordinary.
that he receives no Deponent des 1894, and the Acts is entitled for the county been allowe Sworn to and day of	pension but the one her ires to participate in the amendatory thereof, and year 1908. I have here ad a pension for the year subscribed before me, this of facy, 1	ein applied for.  benefits of the Act, approved December 18th, makes application for the pension to which he tofore as a resident of Zeelfor.  s the 903.  Ordinary.  Ordinary of said County,
that he receives no Deponent des 1894, and the Acts is entitled for the county been allowe Sworn to and day of  STATE OF  I, LA do certify that I a	pension but the one her ires to participate in the amendatory thereof, and year 1908. I have here ad a pension for the year subscribed before me, this of factory.  GEORGIA,  County	ein applied for.  benefits of the Act, approved December 18th, makes application for the pension to which he tofore as a resident of Zeeller  the  U.A.Tolks.  Ordinary.  Ordinary of said County,
Deponent des 1894, and the Acts is entitled for the county been allowe Sworn to and day o  STATE OF  I, do certify that I a the applicant in the	pension but the one her ires to participate in the amendatory thereof, and year 1908. I have here ad a pension for the year subscribed before me, this of factory.  GEORGIA,  County the county acquainted with the foregoing affidavit, and the foregoing affidavit, and the county acquainted with the foregoing affidavit, and the county acquainted with the foregoing affidavit, and the county acquainted with the county acquainted	ein applied for.  benefits of the Act, approved December 18th, makes application for the pension to which he tofore as a resident of Zerlica  the 903.  Ordinary.  Ordinary of said County, fram well satisfied that the statements made by
Deponent des 1894, and the Acts is entitled for the county been allowed by Sworn to and day of the County been allowed by STATE OF In the Acts is entitled for the county been allowed by STATE OF In the Acts is entitled by the I at the applicant in the lim in his said affi	pension but the one her ires to participate in the amendatory thereof, and year 1908. I have here ed a pension for the year subscribed before me, this of fact 1 CEORGIA, County and acquainted with the foregoing affidavit, and idavit are true, and I know it is to participate the control of the county and t	ein applied for.  benefits of the Act, approved December 18th, makes application for the pension to which he tofore as a resident of Zeellon  the  Ordinary.  Ordinary of said County,  ordinary of said County,  am well estimated that the statements made by
Deponent des 1894, and the Acts is entitled for the county been allowe Sworn to and day o  STATE OF  I, do certify that I a the applicant in th	pension but the one her ires to participate in the amendatory thereof, and year 1908. I have here ed a pension for the year subscribed before me, this of factory.  GEORGIA,  County  A acquainted with the foregoing affidavit, and idavit are true, and I knowledges in this County.	ein applied for.  benefits of the Act, approved December 18th, makes application for the pension to which he tofore as a resident of Lactor  sthe 903.  Ordinary.  Ordinary of said County, which is the individual he represents himself to
Deponent des 1894, and the Acts is entitled for the county been allowe Sworn to and day o  STATE OF  I, do certify that I a the applicant in th	pension but the one her ires to participate in the amendatory thereof, and year 1908. I have here ed a pension for the year subscribed before me, this factory.  GEORGIA,  County acquainted with the foregoing affidavit, and idavit are true, and I know in the county.  Given under my official	ein applied for.  benefits of the Act, approved December 18th, makes application for the pension to which he tofore as a resident of Action  sthe 908.  Ordinary.  Ordinary of said County, is am well estisfied that the statements made by whe is the individual he represents himself to
Deponent des 1894, and the Acts is entitled for the county been allowe Sworn to and day o  STATE OF  I, do certify that I a the applicant in th	pension but the one her ires to participate in the amendatory thereof, and year 1908. I have here ed a pension for the year subscribed before me, this factory.  GEORGIA,  County acquainted with the foregoing affidavit, and idavit are true, and I know in the county.  Given under my official	ein applied for.  benefits of the Act, approved December 18th, makes application for the pension to which he tofore as a resident of Action  the  Sthe  Ordinary  Ordinary of said County, which is the individual he represents himself to a signature and seal, this  1903.
Deponent des 1894, and the Acts is entitled for the county been allowe Sworn to and day o  STATE OF  I, do certify that I a the applicant in th	pension but the one her ires to participate in the amendatory thereof, and year 1908. I have here ed a pension for the year subscribed before me, this of factory.  GEORGIA,  County  A acquainted with the foregoing affidavit, and idavit are true, and I knowledges in this County.	ein applied for.  benefits of the Act, approved December 18th, makes application for the pension to which he tofore as a resident of Andlows  the  Ordinary  Ordinary of said County, when is the individual he represents himself to a signature and seal, this  1903,  A & & & & & & & & & & & & & & & & & &
Deponent des 1894, and the Acts is entitled for the county been allowe Sworn to and day o  STATE OF  I, do certify that I a the applicant in th	pension but the one her ires to participate in the amendatory thereof, and year 1908. I have here ed a pension for the year subscribed before me, this factory.  GEORGIA,  County acquainted with the foregoing affidavit, and idavit are true, and I know in the county.  Given under my official	ein applied for.  benefits of the Act, approved December 18th, makes application for the pension to which he tofore as a resident of Zerofore  s the  Ordinary  Ordinary of said County,  whe is the individual he represents himself to  laignature and seal, this  1903.  Ordinary of county,  Ordinary of county,  County of county,  Coun

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	
leheroher County.	
Personally appears ON. el Tallison of charles	
ounty, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citiz	en
d resident of said County and State, and has resided in said State continuously ev	er
nce the f day of May 1885; that he is 65 years old a	nd
y occupation a More Mason, that he enlisted in the military service of the Co	011-
derate States (or of the State of) during the war between t	
tates, and served for the term of 4 year in Company 6, of 1 th Regime	nt
tates, and served for the term of	n.
f. Heard that his physical condition is	as
llows:	
hat his property consists of the following items: mode me release	**
TAMA	
: 3	
D. H. J. L. L. C. L. L. L. C. L.	- 1
f the value of Dollars, that by reason of his physi	
ondition and poverty he is unable to support himself by his own exertion or labor, a	ınd
hat he receives no pension but the one herein applied for.	
Deponent desires to participate in the benefits of the Act, approved December 15	
894, and the Acts amendatory thereof, and makes application for the pension to which	he
s entitled for the year 1904. I have heretofore as a resident of Charles	
County been allowed a pension for the year 15003 A STOIPASING	
Sworn to and subscribed before me, this the	
6' _day of fary1904.	
A. C. Cordinary.	
STATE OF GEORGIA, (	
chendres County.	
I. J. 6.60000 Ordinary of said Cour	
I, Ordinary of said Cour	ity,
lo certify that I am well acquainted with	n.l.
he applicant in the foregoing affidavit, and am well satisfied that the statements m	
by him in his said affidavit are true, and I know he is the individual he represents him	sc.
o be, and that he resides in this County.	
Given under my official signature and seal, this	
day of	
Adis J. G. bonn	
ber Ordinary chouse Cou	nty
Note.—The blank spaces must be filled.	
TATE - THE PROPERTY OF STREET	

Nors.—The blank spaces must be filled.
Nors.—A Blanck should not be attended before sangary 1st, 190

WARRANT BANDED TO

JOHN W. LINDSEY.

WARRANT ISSUED

## POWER OF ATTORNEY.

	,
STATE OF GEORGIA,	
Cherofree COUNTY.	olluson hereby authorize
W.J. most	of Churchee
to receive and receipt for the pension	allowed, and request that he remit same to
by	
WITNESS my hand and seal, this	day of January 1908.
Executed in the presence of	myte

Regiment of The Constitution of the Constituti SOLDIER'S PENSION CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.) H. a. Polluson 2869 1908. JOHN W. LINDSEY. INDIGENT Chentler No. County -

SOLDIER'S PENSION (FOR THOSE ALREADY ENROLLED.) INDIGENT No. Stery sleven,

1905.

Name 26. - 7. 12866 2000 County & Merelle

Regiment

no date

WARRANT HANDED TO

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
the control County.
Personally appears. H. & Sallewace of Unitaliae
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 1825; that he is 67 years old and
by occupation a Mary e., that he enlisted in the military service of the Con-
during the war between the
States and sexual for the term of 4 1/10 in Company Co., of / th Regiment
of that his physical condition is as follows: 12. pline. 12.
follows: 16. petime. 1Chercus alixan
Millingland
that his property consists of the following items:
· · · · · · · · · · · · · · · · · · ·
of the value of Dollars. I am now earning,
by my labor, 4 /2 5 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 Cheriffee
County been allowed a pension for the year 1904.  He A Taller Sol
Sworn to and subscribed before me, this the
day of 10, 1905. \Ordinary.
11 1.11.blOrdinary.
STATE OF GEORGIA, Checrice County,
Checote County
I, Ordinary of said County,
do certify that I am well acquainted with the first accordance of said County,
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 1905.
Anti-
ordinary. Rankee County.

Note.- The blank spaces must be filled. Notz. - Affidavit should not be attested before January 1st, 1905.

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,				
Cheroflee County.				
Personally appears & a. Tollerson 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 9 day of May 1831; that he is 20 years old and				
by occupation a stone Mason, that he enlisted in the military service of the Con-				
federate States (or of the State of 400 ) during the war between the				
States, and served for the term of				
of Herragia Ordination; that his physical condition is as				
follows: Infunctor & Property, Petermatin				
Rupture and Midner				
The former states of the state				
y Company				
that his property consists of the following items:				
A CAN COMPANY OF THE PARTY OF T				
+				
of the value of 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 apply ation for the pension to which he				
is entitled for the year 1906. I have heretofore, as a resident of				
County, been allowed a pension for the year 1905.				
Sworn to and subscribed before me, this the				
Ordinary.				
V				
State of Georgia,				
Chentree County.				
I. M. J. Meba Ordinary of said County				
do certify that I am well acquainted with A. Jolluscon				
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 1906.				
11. y. Vala				
Ordinary Churchec County.				
Norm The blank spaces would be filled				

Nors.—The blank spaces must be nised.

Nors.—Affidavit should not be attested before January 1st, 1906.

STATE On	OF GE		Count	No.		hereby authorize
to receiv	e and	receipt for th	e pension	allowed, and re	quest that h	e remît sautê to
-		my hand and s		2 da	of Jan	1907.
Coss Bernos 1264. (FOR THOSE ALREADY EMROLLES)	No. 6 - 2 >	SOLDIER'S PENSION	1907.	Con U Regiment / =   You WARRANT ISSUED	JOHN W. LABSET, Commissioner of Pensions.	WARRANT HANDED TO

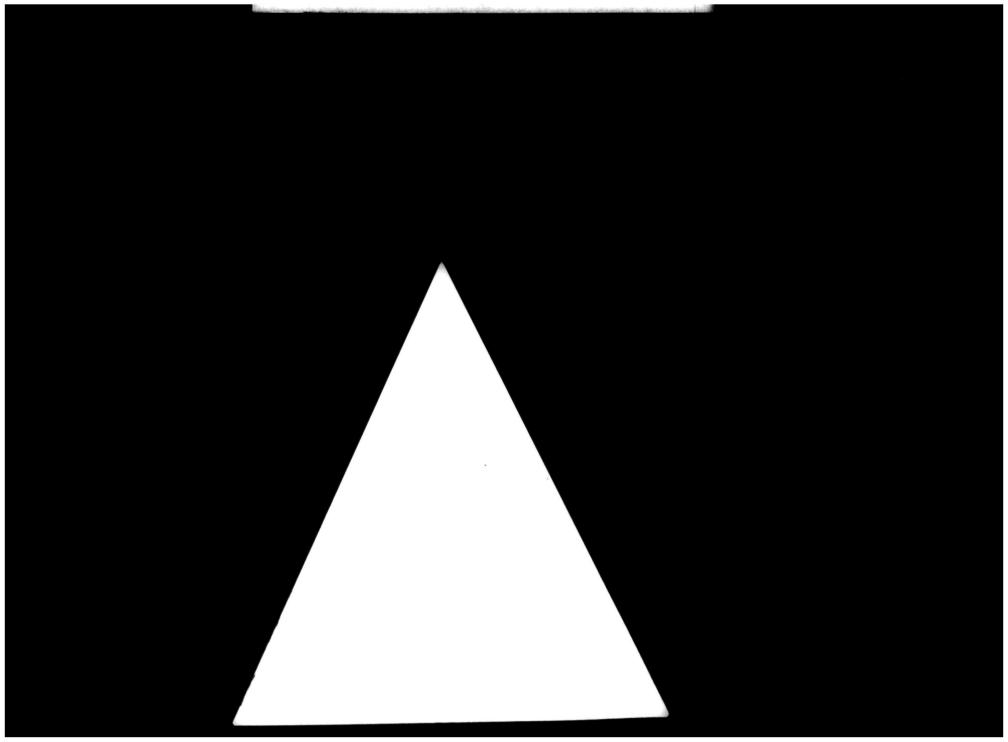
FOR APPLICANTS HERETOFORE ALLOWED PENSIONS
State of Georgia,
In land
Personally appears H. A. Sollisson of Cherokee
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since the day of 18.35; that he is 22 years old
and by occupation a Mason, that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served for the term of in Company of of the Regiment
of that his physical condition is as
follows: age and poverty
· · · · · · · · · · · · · · · · · · ·
that his property consists of the following items: House Gold
The state of the s
Company of the Compan
of the value of Twenty Fine Dollars. I am now earning
by my labor, Liviling 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 the rolling
County, been allowed a pension for the year 1906. A. U.X. Vellerson
Sworn to and subscribed before me, this the
2 day of farm, _1907. S Pry Mobb _Ordinary
State of Georgia,
Chewire County. Ordinary of said County,
1, Web Ordinary of said County,
do certify that I am well acquainted with 74 a Villewon
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

Nors.—The blank spaces must be filled.

Nors.—Affidavit should not be attested before January 1st, 1907.

Ordinary Churches County.

Adla year heal



Confederate

Soldier's Application.

UNDER ACT 1910.

county Cherokee

Name J. H. Triffs.

Company C.

Regiment Philips Lynn

W. LINDSEY of P

Company Company Regiment		
Things	Soldier's Application. UNDER ACT 1910.	Confederate
of the state of th	plicatio	

STATE OF GEORGIA.
Description of the second seco
County.
of said State and County, hereby applies
or the philian provided by Act of 1910, to Confederate Soldiers, and submits his aware statement, with
for the relation previded by 200 of 1910, to Confederate Soldiers, and submits his swore statement, with the statement of the statement, and after being duly worn true smewer to make to the questions propounded, answers as follows, to stit.  1. What is your name and where do you reside? (Give County and Post-office).
I What is your warms and where do you reside! (Give County and Book office)
and the state of the state of
A STATE OF THE STA
2. How long and since when have you been a continuous resident citizen of this State?
may 5, 1843
Did you enlist in the Army of the Confederate States or of the Organized Militia of this State
rom 1861 to 18657. 42.49
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class
Service) Mar. 1862, Com. 6 Phillips Descion
5. How long did you remain in the actual Military Service with said Company and Regiment?
Give date of discharge) May 4 / 866
6. When and where was your Company and Regiment surremplered or discharged from the Service?
may & 1860, brumborough n.C.
7. Were you actually present with your Command when it was surrendered or discharged?
8. If you were not actually present, state specifically and clearly where you were.
a. Where was your Command when you left it? News left it.
b. When did you leave the Command?
c. For what cause did you leave?
the state of the s
e. For how long was your leave granted? In what way?
f. Why did you not return to your Command after leave extred?
g. In what way were you prevented?
h. What effort did you make to return?
i. Were you captured during the war? 10.
j. If so, when, and where? In what prison were you held and when were you released?
news in Oras
9. What property of every discription was owned, in the use, possession and control of yourself
and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value.),
60 acres of land Val & 3000° on mules 000
Major Well 1500 Home had 12500
- and the same and
10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov.,
1908. To whom and for what price?
11. What property of any discription of any kind, and of any value now owned and in the use,
possession and control of yourself and wife and its cash value? (Make itemized list)
60 series of land Val & 400, one mule \$ 50000, one
wagen that \$150.
12. What annual or monthly income or earnings of yourself and wife and the source derived have
out Down
是这个大学工作的。我们就是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个
18. Are you drawing a pension of any amount from this State or the United States!
14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was
ot allowed?
Q.
Sworn to and subscribed before me, this the
1/ the day of acces 1010 1 mon 19
On the part of the

# STATE OF GEORGIA. 3. Where does he now reside, and since when has be been a bounded, continuing resident to the State and how do you know. And the Content that State and how do you know. And the Content that State and how do you know. The Content that State and the Content that 4. When, where and in what Company and Begiment did J. H. Jack sallat during war from 1861 to 1865? (Give date and place) March 1165 Co. 6 Phillips Lyun 5. How did you obtain your information of this Service! A way in Pane Company 6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) 222.6-7 [ Let ] 7. When and where was his Command surpresent or discharged (give date and place). Section Actual May 4. 1861 at Transaction of M. C. 8. Were you personally present at the Surrender 90 Il not, where were you and how came you there? It where frequent Surrender 10. Was the applicant personally present with his Command at surrender? 11. If not where was he and how come him there?.... 12. When did he leave his Command? Ruser Left Where was his Command By whose authority did he leave. long was he granted leave?..... How de you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) We were rue of some Our project, and hereal of true own howelledge 18. In what way was he prevented from returning to his Command? How do you know? It's hours he never left him common 14. What effort did he make to return to his Command and how do you know?.... 15. Was applicant captured as a prisoner 20 . If so, when and where? .In what prison was he held?.... Sworn to and subscribed before me, this the day of aug

and wife and of its each value to wit: (Make List by items t

AFFIDAVIT OF TWO FREEHOLDERS. STATE OF GEORGIA. Cherone 

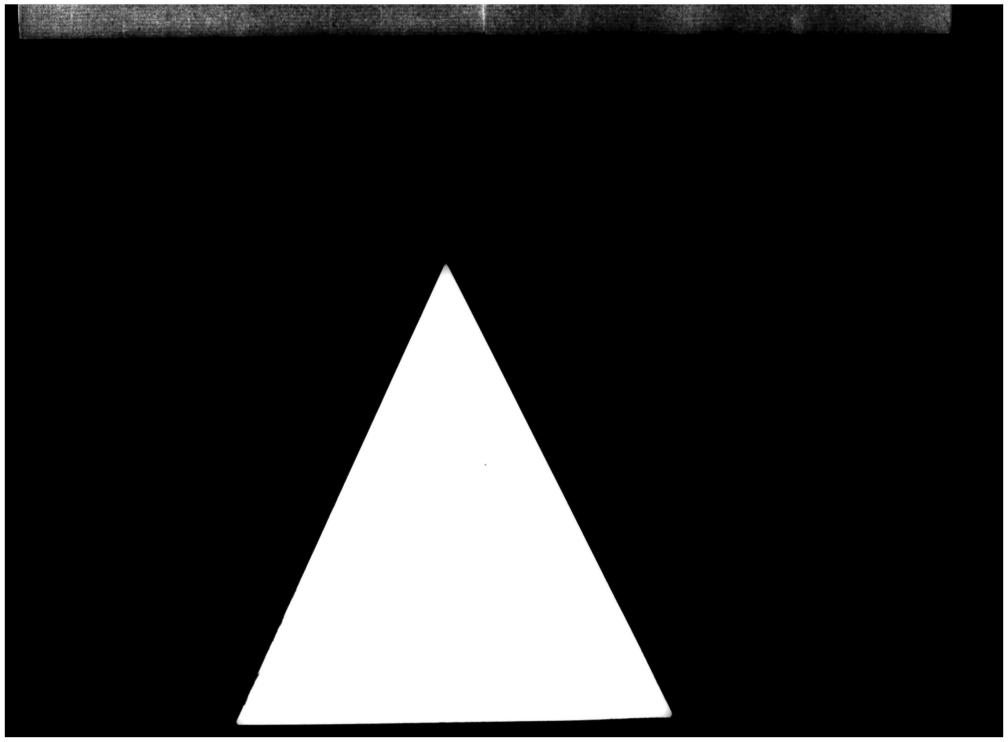
ORDINARY'S CERTIFICATE Section Control of the Control I HOVA Ordinary of said County, cartily that I know policant JATA for Pension is the person is represents himself to be and resides in bounty. That I was more than 10 January to the said to be said. The latter of the said to be said. The latter of the said the said tree botters, that they are all residents of said County and were duly every by me before signing the lorsesting efficient they are all residents of said County and were duly every by me before signing the lorsesting efficient they are all residents and arms we get an analysis of the said and arms with the said and will be said to said the said the said to said the said the said the said to said the said th can quantities are specified by Ordinary shall rever applying and all vilgound in the Adoustic.

Common reversible to the party for the property of the Common to the Common that the party of the Common that give chall he the schole trink) en help you first.

Insul afficient ency be attached if balak upone are insufficient,
filled by him.

Edwick swint he made before the Crelinary and certified by him;

Distance has no property as all in the possession, use or countrie of, and and wife, ufficiently of Tree before



and the state of the state of	angion office -1905		2.57	garany i				
Constanting	plicant should state date of fur-							
Otto was	or how longt State why and in what we me was prevented from returning a many with his command before sur-				to receive	_	STATE	
INDIGENT PENSION,	der, and prove every statement to rule by a witness who of his our sledge knows it to be true.  J.W. Lindsey, Com. Of Pensions		Executed	Witness my hand	e and receipt for	*	E OF GEORGIA	
1902/			in presence of	at. I and seal, this	the pension		ORGIA,	TOWE
Name flume: P. Facehen County behero Res Co. B. SS. Sea. Reg'm't	211	· ·	. ~		allowed, and r	County.		2
Approved 1901.				day	ofequest that he	-	~	A
JOHN W. LINDSEY, Commissioner of Pensions.				ofoy	remit s			KNCI.
WARRANT HANDED TO						here		
Ordinary will write Yame of Applicant Company and Regiment on heat as infrastred steep of the Company of the Co			ı	_1901. [L. 8.]		by authorize		
\$ 12								

STATE OF GEORGIA,	J
County	. }
Ι,	hereby authoris
	of same
to receive and receipt for the pension allowed, and	request that he remit same to
At.	manuscript by and a contract of the contract o
Witness my hand and seal, this	day of1901.
	[L. 8
Executed in presence of	•

Consider office -8-4-1903.  Palicant should state date of fur ough, for what granted, by whom and or how long: State why and in wha the was prevented from returning, with his command before su nder, by withess who of his or ledge knows it to be true.	J.W.Lindsoy, Com. Of Pensions			and the second s
O. T. S. W. C.	1991 1906	County Life of the County Approved 1500.	JOHN W. LINDSRY, O o	1000 - 100 -

# Questions for Applicant.

1	County.
	James of School of said State and County, desiring
or	of said State and County, desiring all himself of the Pension Act (Section 1254, Code), hereby submits his proofs, and after being duly a true answers to make to the following questions, deposes and answers as follows:  What is your name and where do you reside? (give State, County and post office) Trackey, Sellow
'	James C. Sarahen Chenches Comy
?	How long and since when have you been a resident of this State? Deare 1840
	When and where were you born? /840 Cherches bearing ba
	When and where and in what company and regiment did you enlist or serve? Wet. 1861.
3	E La Clegarian
0	How long did you remain in such company and regiment? from Dake of
	When and where was your company and regiment surrendered and discharged? If here 1865.
	Were you present with your company and regiment when it was surrendered and
	If not present, state specifically and clearly where you were, when you left your command, for what
L	and by whose authority is the control of the contro
	How much can you earn (gross) per annum by your own exertions or labor?
	What has been your occupation since 1865? Sure What I could now farm Upon which of the following grounds do you base your application for pension, viz: first, age and
ur	rty," second, "infirmity and poverty," or third, "blindness and poverty"? lasses that You fi upon the first ground, state how long you have been in such condition that you could not earn support? If upon the second, give a full and complete history of the infirmity and its extent? If the third, state whether you are totally blind and when and where you lost your sight?
	able to went for years yours
i.	What property, real or personal, or income, do you possess, and its gross value?
	What property, real of personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899 and 1900
d	what disposition, if any by sale or gift, have you made of same? Decision seed
le.	refrent in a besser thated years
	In what County did you reside during those years, and what property did you then return for taxation?
7	an Chenoke prade su returns
i.	How were you supported during the years 1899 and 1900? By my family
١.	what was your employment during 1898 and 1899? What pay did you receive in each year?
	Have you a family? If so, who composes such family? Give their means of support? Have they
ho	mesterd? Have Wife & Y. akildness akildness all of ac
),	Are you receiving any pension? If so, what amount and for what disability?
	Have you ever made an application for pension before?
2.	How many applications have you ever made and under what class? Wet & considers
	Sworn to and subscribed before me this the
	A 6 Comme Ordinary.
	A. C. CONTON Ordinary,

## QUESTIONS FOR WITNESS.

STATE OF GEORGIA,	
Cheroher COUNTY.	
MI, Relief , of said State and County, having been present	ed
as a witness in support of the application of James C. Lucklar for pension	
under Section 1254, Code, and after being duly sworn true answers to make to the following question	)B
denoces and enewers as follows:	,
1. What is your name and where do you reside?	To take
0	
2. Are you acquainted with famen of Sasches, , , the applicant; if a	ю,
3. Where does he reside, and how long and since when has he been a resident of this State?	
Reside in cheroker comy Shase Knew him in State	Sense. 1+
4. When, where and in what company and regiment did he enlist, and how do you know?	Marie /
001, 1861 carry, a. 38 "La Regt.	
5. Were you a member of the same company and regiment?	
6. How long did he perform regular military duty of some date of endedounced	W/861.
7. When and where was his command surrendered? afont 1865 at of farcana	Max
- Lewis Tolland wall	
8. Were you present when it surrendered ?	
9. Was applicant present?	
10. If he was not present, where was he? at. Place	
When did he leave his command deel 1864 For what cause? Fuestered	
By what authority he left? If office en How do you know all of this I saw at Nume and Seem har fundew after he	17 <u>~</u>
Clare Miere	
11. What property, effects or income has the applicant? (Give your means of knowledge.)	
All finghent. I have Sivew new kine sense sunn	ende.
12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899 and 1900, an	d
what disposition, if any, did he make of same? Orenellar fondant	10 may 10
had none to dispose of	_
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom	. 9
Nach prime to oursey	
4. What is the applicant's occupation and physical condition? has not Cocupate	2
pret obtained and physical countries. The said the companies	as c
- John Charles Commission of the Charles of the Cha	-
15. Is the applicant unable to support himself by labor of any sort, if so, why?	
prot able to de any labor	ine
16. How was he supported during the years 1898, 1899 and 1900? By his Chaldness	-
17. What portion of his support for these three years was derived from his own labor or income?	-
man (in the state of the state	
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension	n
under Section 1254, Code? We is my Back Wealth, not about	-
such I has see firefrent	-
19. What interest have you in the recovery of a pension by this applicant?	
Sworn to and subscribed before me, this)	-
J. M. T. COLAL	
the day of france 1902) make Witness.	_
A Colomo Ordinary.	

# POWER OF ATTORNEY.

THE STATE OF THE STATE OF THE STATE	
TATE OF GEORGIA,	
COUNTY.	
Personally came before me. N. Clarker and	1
2. M. Batis, both known to me as reputable physicians	
said County, who, being severally sworn, say on oath that they have examined carefully	_
anne G. Nucker , applicant for pension under Section 1254, Code, and after	r
ch personal examination say that his precise physical condition is as follows:	
Hel is suffering from Chronic Dearhoea	
and surrous Prostration and for two years	,
14.411	•
limself and has been under mig treats	u
for said lugth of line	-
They further say on oath that the physical condition of applicant renders him unable to labor at	•
by work or calling sufficient to earn a support for himself, and that we have no interest in said pension sing allowed.	1
meller med	
28 day of June 1902 & M Bates new	
Drdinary.	
	4
ORDINARY'S CERTIFICATE.	
TATE OF GEORGIA.	3
COUNTY.	
nat the applicant faces. Stocker resides in said County, and ha	•
een a bona fide resident of this State since theday of	70
ed that the witnesses, vis : W.J. boken of mantes:	-
and J. M. Reese	-
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 tool to oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witness	
of one same was signed.	
I further certify that the tax digests of bhenches County show that applican	t -
turned for taxation in his name in 1899 and selectione. Dollar	
property, and in 1000 Dollars of property.	
In my opinion the foregoing claim is made in good faith.	7
Witness my band and scal of office, this 190	è
A behave Ordinary,	-
of champher Count	
Count	,
1. Refere any questions are engaged, the Ordinary shall aware applicant and the dispassed to the following	
<ol> <li>Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following the "Tou shall tree answer make to each of the questions asked of you, and the evidence you shall give will be the tole truth, so help you God."</li> </ol>	
2. Additional affidavia 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	

Ι,			hereby authoriz
	of		
receive and receipt for the pension	allowed, and re	equest that he	remit same
	at	`	
	,.		
		of	1906,
WITNESS my hand and seal, this	Jam	o P. Fluor	( L. 8
Executed in the presence of		MAL	
7 h As Asserted in the presence of			
t. Mr. 8/81V.			

# STATE OF GEORGIA, omes P. Fucker receive and receipt for the pension allowed, and request that he remit same to

POWER OF ATTORNEY.

Executed in presence of 2213/13/10/20/11/11

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

INDIGENT

JOHN W. LINDSEY, WARRANT ISSUED

Cons Bustron 1364. (FOR THOSE ALREADY EMBOLLED) SOLDIER'S PENSI No. 6-2 P

CODE SECTION 1254.

(FOR THOSE ALREADY EMBOLLED.)

INDIGENT No. 297/

SOLDIER'S PENSION 19061

O. Inches Courtles

WARRANT ISSUED

WARRANT HANDED TO JOHN W. LINDSEY. FEB 1

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
County.
Personally appears J. P. Judles 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 theday of184/2; that he is 60 years old and
by occupation a fanus, that he enlisted in the military service of the Con-
federate States (or of the State of Kerry' ) during the war between the
States, and served for the term of 22 years Company B, of 38 th Regiment
of that his physical condition is as
follows: Chronic Searne a
Name of Control Control of Contro
A DE COMMUNICATION OF THE PROPERTY OF THE PROP
that his property consists of the following items: House hold
Name of the state
of the value of 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 Ackapproved 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
Sworn to and subscribed before me, this the
Sworn to and subscribed before me, this the
14
Wy 14 CA Ordinary.
State of Georgia,
County.)
I, Ordinary of said County,
do certify that I am well acquainted with J. P. Tuckler
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 January 1906.
1 Mich
Affix your Continue C
ordinary TOMENOTICE County.
Note.—The blank spaces must be filled.  Note.—Affidavit should not be attested before January 1st, 1906.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
Sinerolee County.
Personally appears amus P Engler of Cherofice
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
and by occupation a Tarner, that he enlisted in the military service of the Con-
federate States (or of the State of Staryau) during the war between the
States, and served for the term of 2/2 you in Company to , of 28 th Regiment
of Steary two Nove ; that his physical condition is as
follows: Uge and poverty
that his property consists of the following items: Molling
of the value of Dollars. I am now earning
by my labor, Hothing 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 therefore
1 1000
Sworn to and subscribed before me, this the
day of Gray 1907.
W. J. Webb Ordinary.
State of Georgia,
Ofworker_County, I, Weble Ordinary of said County,
W O Mark
I, Ordinary of said County,
do certify that I am well acquainted with Janush Jucker
the applicant in the foregoing affidavit, and small 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 11111 ary 1907.
W. J. The ist
Adia pour Ordinary Office County.

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

...County 1930 **Application for Pension Due Deceased Pensioner** (UNDER ACT 1904) (To pay expenses of last illness and funeral) of Massey Ordinary Date of Death Mat 19 30 Approved and ordered paid 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. STATEMENT.

### MAYES WARD & CO.

FUNERAL DIRECTORS AND EMBALMERS

AMBULANCE SERVICE

TELEPHONE 549 DAY OR NIGHT FUNERAL HOME 316 LAWRENCE ST.

Marietta, Ga. 3-/9. 30 Mr. Moland Luker. Funnal lipiners

> Lachet 90 00 Thank 10 00 Sharing, dressing hauspring try 500

> > Total

110,00

The above and foregoing account is rendered for Funeral expenses of Mr. James Pope Tucker who died without leaving or owning sufficient property to pay bill. Have Market Sworn to and subscribed before me

this March 19, 1930.

Ordinary, Cobb County, Ga.

### Application for Pension Due to a Deceased Pensioner

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

(Under Act Appro	ved August 15, 1904)
GEORGIA, Scherolice	Country
Personally before me, the Ordinary of said Cou	inty, comes
f. 1. Inelus	of said County, who, after being sworn, on oath
says that he knew	of said County, who, after being sworn, on oath
was on the Pension Roll of said County at the time	of death, which occurred in
County, in this State, on the 10 Th	lay of
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 \$/29	, per sworn statements fully and completely
ITEMIZED hereto attached.	
Sworn to and subscribed before me,	
	000
Leherstee County	J. It Inches
County County	mark
(Seal of Ordinary)	
,	
4 :	OF ORDINARY
GEORGIA, Scherolie	County.
1 Said Masin	Ondiname of said County do south
60 D	Ordinary of said County, do certify
citizen of said County, and that said person is of	truthful and trustworthy character, entitled to full
faith and credit; that I also knew	while in life and that this was
the same person whose name appears on the Pensi	on Roll of Lehenoles County, and
7. 4. 1	ord (\$200 T) Dollars
in said County for 19.22, and I now believe said	d pensioner to be dead; and that the instructions at
the foot of this voucher have been carefully observed	ved in making up this voucher and the bills which are
attached hereto.	January  Bhanker  County
Given under my hand and official seal this	15 the day of advil 10.30
Orten under my mand and onicial soal, time	and an
(Seal of Ordinary)	Ordinary Ordinary
	County County
	JCTIONS:
	nd funeral, to make out their accounts in fully itemized form,
2nd. Each account must be sworn to before the Ordina "The above and foregoing account is rendered for service."	ary, and in the following form: es in the last illness (or for funeral expenses, as the case may
be) of	without owning sufficient property to pay this bill
3rd. The Ordinary must see to it that each bill is perfec	tly legitimate in every respect, and properly sworn to, and all operly completed as indicated.
4th. The completed voucher—this blank and the bills—	periy completed as indicated.  -must be sent to the Pension Department for approval and no
money must be paid out until it is returned to you as your at	must be sent to the Pension Department for approval and no athority to make the payment.
5th. Return this application, and attached bills, proper	
6th. Ordinary should see that the back of this blank, w	then folded is filled out.

TO DR. C. A. DONEHOO, DR.

To Service Rend rup 12-21. M. 300 26- 300 27- 200 40 To services rendered during last illness of J.P.TUCKER.decesses Sworn to and subscribed before me, this March 29 1930. Ordinary, Cobb County, Ga.

STATEMENT,

### MAYES WARD & CO.

FUNERAL DIRECTORS AND EMBALMERS

AMBULANCE SERVICE

TELEPHONE 849

DAY OR NIGHT

FUNERAL HOME

MARIETTA, GA. 3 -/9. 33 Sharing, dressing have soo

110,00

The above and foregoing account is rendered for Funeral expenses of Mr. James Pope Tucker who died without leaving or owning sufficient property to pay bill. Many Ward's Sworn to and subscribed before me 7

this March 19, 1930.

Idinary, Cobb County,

Georgia Cheroke Lounty, Personally Came James F. Tucher who being duly eworn deposeth a paith, that he Jame home on a furlow to the less of his recollection in how or Dec. 1864, but don't Truow exact date having last his furlows. fullow was granted on account of sichure (Phronie dearhea) it was granted by the hospital authorities is my recollection at Lynchburg Va, being in the hospital at The True the came was granted, at that place, and said fullow was granted for sixty days, The at the expiration of said him I was still sich forfund to my room and most of my there to my sed, till after the pur-Tunder, and never was able for duty after The date of said furlow. Sworn to and Subscribed before one This, 4eby, 14"1903, Alesk Sufer Court, Jumes Post Tucker James D. Tooker Personally Rame & M Ruce who after July understanding the facts set out in the foregoing Afedavit know of my own Knowledge 35 That They are true dung at howe at the paul The Red living neighbors to sach other. PAG Loom to at pulseribed before my I may lever The Febr 14 1903, Jaky Galt Chal Suprat, Churcher Co.

Confederate My Soldier's Application. UNDER ACT 1910. Name Ti J. W. LINDSEY,