

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 189

Sworn to and subscribed before me, this, the

First day of March

1894.

W.D. Prentiss

A. M. C. Burns

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

STATE OF GEORGIA,

Cherokee County.

I, A. M. C. Burns Ordinary of said County, do certify that I am well acquainted with A. M. C. Burns 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 First day of March 1894.



A. M. C. Burns

Ordinary of Cherokee County.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26th, 1895. I have heretofore been allowed a pension of One Hundred dollars, for the year 1894

Sworn to and subscribed before me, this, the

26th day of January

1895.

A. C. Burns

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, A. C. Burns Ordinary of said County, do certify that I am well acquainted with A. C. Burns 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 26th day of January 1895.



A. C. Burns

Ordinary of Cherokee County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, A. C. Burns hereby authorize Thomas H. Johnson of Cherokee County to receive and receipt for the pension paid hereon and request that he remit same to me by

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 22nd day of Feb 1896.

A. C. Burns [L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, A. C. Burns hereby authorize Henry M. Cushman of Cherokee County to receive and receipt for the pension paid hereon and request that he remit same to me by cash

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 22nd day of Feb 1897.

A. C. Burns [L. S.]

Executed in presence of

SOLDIER'S PENSION.

1896.

Name A. M. C. Burns
County Cherokee
Disability Loss of Leg
Amount, \$100.00
3/2 1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDLED TO

Appet

W. W. HARRISON, State Printer, Atlanta.

no data

SOLDIER'S PENSION.

1897.

Name A. C. Burns
County Cherokee
Disability Loss of Leg
Amount, \$100.00
2/2 1897

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDLED TO

W. W. HARRISON, State Printer, Atlanta.

no data

ACT OF OCT. 24, 1887.
(For Those Already Enrolled.)

No. 1956

SOLDIER'S PENSION. 1896.

Name Allen, C. Brown
County Cherokee
Disability Loss of Leg
Amount, \$ 100.00 Dollars
3/2 1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDLED TO

Appek

Wm. W. Harrison, State Printer, Atlanta.

Wm. W. Harrison

ACT OF OCT. 24, 1887.
(For Those Already Enrolled.)

No. 2462

INVALID SOLDIER'S PENSION. 1897.

Name A. C. Brown
County Cherokee
Disability Loss of Leg
Amount, \$ 100.00
2/2 1897

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDLED TO

Wm. W. Harrison

Wm. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears Allen, C. Brown 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 21st day of May 1845; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a Sergeant in Company 2, of 26th Regiment of Georgia Volunteers, Bumming's Brigade; that whilst engaged in such military service in the State of Tenn, on the 25th day of Nov 1863, he was wounded, injured or diseased as follows:

Wounded in Left Leg, causing Loss of said Leg.

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

Sworn to and subscribed before me, this, the 25th day of Jan 1896. Allen, C. Brown
A. C. Brown, Soldier.

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

STATE OF GEORGIA,

Cherokee County.

I, A. C. Brown Ordinary of said County, do certify that I am well acquainted with Allen, C. Brown 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 25th day of Jan 1896.

A. C. Brown
Ordinary Cherokee County.



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears A. C. Brown 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 21st day of May 1845; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a Sergeant in Company 2, of 26th Regiment of Georgia Volunteers, Bumming's Brigade; that whilst engaged in such military service in the State of Tenn, on the 25th day of Nov 1863, he was wounded, injured or diseased as follows:

Wounded in Left Leg, just below knee joint which caused the loss of said Limb.

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

Sworn to and subscribed before me, this, the 25th day of Feb 1897. A. C. Brown
A. C. Brown, Soldier.

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

STATE OF GEORGIA,

Cherokee County.

I, A. C. Brown Ordinary of said County, do certify that I am well acquainted with A. C. Brown 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 25th day of Feb 1897.

A. C. Brown
Ordinary Cherokee County.



and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1896. I have heretofore as a resident of Cherokee county been allowed a pension of one hundred dollars, for the year 1895.

Sworn to and subscribed before me, this, the 25 day of January 1896. } Allen, C. Burr
A. C. Burr, Notary

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

STATE OF GEORGIA, }
Cherokee County. }

I, A. C. Burr Ordinary of said County, do certify that I am well acquainted with Allen, C. Burr 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 25th day of January 1896.



A. C. Burr
Ordinary Cherokee County.

and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1897. I have heretofore under said law as a resident of Cherokee county been allowed an invalid pension of one hundred Dollars, for the year 1896.

Sworn to and subscribed before me, this, the 20 day of July 1897. } A. C. Burr
A. C. Burr, Notary

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

STATE OF GEORGIA, }
Cherokee County. }

I, A. C. Burr Ordinary of said County, do certify that I am well acquainted with A. C. Burr 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 20th day of July 1897.



A. C. Burr
Ordinary Cherokee County.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
Cherokee County. }

I, A. C. Burr hereby authorize J. W. Johnson of Cherokee

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

A. C. Burr by check
at Boston Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 4th day of July 1898.

Executed in presence of

J. S. Burr

POWER OF ATTORNEY.

STATE OF GEORGIA, }
Cherokee County. }

I, A. C. Burr hereby authorize Wm. A. Wright of Atlanta Ga

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

me by check
at Boston Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 30th day of June 1899.

Executed in presence of

J. S. Burr

ACT OF MARCH 1891.
(For Those Already Enrolled.)

No. 1954

INVALID
SOLDIER'S PENSION.
1898.

Name A. C. Burr
County Cherokee
Disability Par. 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100
Amount, \$ 100.00
2/14 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO

J. W. Johnson

ACT OF MARCH 1891.
(For Those Already Enrolled.)

ACT OF MARCH 1891.
(For Those Already Enrolled.)

No. 1739

INVALID
SOLDIER'S PENSION.
1899.

Name Allen, C. Burr
County Cherokee
Disability Par. 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100
Amount, \$ 100.00
2/14 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO

W

ACT OF MARCH 1891.
(For Those Already Enrolled.)

ACT OF OCT. 24, 1887.
(For Those Already Enrolled.)

No. 1959

INVALID
SOLDIER'S PENSION.
1898.

Name A. B. Burr
County Cherokee
Disability Loss of leg
Amount, \$ 100.00

1898.
2/14

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO

T. H. Warrick

GEN. W. HARRISON, STATE PRINTER, ATLANTA.

No data

Allen B. Burr
Cherokee County

CONF. SECTION 126.
(For Those Already Enrolled.)

No. 1739

INVALID
SOLDIER'S PENSION.
1899.

Name Allen B. Burr
County Cherokee
Disability Loss of leg
Amount, \$ 100.00

1899.
2/11

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO

N

GEN. W. HARRISON, STATE PRINTER, ATLANTA.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears A. B. Burr 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 21st day of May, 1845; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Sergeant in Company 2, of 16th Regiment of Georgia Volunteers, Burnum's Brigade; that whilst engaged in such military service in the State of Georgia, on the 25th day of Nov, 1864, he was wounded, injured or diseased as follows: Wounded in left leg, causing loss of limb leg

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

Sworn to and subscribed before me, this, the A. B. Burr day of July, 1898. POST-OFFICE

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

STATE OF GEORGIA,

Cherokee County.

I, A. B. Burr Ordinary of said County, do certify that I am well acquainted with A. B. Burr 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 July, 1898.



A. B. Burr
Ordinary Cherokee County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears Allen B. Burr 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 21st day of May, 1845; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Sergeant in Company 2, of 16th Regiment of Georgia Volunteers, Burnum's Brigade; that whilst engaged in such military service in the State of Georgia, on the 25th day of Nov, 1864, he was wounded, injured or diseased as follows: Wounded in left leg, causing loss of limb limb both of Burnum's Brigade State of Georgia on Nov 25 1864

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1899. I have heretofore under said law as a resident of Cherokee County been allowed an invalid pension of one hundred Dollars, for the year 1898.

Sworn to and subscribed before me, this, the Allen B. Burr day of July, 1899. POST OFFICE

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

STATE OF GEORGIA,

Cherokee County.

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

Given under my official signature and seal, this 30 day of July, 1899.



A. B. Burr
Ordinary Cherokee County.

entitled for the year ending October 20th, 1898. I have heretofore under said law as a resident of Cherokee county been allowed an invalid pension of one hundred Dollars, for the year 1898.

Sworn to and subscribed before me, this, the 1st day of July, 1898. POST-OFFICE

A. B. Burns
Notary State fully the nature of wound or character of Cherokee which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA,

Cherokee County.

I, A. B. Burns Ordinary of said County, do certify that I am well acquainted with A. B. Burns 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 1st day of July, 1898.



A. B. Burns
Ordinary Cherokee County.

ing October 20th, 1898. I have heretofore under said law as a resident of Cherokee County been allowed an invalid pension of one hundred Dollars, for the year 1898.

Sworn to and subscribed before me, this, the 1st day of July, 1898. POST OFFICE

A. B. Burns
Notary State fully the nature of wound or character of Cherokee disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Cherokee County.

I, A. B. Burns Ordinary of said County do certify that I am well acquainted with A. B. Burns 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 1st day of July, 1898.



A. B. Burns
Ordinary Cherokee County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cherokee County.

I, A. B. Burns hereby authorize Wm. Wright of Atlantic to receive and receipt for the pension paid hereon and request that he remit same to me by check at Cherokee

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 1st day of July, 1898.

A. B. Burns [L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cherokee County.

I hereby authorize _____ of _____ to receive and receipt for the pension paid hereon and request that he remit same to _____ by _____ at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal this _____ day of _____, 1901.

[L. S.]

Executed in presence of

(For Those Already Enrolled.)

No. 3072

INVALID

SOLDIER'S PENSION.
1899.

Name A. B. Burns
County Cherokee
Disability Loss of leg
Amount, \$ 14.00

May 13 1899.

RICHARD JOHNSON

J. W. Lindsey
WARRANT HANDLED TO

J. W. LINDSEY, STATE PRINTER, ATLANTA.

No data

(For Those Already Enrolled.)

No. 2407

DISABLED

SOLDIER'S PENSION.
1901.

Name A. B. Burns
County Cherokee
Disability Loss of leg
Amount, \$ 14.00

2/12 1901.

JOHN W. LINDSEY

J. W. Lindsey
WARRANT HANDLED TO

J. W. LINDSEY, STATE PRINTER, ATLANTA.

Com. A.C.
 (For Those Already Enrolled.)
 No. *3172*
 INVALID
 SOLDIER'S PENSION.
 1899.
 Name *A.C. Corn*
 County *Cherokee*
 Disability *Loss of leg*
 Amount, \$ *14.00*
 Year *1899*
 RICHARD JOHNSON,
 Commissioner of Pensions.
 WARRANT HANDLED TO
Wright
 GEO. W. HARRISON, STATE PRINTER, ATLANTA.
No data

Com. A.C.
 (For Those Already Enrolled.)
 No. *2407*
 DISABLED
 SOLDIER'S PENSION.
 1901.
 Name *A.C. Corn*
 County *Cherokee*
 Disability *Loss of leg*
 Amount, \$ *14.00*
 Year *1901*
 JOHN W. LINDSEY,
 Commissioner of Pensions.
 WARRANT HANDLED TO
A.C. Corn
 GEO. W. HARRISON, STATE PRINTER, ATLANTA.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears *A.C. Corn* 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 *21st* day of *May* 186*2*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Sergeant* in Company *C*, of *56th* Regiment of *Volunteers, Cumming's* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *28th* day of *Nov.* 186*2*, he was wounded, injured or diseased as follows:

Received gunshot at Missionary Ridge on the 28th day of November 1862 which caused the loss of right leg

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

Sworn to and subscribed before me, this, *A.C. Corn* *28th* day of *January*, 1899, POST OFFICE *Canton Ga.*

A.C. Corn Ordery

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

STATE OF GEORGIA,

Cherokee County.

I, *A.C. Corn* Ordinary of said County, do certify that I am well acquainted with *A.C. Corn* 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 *30th*

day of *January*, 1899.

A.C. Corn
 Ordinary *Cherokee* County.



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears *A.C. Corn* 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 *21st* day of *May* 186*2*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Sergeant* in Company *C*, of *56th* Regiment of *Volunteers, Cumming's* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *28th* day of *Nov.* 186*2*, he was wounded, injured or diseased as follows:

Received gunshot in left leg which caused the loss of said limb

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

Sworn to and subscribed before me, this, *A.C. Corn* *14th* day of *July*, 1901, Postoffice *Canton*

A.C. Corn Ordery

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

STATE OF GEORGIA,

Cherokee County.

I, *A.C. Corn* Ordinary of said County, do certify that I am well acquainted with *A.C. Corn* 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 *14th*

day of *July*, 1901.

A.C. Corn
 Ordinary *Cherokee* County.



Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1899. I have heretofore under said law as a resident of Cherokee County been allowed an invalid pension of One Hundred Dollars, for the year 1898.

Sworn to and subscribed before me, this, the 11th day of January, 1899, POST OFFICE Camden Ga.

H. C. Burr Ordinary

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

STATE OF GEORGIA,
Cherokee County.

I, H. C. Burr Ordinary of said County, do certify that I am well acquainted with H. C. Burr 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 11th day of January, 1899.

H. C. Burr
Ordinary Cherokee County.



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

Sworn to and subscribed before me, this the 11th day of July, 1901, Postoffice Camden
H. C. Burr Ordinary

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

STATE OF GEORGIA,
Cherokee County.

I, H. C. Burr Ordinary of said County, do certify that I am well acquainted with H. C. Burr 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 11th day of July, 1901.

H. C. Burr
Ordinary Cherokee County.



POWER OF ATTORNEY.

STATE OF GEORGIA,
Cherokee County.

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension paid hereon and request that he remit same to _____ by _____ at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal this _____ day of _____, 1902.

[L. S.]

Executed in presence of _____

Comm, A. C. Cherokee Co.

CODE SECTION 1900.
(FOR THOSE ALREADY ENROLLED.)

No. 2105

DISABLED
SOLDIER'S PENSION
1902.

Name H. C. Burr
County Cherokee
Co. E Regiment 36th
Disability Loss of Leg.
Amount, \$ 100.00

1902.

774

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Ordry
JOHN W. LINDSEY, Commissioner of Pensions.

No date

Comm, A. C. Cherokee Co.

CODE SECTION 1900.
(FOR THOSE ALREADY ENROLLED.)

No. 2110

DISABLED
SOLDIER'S PENSION
1903.

Name H. C. Burr
County Cherokee
Co. E Regiment 36th
Disability Loss of Leg.
Amount, \$ 100.00

1903.

774

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Ordry
JOHN W. LINDSEY, Commissioner of Pensions.

JOHN W. LINDSEY, Commissioner of Pensions.

Comm, A.C.
Cherokee Co.

YOUR SECTION USE
(FOR THOSE ALREADY ENROLLED.)

No. 2108-

DISABLED
SOLDIER'S PENSION
1902.

Name A. B. Burns
County Cherokee
Co. E Regiment 36th
Disability Loss of Leg
Amount, \$ 100.00

1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

Ordry

Geo. W. Hartman State Printer, Atlanta.

No data

Comm, A.C.
Cherokee Co.

YOUR SECTION USE
(FOR THOSE ALREADY ENROLLED.)

No. 2210.

DISABLED
SOLDIER'S PENSION
1903.

Name A. B. Burns
County Cherokee
Co. E Regiment 36th
Disability Loss of Leg
Amount, \$ 100.00

1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

Ordry

Geo. W. Hartman State Printer, Atlanta.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears A. B. Burns 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 21st day of May, 1864; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Sergeant in Company E, of 36th Regiment of Volunteers, Burnside's Brigade; that whilst engaged in such military service in the State of Georgia, on the 21st day of May, 1864, he was wounded, injured or diseased as follows:

Burnshot in Left Leg, causing Loss of said Limb.

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

Sworn to and subscribed before me, this 11th day of May, 1902. Post-office A. B. Burns

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

STATE OF GEORGIA,

Cherokee County.

I, A. B. Burns Ordinary of said County, do certify that I am well acquainted with A. B. Burns 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 11th day of May, 1902.

A. B. Burns
Ordinary Cherokee County.

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

BOARD OF VETERANS

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears A. B. Burns 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 21st day of May, 1864; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Sergeant in Company E, of 36th Regiment of Volunteers, Burnside's Brigade; that whilst engaged in such military service in the State of Georgia, on the 21st day of May, 1864, he was wounded, injured or diseased as follows:

Burnshot in Left Leg, which caused the loss of said Leg.

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

Sworn to and subscribed before me, this 11th day of May, 1903. Post-office A. B. Burns

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

STATE OF GEORGIA,

Cherokee County.

I, A. B. Burns Ordinary of said County, do certify that I am well acquainted with A. B. Burns 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 11th day of May, 1903.

A. B. Burns
Ordinary Cherokee County.

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

ending October 20th, 1902. I have heretofore, under said law, as a resident of
Cherokee County, been allowed an invalid pension of
One hundred Dollars, for the year 1901.

Sworn to and subscribed before me, this the 11th day of May 1902. Post-office _____

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

STATE OF GEORGIA,

Cherokee County.

I, A. B. Connor Ordinary of said County, do certify that I am well acquainted with A. B. Connor 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 11th day of May 1902.



A. B. Connor
Ordinary Cherokee County.

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

BOARD OF VETERANS

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

Sworn to and subscribed before me, this the 12th day of May 1903. Post-office _____

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

STATE OF GEORGIA,

Cherokee County.

I, A. B. Connor Ordinary of said County, do certify that I am well acquainted with A. B. Connor 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 12th day of May 1903.



A. B. Connor
Ordinary Cherokee County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, A. B. Connor hereby authorize Wm. B. Wright of Atlanta Ga to receive and receipt for the pension paid hereon, and request that he remit same to A. B. Connor residing by Cherokee at Cherokee Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 11th day of May 1904.

Executed in presence of

A. B. Connor residing

A. B. Connor — [L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, A. B. Connor hereby authorize Wm. B. Wright of Cherokee 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 10th day of May 1905.

Executed in the presence of

J. D. Prie

A. B. Connor — [L. S.]

Conn. A.C.
Cherokee Co.
(FOR THOSE ALREADY ENROLLED.)
No. 2262
DISABLED
SOLDIER'S PENSION
1904.
Name W. B. Wright
County Cherokee
Co. E Regiment 36
Disability Loss of leg.
Amount, \$ 100.00
FEB 18 1904.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDLED TO
Andy
Geo. W. Harrison, W. F. Pratt, Albany.

no date
Conn. Alex. B.
Cherokee Co.
(FOR THOSE ALREADY ENROLLED.)
No. 2331
DISABLED
SOLDIER'S PENSION
1905.
Name Wm. B. Wright
County Cherokee
Co. E Regiment 36
Disability Loss of leg.
Amount, \$ 100.00
FEB 23 1905.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDLED TO
C
Geo. W. Harrison, W. F. Pratt, Albany.

Conn. A.C.
Cherokee Co.
(FOR THOSE ALREADY ENROLLED.)

No. 2262

DISABLED

SOLDIER'S PENSION 1904.

Name W. C. Connor
County Cherokee
Co. E Regiment 36 Ia
Disability Loss of leg.
Amount, \$100.00

FEB 18 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

Gen. W. H. HARRIS, State Printer, Atlanta.

no date

Conn. A.C.
Cherokee Co.
(FOR THOSE ALREADY ENROLLED.)

No. 2381

DISABLED

SOLDIER'S PENSION 1905.

Name Allen C. Connor
County Cherokee
Co. E Regiment 36 Ia
Disability Loss of leg.
Amount, \$100.00

FEB 23 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

Gen. W. H. HARRIS, State Printer, Atlanta.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears W. C. Connor 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 31st day of May, 1848; that he enlisted in the military service of the Confederate States (or of the State of Tenn) during the war between the States, and served as a Sergeant in Company E, of 36th Regiment of Georgia Volunteers Connor's Brigade; that whilst engaged in such military service in the State of Tenn, on the 25th day of November, 1862, he was wounded, injured or diseased as follows: Wounded at Battle of Missionary Ridge in Left Leg. Paining legs & side
limb

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

Sworn to and subscribed before me, this 10th day of January, 1904. W. C. Connor
W. C. Connor Post-office Cherokee

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

STATE OF GEORGIA,

Cherokee County.

I, W. C. Connor Ordinary of said County, do certify that I am well acquainted with W. C. Connor 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 10th day of January, 1904.

W. C. Connor
Ordinary Cherokee County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears Allen C. Connor 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 31st day of May, 1848; that he enlisted in the military service of the Confederate States (or of the State of Tenn) during the war between the States, and served as a Sergeant in Company E, of 36th Regiment of Georgia Volunteers Connor's Brigade; that whilst engaged in such military service in the State of Tennessee, on the 25th day of November, 1862, he was wounded, injured or diseased as follows: Wounded in Left Leg, which caused
the loss of said limb

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1905. I have heretofore, under said law, as a resident of Cherokee County, been allowed an invalid pension of one hundred Dollars, for the year 1904.

Sworn to and subscribed before me, this 10th day of January, 1905. Allen C. Connor
W. J. Webb Post-office Cherokee

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

STATE OF GEORGIA,

Cherokee County.

I, W. J. Webb Ordinary of said County, do certify that I am well acquainted with Allen C. Connor 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 10th day of Jan, 1905.

W. J. Webb
Ordinary Cherokee County.

NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1, 1905.

Cherokee County, been allowed an invalid pension of One hundred Dollars, for the year 1903.

Sworn to and subscribed before me, this the 7th day of January 1904. A. C. Corn
A. C. Corn Post-office _____

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

STATE OF GEORGIA,

Cherokee County.

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

Given under my official signature and seal, this 7th day of January 1904.



A. C. Corn
Ordinary Cherokee County.

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

Cherokee County, been allowed an invalid pension of One hundred Dollars, for the year 1904.

Sworn to and subscribed before me, this the 10th day of January 1905. Allen C. Corn
W. J. Webb Post-office _____

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

STATE OF GEORGIA,

Cherokee County.

I, W. J. Webb Ordinary of said County, do certify that I am well acquainted with Allen C. Corn 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 10th day of Jan 1905.



W. J. Webb
Ordinary Cherokee County.

Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1, 1905.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, A. C. Corn hereby authorize W. J. Webb, Ord. of Cherokee County to receive and receipt for the pension paid hereon, and request that he remit same to me by _____ at Boston Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 4th day of January 1906.

A. C. Corn [L. S.]

Executed in the presence of

W. J. Webb

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, A. C. Corn hereby authorize W. J. Webb of Boston 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 4th day of January 1907.

A. C. Corn [L. S.]

Executed in presence of

W. J. Webb

COPY SENT TO 1200.
(FOR THOSE ALREADY ENROLLED.)

No. 1113

DISABLED SOLDIER'S PENSION 1906.

Name A. C. Corn
County Cherokee
Co. B. Regiment 36th Ia
Disability Loss of leg
Amount, \$ 12.11 1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

THE PENSION OFFICE, U. S. DEPARTMENT OF WAR, WASHINGTON, D. C.

No data

COPY SENT TO 1200.
(FOR THOSE ALREADY ENROLLED.)

No. 2030

DISABLED SOLDIER'S PENSION 1907.

Name A. C. Corn
County Cherokee
Co. B. Regiment 36th Ia
Disability Loss of leg
Amount, \$ 12.11 1907.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

THE PENSION OFFICE, U. S. DEPARTMENT OF WAR, WASHINGTON, D. C.

Comm. A. C.
Cherokee County

Cons. Section 1206.
(FOR THOSE ALREADY ENROLLED.)

No. *1113*

**DISABLED
SOLDIER'S PENSION
1906.**

Name *A. C. Corn*
County *Cherokee*
Co. *B* Regiment *36* " *42*
Disability *Loss of leg.*
Amount, \$ *12.11* 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO *D*

No data

THE PENSIONER'S NAME AND RESIDENCE ON JAN. 1, 1906, MUST BE PRINTED IN FULL.

Comm. A. C.
Cherokee Co.

Cons. Section 1206.
(FOR THOSE ALREADY ENROLLED.)

No. *2030*

**DISABLED
SOLDIER'S PENSION
1907.**

Name *A. C. Corn*
County *Cherokee*
Co. *B* Regiment *36* " *42*
Disability *Loss of leg.*
Amount, \$ *12.11* 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO *D*

1907. W. H. HARRIS, TYPE PRINTER, ATLANTA.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Cherokee County.

Personally appears *A. C. Corn* 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 *21st* day of *May*, 18*44*; that he enlisted in the military service of the Confederate States, (or of the State of *Georgia*, 1862) during the war between the States, and served as a *Sergeant* in Company *C*, of *36*th Regiment of *Georgia* Volunteers *Cummins*'s Brigade; that whilst engaged in such military service in the State of *Florida*, on the *25th* day of *November*, 186*3*, he was wounded, injured or diseased as follows:
Burnshot wound in left leg, which caused the loss of said leg.

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 *Cherokee* County, been allowed an invalid pension of *one hundred* Dollars, for the year 1906.

Sworn to and subscribed before me, this *4th* day of *January*, 1906. *A. C. Corn*
Post-Office *Sanction*

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

State of Georgia,

Cherokee County.

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

Given under my official signature and seal, this *6th* day of *Jan*, 1906. *W. J. Webb*
Ordinary *Cherokee* County.



Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1st, 1906.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Cherokee County.

Personally appears *A. C. Corn* 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 *1844*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Brigade* in Company *C*, of *36*th Regiment of *Georgia* Volunteers *Cummins*'s Brigade; that whilst engaged in such military service in the State of *Florida*, on the *25th* day of *Nov*, 186*3*, he was wounded, injured or diseased as follows:
gun shot wound causing loss of left leg.

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 *Cherokee* County, been allowed an invalid pension of *one hundred* Dollars, for the year 1906.

Sworn to and subscribed before me, this *4th* day of *January*, 1907. *A. C. Corn*
W. J. Webb Postoffice *Sanction*

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

State of Georgia,

Cherokee County.

I, *W. J. Webb* Ordinary of said County, do certify that I am well acquainted with *A. C. Corn* 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 *4th* day of *January*, 1907. *W. J. Webb*
Ordinary *Cherokee* County.



Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1st, 1907.

of November 1868, he was wounded, injured or diseased as follows:
gunshot wound in left leg, which
caused the loss of said leg.

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 Cherokee County, been allowed an invalid pension of one hundred Dollars, for the year 1905.

Sworn to and subscribed before me, this the 4th day of January 1906.

A. C. Conn
Post-Office Carters

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

State of Georgia,

Cherokee County.

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

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

W. J. Webb
Ordinary Cherokee County.



Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1st, 1906.

gun shot wound causing loss of left leg,

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 Cherokee County, been allowed an invalid pension of one hundred Dollars, for the year 1906.

Sworn to and subscribed before me, this the 4th day of January 1907.

A. C. Conn
W. J. Webb Postoffice Carters

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

State of Georgia,

Cherokee County.

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

do certify that I am well acquainted with A. C. Conn 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 4th day of January 1907.

W. J. Webb
Ordinary Cherokee County.



Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1st, 1907.

Audited Feb. 20 1889.

Wm. H. Moulton
COMPTROLLER GENERAL

Cherokee
Maimed Soldiers.

Voucher No. 904.

Amount \$ 100

Paid to A. C. Conn

For Loss of leg,

July 26 1889

Included in Warrant No.

issued to Treasurer.

1889

WARRANT CLERK

W. J. Campbell, State Printer, Constitution, Savannah

Applicant

Cherokee

Maimed Soldiers.

Voucher No. 1664.

Amount \$ 100

Paid to A. C. Conn

For Loss of leg,

April 2 1890

Included in Warrant No.

issued to Treasurer.

1890

WARRANT CLERK

W. J. Campbell, State Printer, Constitution, Savannah

Applicant

1891.

Maimed Soldiers.

Voucher No. 1333

Amount \$ 100

Paid to A. C. Conn

For Loss of leg,

July 20 1891

Included in Warrant No.

issued to Treasurer.

1891

WARRANT CLERK

Wm. W. Harrison, State Printer, Atlanta

Applicant

CONFIDENTIAL

Amount \$ 100

Voucher No. 1333

Amount \$ 100

Paid to Allen C. Conn

For Loss of leg.

July 26 1889

Included in Warrant No. _____

issued to Treasurer.

WARRANT CLERK

W. J. Campbell, State Printer (Constitutional School Office)

Applicant

Amount \$ 100

Voucher No. 1333

Amount \$ 100

Paid to Allen C. Conn

For Loss of leg.

April 2 1890

Included in Warrant No. _____

issued to Treasurer.

WARRANT CLERK

W. J. Campbell, State Printer (Constitutional School Office)

Applicant

Amount \$ 100

Voucher No. 1333

Amount \$ 100

Paid to Allen C. Conn

For Loss of leg.

July 26 1889

Included in Warrant No. _____

issued to Treasurer.

WARRANT CLERK

W. J. Campbell, State Printer (Constitutional School Office)

Applicant

No. 907

STATE OF GEORGIA, } Atlanta, Ga. Feb 26 1889

EXECUTIVE DEPARTMENT.

Mr. Allen C. Conn of the County of Cherokee having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Act.

Dec. 24, 1888, and the same having been allowed for Loss of Left leg. He is entitled to receive the sum of One Hundred and 00/100 Dollars for such disability, the same being the allowance due for the year ending October 24, 1889.

The Treasurer will pay the same and hold his receipt on this voucher, and return same to Executive Department for warrant.

By the Governor, W. A. Harris GOVERNOR.

W. A. Harris CLERK EXECUTIVE DEPARTMENT.

100.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

One Hundred and 00/100 Dollars.

per above voucher, this 26 of Feb. 1889.

Allen C. Conn

No. 2664

STATE OF GEORGIA, } Atlanta, Ga. Apr 2 1890

EXECUTIVE DEPARTMENT.

Mr. A. C. Conn of the County of Cherokee 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 Loss of leg.

He is entitled to receive the sum of One Hundred Dollars for such disability, the same being the allowance due for the year ending October 24, 1890.

The Treasurer will pay the same and hold his receipt on this voucher, and return same to Executive Department for warrant.

By the Governor, W. A. Harris GOVERNOR.

W. A. Harris CLERK EXECUTIVE DEPARTMENT.

\$ 100

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

One Hundred and 00/100 Dollars.

per above voucher, this 2 of April 1890.

Allen C. Conn

Does of left leg
He is entitled to receive the sum of *One Hundred and 00/100* Dollars
for such disability, the same being the allowance due for the year ending October 24, 1889.

The Treasurer will pay the same and hold his receipt on this voucher, and return same to
Executive Department for warrant.

By the Governor,

W H Harrison

CLERK EXECUTIVE DEPARTMENT.

100.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

One Hundred and 00/100

Dollars.

per above voucher, this *26* of *July*, 1889.

Allen C. Conn

He is entitled to receive the sum of *One Hundred* Dollars
for such disability, the same being the allowance due for the year ending October 24, 1890.

The Treasurer will pay the same and hold his receipt on this voucher, and return same
to Executive Department for warrant.

By the Governor,

W H Harrison

CLERK EXECUTIVE DEPARTMENT.

\$ 100

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

One Hundred and 00/100

Dollars.

per above voucher, this *27* of *April*, 1890.

Allen C. Conn

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. }

1891.
No. *1833*

Atlanta, Ga. July 20 1891.

Mr. *(Allen C. Conn)* of the County
of *Cherokee* 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
Loss of leg *One Hundred* Dollars
He is entitled to receive the sum of *One Hundred* Dollars
for such disability, the same being the allowance due for the year ending October 24, 1891.

The Treasurer will pay the same and hold his receipt on this voucher and return same to
Executive Department for warrant.

By the Governor,

W H Harrison

Sec'y EXECUTIVE DEPARTMENT.

\$ 100

RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia.

One Hundred and 00/100

Dollars.

per above voucher, this *20* of *July*, 1891.

Allen C. Conn
per my own atty

Mr. Allen C. Conn of the County
of Cherokee 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
Dec 24 of 1891
He is entitled to receive the sum of One Hundred Dollars
for such disability, the same being his allowance for the year ending October 24, 1891.

The Treasurer will pay the same and hold his receipt on this voucher and return same to
Executive Department for warrant.



H. E. Nathan
GOVERNOR.

By the Governor,

W. M. Harrison

SECY EXECUTIVE DEPARTMENT.

\$100

RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia.

One Hundred and 00/100 Dollars,
per above voucher, this 20 of July, 1891.

Allen C. Conn
per G. M. Jones atty

POWER OF ATTORNEY.

STATE OF GEORGIA.

COUNTY. }

I, _____

lawfully authorize

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

at _____

by _____

Witness my hand and seal, this _____ day of _____ 190 _____

[L. S.]

Executed in presence of _____

PERIOD OF TIME, 10/1/07.
 Heretofore and to-wit: of the address and its continued efforts
 upon this to the end of the year as shown in the address qualified
 know nothing of it in.

JOHN W. LINDSEY,
 Com. of Pensioners.

Com. Samuel G. Lindsey
Indigent Pension
Indigent Co.

INDIGENT PENSION.

190 *7909*

Name *A. J. Court*

County *Cherokee*

Co. *E. 36" Ga.* Regt.

Approved _____ 190 _____

JOHN W. LINDSEY,
 Commissioner of Pensioners.

WARRANT HANDED TO

67957

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

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

14-16
4/30/07

Comrade Sam
1907
INDIGENT PENSION.
1907
Name Samuel J. Corbett
County Cherokee
Co. G. 36 " Y. Regt.
Approved 1907
JOHN W. LINDSEY
Commissioner of Pensions.
WARRANT HANDED TO
9/15/07
Ordinary with wife name of Applicant, Company and Regiment on back as index and above.
1907
9/30/07

Every Question Must
12. If upon the first ground, state how long you have been in such condition that you could not earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind and when and where you lost your sight. Have been for 30 years not able to do but very little manual labor have suffered with Rheumatism since a small boy and get older the more it affects me
13. What property, real and personal, or income, do you possess, and its gross value? Some small amount of Personal Property stake etc
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? Some small amount of land sold for support of family was not able to work and sold it
15. In what County did you reside during those years, and what property did you then return for taxation? Lived on Chickens County Ga. & returned same \$200. per year
16. How were you supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? Did all the labor I could & sold the above property & lived on my own labor or income. did not keep the cash but lived as the best I could
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? did not keep the cash but lived as the best I could
18. What was your employment during 1901, 1902, 1903, 1904, 1905, 1906 and 1907? What pay did you receive in each year? Lived on Farm & did all the labor I could
19. Have you a family? If so, who composes such family? Give their means of support. Have they a home, or other property? Their ages and how employed? My self and wife compose my family, have no children but one both children are young not able to do but small amount of work
20. Are you receiving any pension? If so, what amount and for what disability? none
21. Have you ever made an application for pension before? This is first application
22. How many applications have you ever made and under what class?

Sworn to and subscribed before me this the 28th day of August, 1907.
W. J. Webb Ordinary.
of Cherokee County. Applicant.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Cherokee COUNTY.
I S. J. Corbett of said State and County, having been presented as a witness in support of the application of Samuel J. Corbett for pension under section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:
1. What is your name and where do you reside? S. J. Corbett, Cherokee Ga.
2. Are you acquainted with Samuel J. Corbett, the applicant; if so, how long have you known him? Since two years
3. Where does he reside, and how long and since when has he been a resident of this State? Cherokee Ga. he is a native of Ga.
4. When, where and in what company and regiment did he enlist, and how do you know? In Jan 1862 comp. G. 36 " Ga Regt.
5. Were you a member of the same company and regiment? Yes
6. How long did he perform regular military duty? Since two years
7. When and where was his command surrendered? Apr 1865 State. W. G.
8. Were you present when it surrendered? was not
9. Was applicant present? was not
10. If he was not present, where was he? at home
When did he leave his command? falling of 1864 For what cause? Disability
By what authority he left? officers command How do you know all of this? was on the spot at that time & received my transfer from membership of the company
11. What property, effects or income has the applicant? (Give your means of knowledge) small amount of Personal Property have known him since
12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, did he make of same? some small property & land
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? has as stated above & lived off of the proceeds
14. What is the applicant's occupation and physical condition? does what he can on farm is old & suffers with Rheumatism and not able to do but small amount of labor
15. Is the applicant unable to support himself by labor of any sort; if so, why? he is 75 years of age and has Rheumatism at times is so bad he can scarcely get about
16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? lived his support & lived off of the same
17. What portion of his support for these four years was derived from his own labor or income? has lived as stated above
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code he is old & has no other way to rely on for a support
19. Who composes family? What property have they? Children's ages and their earning capacity? himself and wife compose the family
20. What interest have you in the recovery of a pension by this applicant? none
Sworn to and subscribed before me, this the 16th day of Sept, 1907.
W. J. Webb Ordinary. Witness.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cherokee COUNTY.
Personally came before me W. J. Webb and T. W. West, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully S. J. Corbett, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:
he is unable to do manual labor as he has Rheumatism and Catarrh of Kidney

and that we have no interest in said pension being allowed.
Sworn to and subscribed before me, this the 16th day of Sept, 1907.
W. J. Webb Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cherokee COUNTY.
I, W. J. Webb Ordinary, in and for said County, hereby certify that the applicant S. J. Corbett resides in said County, and has been a bona fide resident of this State since the 16th day of Sept, 1907, and that the witnesses, viz: M. J. Hendrix M. D. T. W. West M. D. & A. C. Corbett are of trustworthy character, and that their statements are entitled to full faith and credit.
I further certify that before answering the foregoing questions the applicant and each witness took the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witness before same was signed.
I further certify that the tax digest of Cherokee County shows that applicant returned for taxation in his name in 1901 \$396. Dollars of property; and in 1902 \$396. Dollars of property; in 1903 \$396. Dollars of property; in 1904 \$396. Dollars of property; in 1905 \$396. Dollars of property; in 1906 \$396. Dollars of property; in 1907 \$396. Dollars of property.
In my opinion the foregoing claim is made in good faith.
Witness my hand and seal of office, this 16th day of Sept, 1907.
W. J. Webb Ordinary.
of Cherokee County.

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

3. Were you a member of the same company and organization? *Yes*
6. How long did he perform regular military duty? *From 1864 to 1865*
7. When and where was his command surrendered? *At Stone Mountain, Va.*
8. Were you present when it surrendered? *Yes*
9. Was applicant present? *Yes*
10. If he was not present, where was he? *At Stone Mountain*
- When did he leave his command? *Spring of 1864* For what cause? *Disability*
- By what authority he left? *Officer in command* How do you know all of this? *Sworn to before me at that time & received my information from members of the company*
11. What property, effects or income has the applicant? (Give your means of knowledge.) *Small amount of Pension Certificate, some small money*
12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907? *Small piece of land*
- and what disposition, if any, did he make of same? *Sold the same last year*
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? *Sold as stated above & lived off of the proceeds*
14. What is the applicant's occupation and physical condition? *Does not have on farm is old & suffers with Rheumatism and not able to do but small amount of labor*
15. Is the applicant unable to support himself by labor of any sort; if so, why? *He is 70 years of age and has Rheumatism at times he can scarcely get about*
16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? *With his Pension Certificate & the same*
17. What portion of his support for these four years was derived from and own labor or income? *Small amount as stated above*
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code *He is old & has suffered with Rheumatism & is unable to do any work*
19. Who compose family? What property have they? Children's ages and their earning capacity? *Wife and two children*
20. What interest have you in the recovery of a pension by this applicant? *None*
- Sworn to and subscribed before me, this the *16* day of *Sept* 1907 } *W. J. Webb* Ordinary.

and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the *16* day of *Sept* 1907 } *W. J. Webb* Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cherokee COUNTY.

I, *W. J. Webb* Ordinary, in and for said County, hereby certify that the applicant, *D. J. Conn* resides in said County, and has been a bona fide resident of this State since the day of *1877* and that the witnesses, viz.: *M. G. Hendrix M. D. T. H. West M. D. & A. C. Conn* are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digest of *Cherokee* County shows that applicant returned for taxation in his name in 1901 *\$4.00* Dollars of property, and in 1902 *\$4.00* Dollars of property; in 1903 *\$4.00* Dollars of property; in 1904 *\$4.00* Dollars of property; in 1905 *\$4.00* Dollars of property; in 1906 *\$4.00* Dollars of property; in 1907 *\$4.00* Dollars of property.

In my opinion the foregoing claim is *\$396.* made in good faith.

Witness my hand and seal of office, this *16* day of *Sept* 1907 } *W. J. Webb* Ordinary.

NOTE.

1. 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 evidence you shall give will be the whole truth, so help you God."

2. Additional affidavits may be attached if blank spaces are insufficient.

3. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof in above set out.

STATE OF GEORGIA- CHEROKEE COUNTY.

In the matter of the claim of D.J.Conn, applicant for Pension.

Personally appeared before me, W.J.Webb, Ordinary in and for said County, A.C.Conn, who upon oath says, in regard to the above matter, that, he desires first, to amend his original Affidavit, to-wit: That on the 25th. day of Nov 1863, the Deponent was wounded by gun shot wound in left leg, which wound caused the loss of said limb; and Deponent was discharged from the army on the 30th. day of March, 1864, and went home, and when he arrived at home the said applicant, D.J.Conn, was at home ~~sick~~ on sick furlough from his command, and Deponent further says from his personal knowledge the said D.J. Conn was never able to return to his command; and remained at home untill the surrender of the army in 1865.

The said D.J.Conn was suffering from Rheumatism which he had been afflicted with from young man-hood; and the exposure in the service caused said trouble to be more severe, and for which he was sent home from the army in March 1864.

Sworn to and subscribed to before me,

this the 3rd. day of Dec. 1907.

W. J. Webb Ordinary Cherokee Co., Ga.

A.C.Conn, who upon oath says, in regard to the above matter, that, he desires first, to amend his original Affidavit, to-wit: That on the 25th. day of Nov 1863, the Deponent was wounded by gun shot wound in left leg, which wound caused the loss of said limb; and Deponent was discharged from the army on the 30th. day of March, 1864, and went home, and when he arrived at home the said applicant, D.J.Conn, was at home ~~sick~~ on sick furlough from his command, and Deponent further says from his personal knowledge the said D.J. Conn was never able to return to his command; and remained at home until the surrender of the army in 1865.

The said D.J.Conn was suffering from Rheumatism which he had been afflicted with from young man-hood; and the exposure in the service caused said trouble to be more severe, and for which he was sent home from the army in March 1864.

Sworn to and subscribed to before me,

this the 3rd. day of Dec. 1907.

H. J. Webb
Ordinary Cherokee Co., Ga.

A. C. Conn

POWER OF ATTORNEY.

STATE OF GEORGIA.

Know all Men by these Presents, That I, Mary M. Wardof Cherokee COUNTY.County, in said State, do hereby appoint William R. Yarnallof Atlanta Ga my true and lawful attorney in fact, for

me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the

State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby author-

izing 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 9thday of Sept 1894.

[L. s.]

Executed in the presence of us

Mary M. WardWm R. YarnallD. B. Richards

DIRECTIONS

If allowed, send amount by bank to Mary M. Ward onlyme at Atlanta Ga and oblige.Mary M. WardWm R. YarnallD. B. Richardsof Bonnie Mary
Cherokee

1894.

No. 4165

Widow's Pension.

for year ending February 15, 1894.

PAID TO

Mrs. Mary M. Ward

OF

Cherokee

COUNTY.

Warrant Issued.

9/15

AND HANDED TO

W. H. H.

1894.

POWER
STATE OF GEORGIA,
COUNTY OF Cherokee
Know all Men by these Presents, That I, William R. Norman
County, in said State, do hereby appoint
of Atlanta Ga
me and in my name, to receive and receipt
State of Georgia as a widow of a Confederate
State of Georgia to receipt in my name
any sum of money which may be coming
IN WITNESS WHEREOF, I have
day of February 1894.

Executed in the presence of us
A. B. Morris, Ordinary
D. C. Richards
If allowed, send amount by bill
to Camden Ga

Warrant Issued.
3/15
AND HANDED TO
W. A. H.
ATLANTA, GA.:
Geo. W. HARRISON, State Printer,
(Franklin Publishing House,
46-47 Ivy Street.)

POWER OF ATTORNEY.
STATE OF GEORGIA,
COUNTY OF Cherokee
Know all Men by these Presents, That I, Mary M. Morris
County, in said State, do hereby appoint William R. Norman
of Atlanta Ga my true and lawful attorney in fact, for
me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the
State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby author-
izing 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 9th
day of February 1894.
Executed in the presence of us
A. B. Morris, Ordinary
D. C. Richards

DIRECTIONS
If allowed, send amount by check to A. B. Morris only to
me at Camden Ga, and oblige.
Mary M. Morris
mark

Affidavit to be Made by the Widow.

STATE OF GEORGIA,)
COUNTY OF Cherokee)
In person came before me, the undersigned Ordinary
Mrs. Mary M. Morris, who being sworn according to law, says under
oath that she is the widow of Francis M. Morris, who was a soldier in
the service of the Confederate States, and served as a member of Company F
of the 28th Regiment of Infantry Volunteers; that he enlisted in said
service on or about the day of August 1861, and was in the
Army up to 1862. That while in the
Army, he was on the day of May 1862, (See Note No. 1)
he received an injury which caused his death.
The injury he received was a double thigh
by a rebel gun which he was a great
distance to long as he lived. His death occurred
on 9th day of September in Franklin County Texas where
he had been taken with 5 of his brothers with
full of the year 1862 then his husband was never
able to perform any manual labor after the loss
discharge from the Army of the Confederate States
at the time of his death.
That she returned to Cherokee County Georgia in
the Fall of the year 1863 and has resided in Franklin
County Georgia since.

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 15th day
of April 1862, and that she has resided in Georgia continuously since the
day of 1862; 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,
1894, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this the 9th day of February 1894.
A. B. Morris
Ordinary.

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

Widow's Pension.
for year ending February 15, 1894.
PAID TO
Mary M. Morris
OF
Cherokee
COUNTY.
Warrant Issued.
3/15
AND HANDED TO
W. A. H.
ATLANTA, GA.:
Geo. W. HARRISON, State Printer,
(Franklin Publishing House,
46-47 Ivy Street.)

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

I, *D. L. Burr*, County Clerk of *Cherokee* County, Georgia, do hereby certify that *Mrs. Rachel W. Burr* is the widow of *Thomas M. Burr*, who died of disease contracted in the service of the Confederate Army, and who has never been remarried. The law does not provide for any one living out of the State of Georgia, or who did not live in the State at the date of the Act.

Our opportunity for knowing the facts stated in reference to death of applicant's husband were *and are fully set out in the general application above.* *Mrs. Rachel W. Burr* deposes that she was with *Thomas M. Burr* his last illness, and she fully testified that *Thomas M. Burr* was the cause of his death, that he *was* *Thomas M. Burr*, and that he died of disease contracted in the service of the Confederate Army, and who has never been remarried.

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

Sworn to and subscribed before me, this *6th* day of *February*, 1894 *D. L. Burr* Ordinary.

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

2. If the husband died after the war of wounds or disease, state fully and particularly how you, as witnesses, know the service as a soldier was the immediate cause of his death.

Those whose husbands went to the army and have never been heard from since the war.

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

No pension can be paid for previous years.

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

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

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

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

If husband died since the war testimony by physicians must be produced.

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 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.

STATE OF GEORGIA, County of *Cherokee*

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the *6th* day of *February*, 1895.

D. L. Burr Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, *Cherokee* County.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *6th* day of *February*, 1895.

Mrs. Rachel W. Burr [L. S.]

Executed in the presence of us:

D. L. Burr *S. L. Richards*

DIRECTIONS.

Send amount by *Cherokee* *D. L. Burr* and oblige me at *Cherokee* *Mrs. Rachel W. Burr*

WIDOW'S PENSION.

No. *2410*

1895.

FOR THOSE HERETOFORE PAID.

Comm. Mary M. Burr

Cherokee Co.

PAID TO —

Mrs. Rachel W. Burr

WARRANT ISSUED

Feb 4

AND HANDLED TO

Cherokee

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

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

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

Executed in the presence of us:

A. L. Burns Ordinary
S. L. Richards

DIRECTIONS.

Send amount by check to A. L. Burns Ordinary, to
me at Canton Georgia, and oblige
Mary M. Burns mark

FOR THOSE HERETOFORE PAID.

1895.

No. 2410

WIDOW'S PENSION,

for year ending February 15th, 1895.

PAID TO —

Mary M. Burns

OR A. L. Burns
Francis M. Burns
widow of John M. Burns
County.

WARRANT ISSUED
Feb 7
1895.

AND HANDED TO
A. L. Burns

Done at Savannah, South Carolina.

Cour. Mary M. Burns
Charleston

Form 1.
For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Charleston

Personally Comes Mrs.

Mary M. Burns

who being sworn, says on oath, that she is a bona fide resident of said county of Charleston State of Georgia, and that she has resided in said State continuously ever since 1878 That she is the Widow of Francis M. Burns who was a Soldier in Company F of the 2nd Regiment of Georgia Volunteers, that he enlisted in said Regiment on or about the month of December 1861 and served in the Army up to 1862 That he lost his life on the 18 day of 18 (State here full particulars of the husband's death, when, where and from what cause.)

Said Husband died after the surrender with injuries received in the battle of York River in the State of Virginia

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 1862, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this

Fifth day of January, 1895.
A. L. Burns Ordinary. } Mary M. Burns mark
Post-office Charleston

Volunteers, that he enlisted in said Regiment on or about the month of November 1861 and served in the Army up to 1862 That he lost his life on the _____ day of _____ 18 (State here)

Said Newband died after the surrender
with injuries received on the retreat from
York town in the state of Virginia

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 1862, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this }
Fifth day of January 1895. } Mary M. ^{by} Horn
J. L. Horn. Ordinary. } Post-office ^{mark} ~~Carroll~~

State of Georgia } J. S. L. Horn ordinary in and for
the whole County } said County
do hereby certify, that I was
well acquainted with the aforesaid J. M. Horn
and know of my own knowledge that he was a thief
as stated in affidavits of witnesses also know said horn
received and as stated and was well acquainted
with him from the time he went into Georgia till
he left for Texas and know that he suffered very
immensely from said hunt, at times his horse would
drop and he was forced to fly on his back with his
feet up for a considerable length of time
given under my hand & Seal Feb. 9th 1894

Wansee Ga
July 20 1894.

Don't pick

I think it is my duty to write this letter to you in connection with the Cause of Education for America &c.

Wm. L. Connel our friend and was the Father of our friend of his Companion at the time he got the hurt that he almost proved his death. He was in that at the time and he was in the line of battle for our Union, in the night he slipped into a trap and he was in the line of battle. A Southern man stated once after to someone himself was in the line of battle on both sides in fact it seemed that the rim of his lower belly was torn all the way across. His bones were driven into the bottom immediately the Regiment. Surgeon could do nothing for him but send him to the

name of George J. W. Morris and among them for
 to know the name of said Morris
 do hereby certify that I was
 well acquainted with the aforesaid J. W. Morris
 and know of my own knowledge that he was a Union
 as stated in affidavits of witnesses also know said Morris
 received and as stated and was well acquainted
 with him from the time he went into service till
 he left for Texas and know that he suffered very
 severely from said heat, at times his hands would
 drop and he was forced to lie on his back with his
 feet up for a considerable length of time
 given under my hand & seal Feb. 9th 1864
 J. W. Morris, ordinary

Dear Sir

I think it is my duty to write the
 letter to you in connection with the case
 of Sebastian for Perjury &c
 John Morris in Arkansas was the Prisoner
 and of his Company at the time he got
 the letter that he should leave the army
 was in duty at the time but was in
 need of a little rest for some days, so he went
 to the house of a friend and stayed there
 the house of a friend of mine at that time
 to secure himself weather he the weather
 one little while in fact it seemed that the
 rain of his lower belly was torn all the way
 down his groin and down into the bottom
 immediately the Regiment - George would
 do nothing for time but I sent him to see

of the Georgia Militia in the City of
 Savannah his brother having been there all
 time he was killed & buried and to make an
 incision on an extensive operation to get
 them back, I mean for the time his wounds
 went down through his back so to get them up
 again when they were up the place inside and
 out kept him on his back on his front he was
 covered with blood making it hard for him to
 get up or down when his wounds went down
 again they then tried to take them out with a knife
 which utterly failed going to the evening being
 so large they then cut his back in a cross
 shape and long it round his back and which
 kept him from the Army
 Long Morris was a man of exemplary habits a
 devoted member of the Baptist Church a good citizen
 and a devoted husband and a worthy woman son
 about 60 years of age and very infirm
 while the army on every point is that all I could share
 I hope you will deem it sufficient to show the
 Pension I am not to be disappointed by the answer
 Respectfully yours
 J. M. Hunter

swallowers on an attempt to separate to get
thine heart, I mean that the Lord his bowels
went down through Caper to get them up
again, then saved up the place inside and
set forth him on his back on his front then
cleaved for of words, thinking it made they had time
to get up the his face, when his bowels went down
again, they then forced to take them up with a Sledge,
which utterly failed, going to the burning bridge
so large they then set his bowels in a wheelbarrow
and lying it round his heart, and then
again him from the army.
Robert Conner was a man of exemplary habits, a
devoted member of the Baptist Church, a good citizen
and a diligent his widow a worthy woman now
about 60 years of age and very infirm.
While the army on Perry Point is but 200 I could spare
I hope you will deem it expedient to award the
Pension. I am not to be hindered by the award.
Respectfully Yours
J. M. Gentry

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

County

I, Wm. S. Lindsey Ordinary of said County, do certify that I know Mrs. A. C. Conn 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 1st day of Oct. 1919

That I also know A. C. Conn 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 credit.

Sworn under my hand and official seal of office this 14th day of Oct. 1919.
(SEAL) Wm. S. Lindsey Ordinary.
County.

NOTES: 1. Before any pension is granted, the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will tell the truth, so help you God."
2. All affidavits must be made before the Ordinary of the county of residence.
3. Affidavits must be made before the Ordinary of the county of residence.
4. Affidavits must be made before the Ordinary of the county of residence.
5. Affidavits must be made before the Ordinary of the county of residence.
6. Affidavits must be made before the Ordinary of the county of residence.

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.

County Cherokee
Name Mrs. S. C. Conn
Widow of S. C. Conn
Company 30th Co. Infantry
Regiment 30th Co. Infantry
Approved _____

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

10-20-1919

CERTIFICATE

Ordinary of said County, do certify that I
applicant for this pension, and that she is the
fide continuing resident of said County and was

witness as to marriage, and I also know
both of the foregoing were duly sworn by me
truthful and trustworthy and their statements

19th day of Sept - 1917
J. M. Sautzfeld Ordinary
Cherokee County

swear applicant and the witness in the following words:
"I do solemnly swear that I 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."
Additional affidavits may be attached if blank spaces are insufficient.
All affidavits must be made before the Ordinary of the county of residence.
Only widows who married prior to first January, 1881, are entitled.
Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general
reputation.
Widows of Disabled 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.

Regiment 30th Co. Negroes
Approved
J. W. LINDSEY,
Commissioner of Pensions.
Byrd Printing Co., State Printers, Atlanta.

10-20-1917

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,
Cherokee COUNTY }

I, J. M. Sautzfeld Ordinary of said County, do certify that I
know Mrs. S. J. Connor 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 19th day of Sept 1917

That I also know A. G. Connor 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 credit.

Sworn under my hand and official seal of office this 19th day of Sept 1917
(SEAL) J. M. Sautzfeld Ordinary
Cherokee County

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words:
"You do solemnly swear that you will true answers make to each of the questions asked you and the evidence
you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. 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 license if obtainable. If not, prove marriage, by some person, or by general
reputation.
6. Widows of Disabled 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.

10-20-1917
Cherokee Co. Georgia
No.

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 1916.

County Cherokee
Name Mrs. S. J. Connor
Widow of S. J. Connor
Company
Regiment 30th Co. Negroes
Approved

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

10-20-1917

10.20.1917

Cherokee Co.

No. *1*

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 1913.

County *Cherokee*

Name *Mrs S. C. Corn*

Widow of *S. J. Corn*

Company *7*

Regiment *36th Co. 149th Regt.*

Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10.20.1917

WIDOW'S AFFIDAVIT

STATE OF GEORGIA,

Cherokee COUNTY.

Personally before me comes *Mrs S. C. Corn* of said County, who, after being duly sworn, says that she is the widow of *S. J. Corn* to whom, in the County of *Cherokee* State of *Georgia* she was married on the _____ day of _____ 1888, and that she remained his wife, and resided with him to the date of his death in *May 22nd* 1917, and that she has not since his death remarried. At the time of his death he was a resident of *Cherokee* County, in said State of Georgia, and he was on the *indigent* Pension Roll of the State and paid a pension of \$90⁰⁰ in *Cherokee* County for 1917, per annum, on account of being a soldier in Company *7* Regiment *36th Co. 149th Regt.* (Volunteers or State Militia)

That she is now a bona fide resident citizen of said County of *Cherokee* and she has so continuously resided since _____ day of *all her life* 19____.

Sworn to and subscribed before me, this the

26th day of *May* 1917
J. M. Safford Ordinary
of *Cherokee* County.

Mrs S. C. Corn
Wife

(SEAL)

Affidavit of Witnesses to Prove Marriage and to Whom. Date of Death of Husband

STATE OF GEORGIA,

Cherokee COUNTY.

Personally before me comes *A. C. Corn* 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. C. Corn* who made the foregoing affidavit, is the lawful widow of *S. J. Corn* who died in *Cherokee* County in said State of *Georgia* on *22nd* day of *May* 1917, and that she has not since remarried. That she became the wife of *S. J. Corn* on the *26th* day of _____ 1888, and that she and he had resided together as man and wife *from 1888 till his death in May 22nd 1917, over which period knowledge* wife continuously since _____ 1888, and that the *S. J. Corn* was the same man who was on the pension roll of said State *Georgia* from *Cherokee* County _____ when he died.

Sworn to and subscribed before me, this the

15th day of *Sept.* 1917
J. M. Safford Ordinary
of *Cherokee* County.

A. C. Corn

(SEAL)

of Georgia, and he was on the indigent Pension Roll of the State and paid a pension of \$ 70 in Cherokee County for 1917 per annum, on account of being a soldier in Company E Regiment 36th Ga. Inf. (Volunteers or State Militia)

That she is now a bona fide resident citizen of said County of Cherokee and she has so continuously resided since all her life day of 19

Sworn to and subscribed before me, this the 26th day of Aug. 1917
J. M. Safford Ordinary
of Cherokee County.

Mrs. S. G. L. Loom
wid

(SEAL)

**Affidavit of Witnesses to Prove Marriage and to Whom.
Date of Death of Husband**

STATE OF GEORGIA,

Cherokee COUNTY.

Personally before me comes A. G. Loom 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. G. Loom, who made the foregoing affidavit, is the lawful widow of S. G. Loom who died in Cherokee County in said State of Ga. on 22nd day of May 1917, and that she has not since remarried. That she became the wife of S. G. Loom on the 22nd day of May 1888, and that she and he had resided together as man and wife continuously since that date 1888, and that the S. G. Loom was the same man who was on the pension roll of said State Ga. from Cherokee County when he died.

Sworn to and subscribed before me, this the 1st day of Sept. 1917
J. M. Safford Ordinary
of Cherokee County.

A. G. Loom

(SEAL)

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, *John B. G. Cook*

W. D. Young

of *Thomson County*, Georgia,

being authorized

to receive and receipt for the pension allowed and request that he remit same to *J. B. G. Cook*

Cook

at *Lawson*

by *Cook*

Witness my hand and seal this *6th* day of *April*, 1895.

Executed in presence of

J. B. G. Cook, ending

J. B. G. Cook

Return of J. B. G. Cook
See 3rd page

Fig 315
John B. G. Cook
INDIGENT PENSION
1895.

Name *John B. G. Cook*

County *Thomson*

Ground

July 1. 96 1895
RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

att

Geo. W. Harrison, State Printer, Atlanta.

July 1.96
RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Alabama.

TORNEY.

by *John B. G. Cook*
1895.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

1. *John B. G. Cook*

W. D. King

hereby authorize

of *Cherokee County Ga*

to receive and receipt for the pension allowed and request that he remit same to *D. C. Brown*

at *Cherokee* *by* *John B. G. Cook*

Witness my hand and seal this *6th* day of *April* 1895.

Executed in presence of

D. C. Brown, endorser

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Cherokee

County.

John B. G. Cook

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)
John B. G. Cook in Cherokee County Ga.
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State?
Cherokee County 15 years
3. When and where were you born? *December 4, 1815 in New Co. Ga.*
4. Did you volunteer in the Confederate Army or in the Georgia Militia? *State Militia*
5. When and where did you enlist? *July 1st, August 1st, 1862 Cherokee Co.*
6. In what company and regiment did you enlist? *Co. C Cherokee Legion*
7. How long did you remain in that company and regiment? *6 months*
8. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge or transfer?
9. For how long a period did you discharge regular military duty? *Six months*
10. When, where, and under what circumstances were you discharged from service?
At the expiration of 6 months was discharged at Rome Ga.
11. What is your present occupation? *As old man on farm*
12. How much can you earn per annum by your own exertions or labor? *None*
13. What has been your occupation since 1865? *Farming*
14. What sum would be necessary for your support for this pension year, and how much are you able to contribute thereto either in labor or income? *Some \$200 or \$300 more and my*
15. What is your present physical condition and how long have you been in such condition?
am broke have from age & infirmity something over a year
16. 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"?
17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight?
have lost age & poverty & infirmity & poverty
18. What property, effects or income do you possess? *Some \$40 dollars personal*
19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same? *Could not on about \$40*
20. In what County did you reside during those years and what property did you then return for taxation?
in Cherokee returned some \$40 dollars worth of tax
21. How were you supported during the years 1893 and 1894? *have supported myself as best I could from my own labor*
22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *Some \$20 or \$40 per year. all*
23. What was your employment during 1893 and 1894? What pay did you receive in each year?
Farming
24. Are you married and have you a family? If so, is your wife living and how many children have you? Give age and sex of children and their means of support? *my wife is dead have two children one son married one girl in house with me*

1895.

Name *John B. G. Cook*

County *Cherokee*

Ground

July 1.96

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

att

Geo. W. Harrison, State Printer, Alabama.

Return to *John B. G. Cook*
Dec 3. 1895
INDIGENT PENSION

Don't know source from age & infirmity & poverty.
Over 9 years

16. 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"?
17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight?
Lost first eye & poverty & infirmity & poverty

18. What property, effects or income do you possess? *Small \$40 dollars personal*
19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same? *Sold out on about 1840*

20. In what County did you reside during those years and what property did you then return for taxation?
In Cherokee returned some 40 dollars worth of prop
21. How were you supported during the years 1893 and 1894? *have subsisted only self as best I could from my own labor*
22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *about 35 or 40 per year. all*
23. What was your employment during 1893 and 1894? What pay did you receive in each year?
Farming
24. Are you married and have you a family? If so, is your wife living and how many children have you? Give age and sex of children and their means of support? *my wife is dead have two children one son married one girl in house with me*

Returning to completion
See 3rd page

315
Large John B. back
Cherokee
INDIGENT PENSION
1895.

Name John B. G. back
County Cherokee
Ground
July 1. 96
RICHARD JOHNSON,
Secretary Executive Department
WARRANT RETURNED TO
att
One W. Harrison, New Printer, Atlanta

25. Are you receiving a pension under any law of this State, if so what amount and for what disability?
no
Sworn to and subscribed before me this the
2 day of April 1895.
D. B. Gorm
of Cherokee County.
Ordinary

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Cherokee County.
William W. Sperrin, of said State and County, having been presented as a witness in support of the application of John B. G. back for pension under the Act approved December 15th, 1894, and after being duly sworn true answers to make the following questions, deposes and answers as follows:
1. What is your name and where do you reside? *William W. Sperrin Cherokee County Ga*
2. Are you acquainted with *John B. G. back*, the applicant, if so how long have you known him? *about 35 or 40 years*
3. Where does he reside, and how long has he been a resident of this State? *in Cherokee Co. near a Woodland lot owned by him*
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? *I know he served in the State Militia of several months*
5. When, where and in what company and regiment did he enlist? *any and was in Cherokee Co. 1st Company & Cherokee's Legion*
6. Were you a member of the same company and regiment? *I was*
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? *Several months discharged at Cherokee*
8. What property, effects or income has the applicant? (Give your means of knowledge.) *My mother standing on the lot & property*
9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? *as I understand it applicant has owned no property for several years*
10. What is the applicant's occupation and physical condition? *has been farmer from his appearance & looks like he was unable to do manual labor*
11. Is the applicant unable to support himself by labor of any sort, if so, why? *he is from his age he being 70 years of age*
12. How was he supported during the years 1893 and 1894? *can not tell*
13. What portion of his support for these two years was derived from his own labor or income? *can not answer*
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? *he is old and infirm*
15. What interest have you in the recovery of a pension by this applicant? *none*
Sworn to and subscribed before me, this
the day of April, 1895.
Applicant.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cherokee County.
Personally came before me, *W. L. Coleman* and *C. Pickett*, both known to me as reputable physicians of said County, who being severally sworn, say on oath that they have examined carefully *John B. G. back*, applicant for pension under the Act of 1894, and after such personal examination, say that his precise physical condition is as follows:
We find that he is 70 years old and that he has Hemorrhoids and is very weak and infirm and unable to do manual labor
We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.
Sworn to and subscribed before me, this
the day of April 1895.
W. L. Coleman M.D.
C. Pickett M.D.
D. B. Gorm, sending

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cherokee County.
1. *D. B. Gorm*, Ordinary in and for said County, hereby certify that the applicant *John B. G. back* 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: *W. L. Coleman, C. Pickett & Wm. W. Sperrin* 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 were signed.
I further certify that the tax digests of *Cherokee* County show that applicant returned for taxation in his name in 1893, *Forty eight* dollars of property, and in 1894, *Forty* dollars of property.
Witness my hand and seal of office, this 2nd day of April 1895.
D. B. Gorm Ordinary
of *Cherokee* County.

NOTE.
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 evidence you shall give will be the whole truth, so help you God."

6. Were you a member of the same company and regiment? *Yes*
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? *Sworn to 4 months. Discharged at ...*

8. What property, effects or income has the applicant? (Give your means of knowledge.)
my mother standing on her ...
9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? *as ...*
10. What is the applicant's occupation and physical condition? *has been farmer from his appearance ...*
11. Is the applicant unable to support himself by labor of any sort, if so, why? *he is from his eyes he being 70 years of age*
12. How was he supported during the years 1893 and 1894? *can not state*
13. What portion of his support for these two years was derived from his own labor or income? *can not answer*
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? *he is old and infirm*
15. What interest have you in the recovery of a pension by this applicant? *none*

Sworn to and subscribed before me, this *11th* day of *April*, 1895.
Wm. C. Spierin
Applicant.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cherokee County.

I, *D. B. Coon*, Ordinary in and for said County, hereby certify that the applicant *John B. Cook* 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: *W. L. Coleman, C. Chalkley & Wm. W. Spierin* 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 were signed.

I further certify that the tax digests of *Cherokee* County show that applicant returned for taxation in his name in 1893, *Forty eight* dollars of property, and in 1894, *Forty* dollars of property.

Witness my hand and seal of office, this *2nd* day of *April*, 1895.
D. B. Coon Ordinary
of *Cherokee* County.

NOTE.

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 evidence you shall give will be the whole truth, so help you God."

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, *John B. Cook*, hereby authorize *W. A. Wright* of *Georgia* to receive and receipt for the pension paid hereon and request that he remit same to *D. B. Coon* ordinary by *check* at *Benton*.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *28th* day of *March*, 1895.
John B. Cook [L. S.]

Executed in presence of
Wm. Kelly
A. H. McClure

POWER OF ATTORNEY.

State of Georgia,

Cherokee County.

I, *J. B. Cook*, hereby authorize *Wm. A. Wright* of *Georgia* to receive and receipt for the pension paid hereon and request that he remit same to *D. B. Coon* ordinary by *check* at *Benton*.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *4th* day of *April*, 1895.
J. B. Cook [L. S.]

Executed in presence of
D. B. Coon
Ordinary

INDIGENT
Soldier's Pension.

1897.

Name *John B. Cook*
County *Cherokee*

May 9 1897.
RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO
Atty

Wm. Kelly

INDIGENT
SOLDIER'S PENSION,

1898.

Name *J. B. Cook*
County *Cherokee*

WARRANT ISSUED

1/2 1898.
RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO
Wm. Kelly

Wm. Kelly

Capt. John B. L. Book
Cherokee County

ACT OF 15 DEC. 1891.
(For Those Already Enrolled.)

No. 208

INDIGENT

Soldier's Pension.

1897.

Name John B. L. Book
County Cherokee

1897.
July 9

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO

Atty

No date

Book J. B. L.
Cherokee Co.
(For Those Already Enrolled.)

No. 2004

INDIGENT

SOLDIER'S PENSION,

1898.

Name J. B. L. Book
County Cherokee

WARRANT ISSUED

1898.
July 20

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO

Atty

Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears John B. L. Book 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 4th day of December 1818; that he is 77 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 18 months in Company D, of the 1st Regiment of Cherokee Cavalry, that his physical condition is as follows: He is old and infirm and broke down generally from age.

that his property consists of the following items: one milk cow and a small amount of household goods.

of the value of Twenty or twenty-five 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 1897. I have heretofore as a resident of Cherokee county been allowed a pension for the year 1896.

Sworn to and subscribed before me, this, 23rd day of Dec 1896, J. B. L. Book Ordinary.

STATE OF GEORGIA,

Cherokee County.

I, A. C. Burin Ordinary of said County, do certify that I am well acquainted with John B. L. Book 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 23rd day of Dec 1896.



A. C. Burin Ordinary Cherokee County.

NOTE.—The blank spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears J. B. L. Book 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 4th day of Dec 1818; that he is 77 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 18 months in Company D, of the 1st Regiment of Cherokee Cavalry, that his physical condition is as follows: He is old and infirm and broke down generally from age.

that his property consists of the following items: Small amount of household and kitchen furniture, and one milk cow.

of the value of Twenty or twenty-five 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 Cherokee county been allowed a pension for the year 1896.

Sworn to and subscribed before me, this, 4th day of Aug 1898, J. B. L. Book Ordinary.

State of Georgia,

Cherokee County.

I, A. C. Burin Ordinary of said County, do certify that I am well acquainted with J. B. L. Book 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 4th day of Aug 1898.



A. C. Burin Ordinary Cherokee County.

NOTE.—The blank spaces must be filled.

1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1897. I have heretofore as a resident of Cherokee county been allowed a pension for the year 1896

Sworn to and subscribed before me, this, the

25th day of Nov 1896

A. C. Burr Ordinary.

STATE OF GEORGIA,
Cherokee County.

I, A. C. Burr Ordinary of said County,

do certify that I am well acquainted with John R. L. Cook 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 23d day of Decemr 1896



A. C. Burr

Ordinary Cherokee County.

Note.—The blanks spaces must be filled.

Dependent desires to participate in the benefits of the Act, approved December 16th, 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 Cherokee county been allowed a pension for the year 1897

Sworn to and subscribed before me, this, the

4th day of July 1898

A. C. Burr Ordinary.

State of Georgia,
Cherokee County.

I, A. C. Burr Ordinary of said County,

do certify that I am well acquainted with J. R. L. Cook 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 4th day of July 1898



A. C. Burr

Ordinary Cherokee County.

Note.—The blank spaces must be filled.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cherokee County.

I, John R. L. Cook hereby authorize

Wm. A. Wright of Atlanta Ga

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

A. C. Burr, ordinary at Canton Ga

by cook

Witness my hand and seal this 1st day of January 1899

Executed in presence of

A. C. Burr, ordinary } John R. L. Cook (L. S.)

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cherokee County.

I, John R. L. Cook hereby authorize

Wm. A. Wright of Atlanta Ga

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

A. C. Burr, ordinary at Canton Ga

by cook

Witness my hand and seal, this 1st day of Jan 1900

Executed in presence of

A. C. Burr, ordinary } John R. L. Cook [L. S.]

CODE REG. 1284.
(For These Already Enrolled.)

No. 1397

INDIGENT

SOLDIER'S PENSION,

1899.

Name John R. L. Cook
County Cherokee

WARRANT ISSUED

1899

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDLED TO

W. A. W.

Geo. W. Harrison, State Printer, Atlanta.

1st data

CODE REG. 1284.
(For These Already Enrolled.)

No. 1875

INDIGENT

SOLDIER'S PENSION,

1900.

Name John R. L. Cook
County Cherokee

WARRANT ISSUED

1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

W. A. W.

Geo. W. Harrison, State Printer, Atlanta.

Book John B. D.
Chas. K. Gamm

CODE SEC. 1284.
(For These Already Enrolled.)

No. *1392*

INDIGENT
SOLDIER'S PENSION,
1899.

Name *John B. D.*
County *Cherokee*

WARRANT ISSUED
1/16 1899

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO
H. A. H.

Geo. W. Harrison, State Printer, Atlanta.
1/16 data

Book John B. D.
Chas. K. Gamm

CODE SEC. 1284.
(For These Already Enrolled.)

No. *1875*

INDIGENT
SOLDIER'S PENSION,
1900.

Name *John B. D.*
County *Cherokee*

WARRANT ISSUED
January 24 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO
Chas. K. Gamm

Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears *John B. D.* 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 *4* day of *Dec* 18*72*; that he is *22* years old and by occupation a *Farmer*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served for the term of *3* years in Company *1st* of *Cherokee* Regiment of *State Troops*; that his physical condition is as follows: *Old and feeble, unable to support himself.*

that his property consists of the following items *1 small amount of household furniture*

of the value of *Twenty Five* 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 *Cherokee* county been allowed a pension for the year 1897.

Sworn to and subscribed before me, this, the *1st* day of *January* 1899. *John B. D.* Ordinary.

State of Georgia,

Cherokee County.

I, *A. G. Gamm* Ordinary of said County, do certify that I am well acquainted with *John B. D.* 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 *1st* day of *January* 1899.



Ordinary *Cherokee* County.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears *John B. D.* 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 *4* day of *Dec* 18*72*; that he is *22* years old and by occupation a *Farmer*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served for the term of *3* years in Company *1st* of *Cherokee* Regiment of *State Troops*; that his physical condition is as follows: *Old and feeble, unable to support himself.*

that his property consists of the following items *1 small amount of household furniture*

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1900. I have heretofore as a resident of *Cherokee* county been allowed a pension for the year 1897.

Sworn to and subscribed before me, this, the *1st* day of *January* 1900. *John B. D.* Ordinary.

State of Georgia,

Cherokee County.

I, *A. G. Gamm* Ordinary of said County, do certify that I am well acquainted with *John B. D.* 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 *1st* day of *January* 1900.



Ordinary *Cherokee* County.

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

by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 2 1/2 years in Company B, of the 1st Regiment of State Troops (that his physical condition is as follows: One Arm and One Leg missing)

that his property consists of the following items some land and some household furniture

of the value of Twenty Five 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 1890. I have heretofore as a resident of Cherokee county been allowed a pension for the year 1890.

Sworn to and subscribed before me, this, the 1st day of January, 1899. A. G. Gurne Ordinary.

State of Georgia,

Cherokee County.

I, A. G. Gurne Ordinary of said County, do certify that I am well acquainted with A. B. B. B. B. 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 1st day of January, 1899.



Ordinary Cherokee County.

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

by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 2 1/2 years in Company B, of the 1st Regiment of State Troops (that his physical condition is as follows: One Arm and One Leg missing)

that his property consists of the following items some land and some household furniture

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

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

Sworn to and subscribed before me, this, the 1st day of January, 1900. A. G. Gurne Ordinary.

State of Georgia,

Cherokee County.

I, A. G. Gurne Ordinary of said County do certify that I am well acquainted with A. B. B. B. B. 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 1st day of January, 1900.



Ordinary Cherokee County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA, }
County, }
Know all Men by these Presents, That I, Charles E. Sanders of Cherokee County, in said State, do hereby appoint Wm. J. Davis my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 17 day of April, 1891.
Executed in the presence of us:
H. M. Davis
Wm. J. Davis *Witness*

If allowed, send amount by _____ to _____ and oblige me at _____

[L. S.]

DIRECTIONS.



Charles E. Sanders
Cherokee County

E23 1891.

No. 966

Widows' Pension

— PAID TO —
Mrs. Charles Sanders
— OF —
Cherokee COUNTY.

\$100.00.

Warrant Issued

1891

AND HANDED TO

Geo. W. Harrison, State Printer, Atlanta

POWER (

STATE OF GEORGIA

Know all Men by these Presents, That

County, in said State, do hereby appoint

of Pauline Leavelle his

me and in my name, to receive and rec

to from the State of Georgia as a widow

affidavit; hereby authorizing my said att

be issued by the Governor, or for any st

aforsaid.

IN WITNESS WHEREOF,

day of 17

Executed in the presence of us:

H. M. Paris

O. W. Putnam Ordinary

If allowed, send amount by

me at

\$100.00.

Warrant Issued

1891

AND HANDED TO



Gen. W. Harrison, State Printer, Atlanta

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA,

Cherokee County,

Know all Men by these Presents, That I,

Charles Leavelle

of Cherokee County,

County, in said State, do hereby appoint: H. M. Paris

of Pauline Leavelle his 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 aforsaid.

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

17 day of April, 1891

Charles Leavelle

[L. S.]

Executed in the presence of us:

H. M. Paris

O. W. Putnam Ordinary

DIRECTIONS.

If allowed, send amount by _____ to

me at _____, and oblige

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA,

County of Cherokee

In person came before me, the undersigned Ordinary

in and for the County of Cherokee

Mrs. Blanche Leavelle

, who being sworn according to law, says under

oath that she is the widow of Joseph Leavelle, who was a soldier in

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

25 Regiment of Inf

Volunteers; that he enlisted in said

service on or about the _____ day of July, 1861, and was in the

Army up to April, 1864. That while in the

day of April, 1864, (See Note No. 1)

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

I left home from the Army of Nov. 1861, and

Recherence was on a sick furlough, and he reached

his home sick with relaps of malarial fever which he

died on the first day of June 1864. Deponent knows

that he was a healthy man when he left his home in

Cherokee County, Ga. in July 1861 as a Soldier, that he then

returned from the Army in April 1864 and died as stated

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 January, 1862, and that she has resided in Georgia continuously since the _____ day of July, 1864; 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

17 day of April, 1891.

O. W. Putnam

Ordinary.

Blanche Leavelle

Deponent

Pauline Leavelle

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



Widow's Pension

PAID TO—

Mrs. Blanche Leavelle

of Cherokee County,

\$100.00.

Warrant Issued

AND HANDED TO

1891

Gen. W. Harrison, State Printer, Atlanta

623 1891.

210.966

Captain E. Leavelle
Cherokee County



1891

170.966

Widows' Pension

PAID TO —

Mrs. Blanche Corbin

or —

Blanchet County

Warrant Issued

AND HANDED TO

1891

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 _____ 1864, and that she has resided in Georgia continuously since the _____ day of _____ 1841; 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 _____ 1891.

Blanche Corbin

Ordinary.

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

Affidavit for Three Witnesses.

Form No. 2.

State of Georgia,

County of Cherokee

In person came before me, the undersigned Ordinary in and for said County, witnesses _____ Samuel H. Townsend, H. M. Paris, and John Corbin (each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge, Mrs. Blanche Corbin of the County of Cherokee State of Georgia, is the widow of Joseph Corbin, who was a soldier in Company B of the 23 Regiment of Inf Volunteers. That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the _____ day of April 1864. That while in said service, or by reason of said service in the Army, he lost his life as follows: that he was sent home on furlough from near Rockman's, Ga. his residence was at the place of the Mesoles. It was upon this furlough that he died at his home in Cherokee County, Ga. on or about the 15th of June 1864. Deponent further swears that this was as well as at his home, and never at home where said soldier died on or about the first day of June 1864.

Our opportunity for knowing the facts stated in reference to death of applicant's husband were that we knew him after he died. One of deponents is H. M. Townsend, H. M. Paris, the other deponents H. M. Paris and John Corbin knew him after his death on the same day of his death.

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

Sworn to and subscribed before me, this, the _____ day of _____ 1891.

Samuel H. Townsend
John Corbin
Ordinary.

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

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

Form No. 3.

State of Georgia,

County of Cherokee

I, Ordinary W. H. Harrison Ordinary in and for said County of Cherokee State of Georgia, hereby certify that I am acquainted with Mrs. Blanche Corbin the applicant for a pension in this case, and know, from my own knowledge, or from positive proof presented to me by reputable witnesses, that she resides in this County, and that she resided in the State of Georgia on December 23d, 1890, and has not lived out of the State since that date. I also certify that the witnesses whose testimony she presents to sustain her claim are known to me to be truthful witnesses, entitled to full faith and credit as such. I am fully satisfied that this claim is made in good faith, and that I have caused the applicant and the witnesses to read or hear read the proofs they sign.

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

Ordinary W. H. Harrison
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 of the wounds.
Those whose husbands contracted disease in the service, and who after the war, died of the disease caused by the service. The disease directly causing the death.
No widow is entitled unless she was the wife of the soldier during the war, and has never remarried.

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

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

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

There is no need of employing a lawyer or other agent to attend to these claims. The Department will furnish full and specific instructions, and give ample opportunity to every claimant.

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

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.

Our opportunity for knowing the facts stated in reference to death of applicant's husband were that we saw him after he died. One of applicants is a Tennessee poor him die, the other applicants in Florida and that we saw him after his death on the same day of his death.

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

Sworn to and subscribed before me, this, the

17th day of April 1891.

Ordinary.

Note: Witnesses must not testify about things they may believe, but confine their statements to such facts as they personally know.

Those whose husbands died in the army of wounds or disease contracted in the service. Those whose husbands went to the army and have never been heard from since the war. Those whose husbands were wounded in the army and have since died from the direct effects of the wounds.

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

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

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

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

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

There is no need of employing a lawyer or other agent to attend to these claims. The Department will furnish full and specific instructions, and give ample opportunity to every claimant.

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

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.

STATE OF GEORGIA, County of Cherokee
I, A. B. Corbin Ordinary in and for said County of Cherokee State of Georgia, hereby certify that I am acquainted with Mrs. Ellen G. Corbin the applicant for a pension in this case; and know, from my own knowledge (or from positive proof presented to me by reputable witnesses), that she resides in this County, and that she resided in the State of Georgia on December 23, 1850, and has not lived out of the State since that date. That she is the widow of Joseph B. Corbin deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1893.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 17th day of January, 1894.

A. B. Corbin Ordinary.

POWER OF ATTORNEY.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 17th day of January, 1894.

Executed in the presence of us:

A. B. Corbin, Ordinary
James E. Livingston

DIRECTIONS.

Send amount by Chas. H. B. Corbin Ordinary to
me at Cherokee Georgia and oblige
Ellen G. Corbin

FOR THOSE HERETOFORE PAID.
1894.
No. 610
WIDOWS' PENSION,
for year ending February 15th, 1894.
—PAID TO—
Ellen G. Corbin
—OF—
Cherokee COUNTY.
WARRANT ISSUED
AND HANDED TO
Chas. H. B. Corbin
1894.
GEO. W. HARRISON, Notary Public, Atlanta.

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

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

Executed in the presence of us:

A. B. Morris, Ordinary
Witness James E. Covington

DIRECTIONS.

Send amount by *Wm. R. B. Morris, Ordinary* to
me at *Wanton Georgia* and oblige
Ellen Anderson
mark

FOR THOSE HERETOFORE PAID.
Barney Eldred
Charles &
1894.
No. *610*
WIDOWS' PENSION,
for year ending February 15th, 1894.
—PAID TO—
Mrs. E. Anderson, Wanton
—OF—
Wanton County.
WARRANT ISSUED
21
AND HANDED TO
Clark
1894.
GEO. W. HARRISON, STATE PRINTER, ATLANTA.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of *Wichitah*

Personally comes Mrs.

E. Anderson, Wanton

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

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

continuously ever since *the year* 1879 That she is the Widow of

Joseph, Wanton who was a Soldier in Company

A. of the *2nd* Regiment of *Georgia*

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

1861 and served in the Army up to *the year* 1864 That he lost his

life on the *1st day of* day of *June* 1864 (State here

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

*Widow's husband taken disease in Wanton & was sent
Wanton on sick furlough & died June the 1st 1864 with
Relapse of disease*

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1864; 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

Twenty day of *January* 1894.

A. B. Morris Ordinary.

Post-office *Wanton Ga*

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 1864; 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

twelfth day of January 1894.
A. B. Borne Ordinary.

Post-office Charlotte, N.C.

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

Form No. 2.

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this,
23rd day of January 1893.

A. B. Borne Ordinary.

POWER OF ATTORNEY.

Form No. 2.

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

In Witness Whereof, I have hereunto set my hand and seal, this 23rd
day of January 1893.
Eleanor Borne [L.S.]

Executed in the presence of us:

DIRECTIONS.

Send amount by check to the State of Georgia, and oblige
me at Charlotte, N.C.
Eleanor Borne

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

Form No. 2.

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office,
this, the 23rd day of January 1893.

A. B. Borne Ordinary.

POWER OF ATTORNEY.

Form No. 2.

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

In Witness Whereof, I have hereunto set my hand and seal, this 23rd
day of January 1893.

Executed in the presence of us:

DIRECTIONS.

Send amount by check to the State of Georgia, and oblige
me at Charlotte, N.C.
Eleanor Borne

Widow's Pension,
for year ending February 15th, 1893.
PAID TO —
Mrs. Eleanor Borne
—OF—
Charlotte, N.C.
Warrant Issued
23rd
1893

1893.

For those heretofore paid.
1895.

WIDOW'S PENSION,
for year ending February 15th, 1893.
PAID TO —
Mrs. Eleanor Borne
—OF—
Charlotte, N.C.
Warrant Issued
23rd
1893

1895.

For those heretofore paid.

from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

In WITNESS WHEREOF, I have hereunto set my hand and seal, this 31st day of January 1893.

Executed in the presence of us:

DIRECTIONS.

Send amount by check to D. B. Corn Ordinary to me at Clinton Ga and oblige Eleanor Corbin

Widow's Pension,
for year ending February 15th, 1893.
—PAID TO—
—OF—
Warrant Issued
AND HANDLED TO
1893

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

In WITNESS WHEREOF, I have hereunto set my hand and seal, this 32 day of January 1895.

Executed in the presence of us:

DIRECTIONS.

Send amount by check to D. B. Corn Ordinary to me at Clinton Ga and oblige Eleanor Corbin

Widow's Pension,
for year ending February 15th, 1895.
—PAID TO—
—OF—
Warrant Issued
AND HANDLED TO
1895

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cherokee

Personally comes Mrs.

Eleanor Corbin

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 1830 That she is the Widow of Joseph Corbin who was a Soldier in Company 22^d Me Regiment of Georgia Volunteers, that he enlisted in said Regiment on or about the month of Octob. 1862 and served in the Army up to June 1864 That he lost his life on the 18 day of 18 (State here full particulars of the husband's death, when, where and from what cause.)

Said Husband was in moccasins in camp and was shot through the back and then continued in camp life

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 1862; 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 31st day of January 1893. Eleanor Corbin Ordinary. Post-office Cherokee

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cherokee

Personally Comes Mrs.

Eleanor Corbin

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 1830 That she is the Widow of Joseph Corbin who was a Soldier in Company 22^d Me Regiment of Georgia Volunteers, that he enlisted in said Regiment on or about the month of June 1862 and served in the Army up to June 1864 That he lost his life on the 18 day of 18 (State here full particulars of the husband's death, when, where and from what cause.)

Said Husband Died with Relapse of Malaria

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 1862; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this 32nd day of January 1895. Eleanor Corbin Ordinary. Post-office Cherokee

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 1890; 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
21st day of January 1893.
A. L. L. L. L. Ordinary. Post-office Charleston

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 1890, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this
21st day of January 1895.
A. L. L. L. Ordinary. Post-office Charleston

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

Form No. 1.

STATE OF GEORGIA, County of Charleston

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this
21st day of January 1890.

{ SEAL } A. L. L. L. Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Charleston County.

I, Eleanor L. L. hereby authorize William A. Wright of Atlanta to receive and receipt for the pension paid hereon and request that he remit same to A. L. L. L. at Charleston.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
21st day of January 1890.

Executed in the presence of

A. L. L. L.
of Charleston County

{ SEAL }
Eleanor L. L.
mark

[L.S.]

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

Form No. 1.

STATE OF GEORGIA, County of Charleston

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this
21st day of January 1897.

{ SEAL } A. L. L. L. Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Charleston County.

I, Eleanor L. L. hereby authorize William A. Wright of Atlanta to receive and receipt for the pension paid hereon and request that he remit same to A. L. L. L. at Charleston.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
21st day of January 1897.

Executed in the presence of

J. E. Pope

{ SEAL }
Eleanor L. L.
mark

[L.S.]

WIDOW'S PENSION,
for year ending February 15th, 1897.

PAID TO

Eleanor L. L.

of Charleston County.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

21st 1897.

AND HANDED TO

W. A.

1897.

No. 615

WIDOW'S PENSION,
for year ending February 15th, 1897.

PAID TO

Eleanor L. L.

of Charleston County.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

21st 1897.

AND HANDED TO

W. A.

1897.

No. 615

WIDOW'S PENSION,
for year ending February 15th, 1896.

PAID TO

Eleanor L. L.

of Charleston County.

WARRANT ISSUED

21st 1896.

AND HANDED TO

W. A.

AND HANDED TO

of William A. M. to receive and receipt for the pension paid hereon and request
that he remit same to A. B. Curn ording at Camden Ga. 6th St
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 9th
day of January 1896.

Executed in the presence of
A. B. Curn ording
of Cherokee County

Eleanor Gordon [L.S.]
mark

WIDOW'S PENSION,
for year ending February 15th, 1896.
PAID TO
Mrs. E. Gordon
OF
Cherokee County,
widow of Joseph. Gordon
WARRANT ISSUED
2/1
AND HANDLED TO
at
1896.
Geo. W. Johnston, State Printer.

Colum. Gordon
Cherokee County
FOR THOSE HERETOFORE PAID.
1896.
No. 220

of William A. M. to receive and receipt for the pension paid hereon and request
that he remit same to A. B. Curn ording at Camden Ga
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 9th
day of January 1897.

Executed in the presence of
J. & Pope

Eleanor Gordon [L.S.]
mark

WIDOW'S PENSION,
for year ending February 15th, 1897.
PAID TO
Mrs. E. Gordon
OF
Cherokee County,
widow of Joseph. Gordon
WARRANT ISSUED
2/1
AND HANDLED TO
at
1897.
Geo. W. Johnston, State Printer.

Colum. Gordon
Cherokee County
FOR THOSE HERETOFORE PAID.
1897.
No. 615

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, } Personally Comes Mrs.
County of Cherokee } Eleanor Gordon

who being sworn, says on oath, that she is a bona fide resident of said county of
Cherokee State of Georgia, and that she has RESIDED in said State
continuously ever since about 1888 That she is the Widow of
Joseph. Gordon who was a Soldier in Company
8 of the 2nd Regiment of Georgia
Volunteers, that he enlisted in said regiment on or about the month of
186 / and served in the Army up to June 1864 That he lost his
life on the day of 18 (State here

full particulars of the husband's death, when, where and from what cause.)
Said husband died in June 1864 with wounds of horses

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 1854,
that Georgia is her home and she resided in this State 23d day of December, 1890, and has not
lived in any other State or locality since that date. I have been allowed a pension as a resident of
Cherokee County for the year ending February 15th, 1896, and now apply for
the pension provided by law for the year ending February 15th, 1896.

Sworn to and subscribed before me, this
9th day of January 1896.
A. B. Curn Ordinary.

Eleanor Gordon
mark
Post-office

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, } Personally Comes Mrs.
County of Cherokee } Eleanor Gordon

who being sworn, says on oath, that she is a bona fide resident of said county of
Cherokee State of Georgia, and that she has RESIDED in said State
continuously ever since about 1888 That she is the Widow of
Joseph. Gordon who was a Soldier in Company
8 of the 2nd Regiment of Georgia
Volunteers, that he enlisted in said regiment on or about the month of
186 / and served in the Army up to June 1864 That he lost his
life on the day of 18 (State here

full particulars of the husband's death, when, where and from what cause.)
Said husband died in June 1864 with wounds of horses

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 1854,
that Georgia is her home and she resided in this State 23d day of December, 1890, and has not
lived in any other State or locality since that date. I have been allowed a pension as a resident of
Cherokee County for the year ending February 15th, 1896, and now apply for
the pension provided by law for the year ending February 15th, 1897.

Sworn to and subscribed before me, this
9th day of January 1897.
A. B. Curn Ordinary.

Eleanor Gordon
mark
Post-office

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 1854, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Cherokee County for the year ending February 15th, 1896, and now apply for the pension provided by law for the year ending February 15th, 1896.

Sworn to and subscribed before me, this

9th day of Jan'y 1896.

A. B. Gurn Ordinary.

Post-office

Blondox Corban
mark

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 1854, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Cherokee County for the year ending February 15th, 1896, and now apply for the pension provided by law for the year ending February 15th, 1897.

Sworn to and subscribed before me, this

10th day of Jan'y 1897.

A. B. Gurn Ordinary.

Post-office

Blondox Corban
mark

POWER OF ATTORNEY.

State of Georgia, Cherokee County.

I, Elender Corban hereby authorize Miss A. Wright of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to A. B. Gurn at Canton Ga

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

9th day of Jan'y 1896.

Elender Corban
mark

Executed in the presence of

A. B. Gurn

POWER OF ATTORNEY.

State of Georgia, Cherokee County.

I, Elender Corban hereby authorize Miss A. Wright of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to A. B. Gurn at Canton Ga

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

10th day of Jan'y 1896.

Elender Corban
mark

Executed in presence of

A. B. Gurn

[L. S.]

For Those Heretofore Paid.

1898.

No. 1959

WIDOW'S PENSION,

For year ending February 15th, 1896.

PAID TO

Miss Elender Corban

or

Cherokee County,

Widow of Joseph Corban

RICHARD JOHNSON,

Commissioner of Pensions

WARRANT ISSUED

2/1

AND HANDLED TO

W. W.

Geo. W. Harrison, State Printer, Atlanta

For Those Heretofore Paid.

1899.

No. 109

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAID TO

Miss Elender Corban

or

Cherokee County

Widow of Joseph Corban

RICHARD JOHNSON,

Commissioner of Pensions

WARRANT ISSUED

2/1

AND HANDLED TO

W. W.

Geo. W. Harrison, State Printer, Atlanta

Corban, Elender
Cherokee Co
For Those Heretofore Paid.
1898.
NO. *1959*
WIDOW'S PENSION,
For year ending February 15th, 1898.
PAID TO
Mrs. Elender Corban
or
Cherokee
County,
Widow of *Joseph Corban*
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT ISSUED
21
AND HANDED TO
R. M.
1898.
GEO. W. HARRISON, STATE PRINTER, ATLANTA.

Corban, Elender
Cherokee County
For Those Heretofore Paid.
1899.
NO. *169*
WIDOW'S PENSION,
For year ending February 15th, 1899.
PAID TO
Mrs. Elender Corban
or
Cherokee
County
Widow of *Joseph Corban*
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT ISSUED
21
AND HANDED TO
R. M.
1899.
GEO. W. HARRISON, STATE PRINTER, ATLANTA.

Form No. 1.
For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally Comes Mrs.
County of *Cherokee* *Elender Corban*
who, being sworn, says on oath, that she is a bona fide resident of said county of
Cherokee State of Georgia, and that she has resided in said State
continuously ever since 18 *32* That she is the Widow of
Joseph Corban who was a Soldier in Company
E of the *23* Regiment of *Ca*
Volunteers, that he enlisted in said regiment on or about the month of
186 *1* and served in the Army up to *June* 186 *4*. That he lost his
life on the *June* day of *June* 18 *64* (State here
full particulars of the husband's death, when, where and from what cause.) *Died in June*
1864 with a Relapse of Malaria.

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 *54*
I have been allowed a pension as a resident of *Cherokee* County for the year ending
February 15th, 1897, and now apply for the pension provided by law for the year ending February 15th, 1898.

Sworn to and subscribed before me, this
21 day of *July* 1898. *Elender Corban*
Allen C. Camp Ordinary. Post-Office *Short Top Ca*

State of Georgia,
Cherokee County. *Allen C. Camp*
Ordinary of said County, certify that I am well acquainted
with Mrs. *Elender Corban* 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 *21* day of *July* 18 *39*

Given under my official signature and seal this *21* day of *July* 1898.

Allen C. Camp
Ordinary of *Cherokee* County.



Form No. 1.
For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally Comes Mrs.
County of *Cherokee* *Elender Corban*
who, being sworn, says on oath, that she is a bona fide resident of said county of
Cherokee State of Georgia, and that she has resided in said State
continuously ever since 18 *48* That she is the Widow of
Joseph Corban who was a soldier in Company
B of the *21st* Regiment of *Ca*
Volunteers, that he enlisted in said regiment on or about the month of
186 *1* and served in the Army up to *June* 186 *4*. That he lost his
life on the *June* day of *June* 18 *64* (State here
full particulars of the husband's death, when, where and from what cause.) *Died in June 1864 with a Relapse of Malaria*

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 *54*.

I have been allowed a pension as a resident of *Cherokee* 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
10 day of *August* 1899. *Elender Corban*
A. C. Camp Ordinary. Post-Office *Short Top Ca*

State of Georgia,
Cherokee County. *A. C. Camp*
Ordinary of said County, certify that I am well acquainted
with Mrs. *Elender Corban* 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 *10* day of *August* 18 *99*

Given under my official signature and seal this the *10* day of *August* 1899.

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



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 1854

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

Sworn to and subscribed before me, this 21 day of January 1898. Allen B. Camp Ordinary. Clender & Corban Post-Office North Fork Ga

State of Georgia, Cherokee County. } I Allen B. Camp Ordinary of said County, certify that I am well acquainted with Mrs. Clender Corban 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 21 day of January 1899

Given under my official signature and seal this the 21 day of January 1898.

Allen B. Camp
Ordinary of Cherokee County.



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 1854

I have been allowed a pension as a resident of Cherokee 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 10 day of January 1899. A. B. Camp Ordinary. Clender & Corban Post-Office North Fork Ga

State of Georgia, Cherokee County. } I A. B. Camp Ordinary of said County, certify that I am well acquainted with Mrs. Clender Corban 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 10 day of January 1899

Given under my official signature and seal this the 10 day of January 1899.

{ Official }
{ Seal }

A. B. Camp
Ordinary of Cherokee County.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cherokee County. }

I, Clender Corban hereby authorize W. A. Wright of Atlanta Ga

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

A. B. Camp at Boston Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 12 day of June 1900.

Clender Corban [L. S.]

Executed in presence of

A. B. Camp

POWER OF ATTORNEY.

STATE OF GEORGIA, Cherokee County. }

I, Clender Corban hereby authorize A. B. Camp of Cherokee County

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

me at Boston Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 12 day of June 1901.

Clender Corban [L. S.]

Executed in presence of

A. B. Camp

Clender Corban
Cherokee County
To These Herebefore Paid
1900.
NO. 876
WIDOW'S PENSION,
For year ending February 15th, 1900.
PAID TO
Mrs. Clender Corban
of
Cherokee County,
Widow of W. A. Wright
JNO. W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
Feb 13 1900,
AND HANDED TO
W. A. Wright
Geo. W. Hartman, State Printer, Atlanta.

Clender Corban
Cherokee County
To These Herebefore Paid.
1901.
No. 2474
WIDOW'S PENSION,
For year ending February 15th, 1901.
PAID TO
Mrs. Clender Corban
of
Cherokee County,
Widow of W. A. Wright
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
2/12 1901,
AND HANDED TO
W. A. Wright
Geo. W. Hartman, State Printer, Atlanta, Ga.

Carbam Elander
Cherokee, Ga.
To Those Heretofore Paid
1900.
NO. 876
WIDOW'S PENSION,
For year ending February 15th, 1900.
PAID TO
Mrs. Elander
or
Elander
County,
Widow of Carbam Elander
JNO. W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
Feb 13 1900
AND HANDED TO
H. B. Connor
Doc. W. Harrison, State Printer, Atlanta, Ga.

Carbam Elander
Cherokee County
To Those Heretofore Paid.
1901.
No. 2974
WIDOW'S PENSION,
For year ending February 15th, 1901.
PAID TO
Mrs. Elander
or
Elander
County,
Widow of Carbam Elander
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
2/12 1901
AND HANDED TO
H. B. Connor
Doc. W. Harrison, State Printer, Atlanta, Ga.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, } Personally Comes Mrs.
County of Cherokee } Elander

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 1858. That she is the Widow of Joseph Elander who was a soldier in Company E of the 25th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of Sept. 1861 and served in the Army up to June 1864. That he lost his life on the day of June 1864. (State here particulars of the husband's death, when, where and from what cause)

His husband died while in the service of the 25th Regt. of Georgia Volunteers.

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 1854.

I have been allowed a pension as a resident of Cherokee County for the year ending February 15th, 1899, and now apply for the pension provided by law for the year ending February 15th, 1900.

Sworn to and subscribed before me, this 12th day of Jan. 1900.
H. B. Connor Ordinary.

State of Georgia, }
Cherokee County, } I. H. Connor
Ordinary of said County, certify that I am well acquainted with Mrs. Elander, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of June 1858.

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

Official Seal.

H. B. Connor
Ordinary of Cherokee County.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, } Personally Comes Mrs.
County of Cherokee } Elander

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 1858. That she is the Widow of Joseph Elander who was a soldier in Company E of the 25th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of Sept. 1861 and served in the Army up to June 1864. That he lost his life on the day of June 1864. (State here particulars of the husband's death, when, where and from what cause)

His husband died while in the service of the 25th Regt. of Georgia Volunteers.

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 1854.

I have been allowed a pension as a resident of Cherokee County for the year ending February 15th, 1899, and now apply for the pension provided by law for the year ending February 15th, 1901.

Sworn to and subscribed before me, this 5th day of Jan. 1901.
H. B. Connor Ordinary.

State of Georgia, }
Cherokee County, } I. H. Connor
Ordinary of said County, certify that I am well acquainted with Mrs. Elander, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of June 1858.

Given under my official signature and seal, this 5th day of Jan. 1901.

Official Seal.

H. B. Connor
Ordinary of Cherokee County.

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 1854.

I have been allowed a pension as a resident of Cherokee County for the year ending February 15th, 1892, and now apply for the pension provided by law for the year ending February 15th, 1900.

Sworn to and subscribed before me, this 12 day of Jan, 1900. H. C. Burr Ordinary.

State of Georgia, Cherokee County. Ordinary of said County, certify that I am well acquainted with Mrs. Eleanor Corbin, 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 12 day of Jan, 1892.

Given under my official signature and seal, this the 12 day of Jan, 1900. H. C. Burr Ordinary of Cherokee County.

Official Seal.

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 1854.

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

Sworn to and subscribed before me, this 12 day of Jan, 1901. H. C. Burr Ordinary.

State of Georgia, Cherokee County. Ordinary of said County, certify that I am well acquainted with Mrs. Eleanor Corbin, 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 12 day of Jan, 1892.

Given under my official signature and seal, this the 12 day of Jan, 1901. H. C. Burr Ordinary of Cherokee County.

Official Seal.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, Eleanor Corbin, hereby authorize H. C. Burr of Cherokee County,

to receive and receipt for the pension paid hereon, and request that he remit same to me at Cherokee.

In Witness Whereof, I have hereunto set my hand and seal, this 8 day of Jan, 1902.

Executed in presence of

J. J. G. G.

Eleanor Corbin [L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, Eleanor Corbin, hereby authorize Wm. H. Wright of Cherokee County,

to receive and receipt for the pension paid hereon, and request that he remit same to H. C. Burr, Esq. at Cherokee.

In Witness Whereof, I have hereunto set my hand and seal, this 7 day of Jan, 1903.

Executed in presence of

H. C. Burr, Esq.

Eleanor Corbin [L. S.]

Corbin, Eleanor
Cherokee, County
To Those Heretofore Paid

1902.

No. 1841

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. Eleanor Corbin

OF

Cherokee County.

Widow of Joseph Corbin

Co. E Regiment 23rd Ia

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

24 1902

AND HANDLED TO

Wm. H. Wright

OFFICE OF THE COMMISSIONER OF PENSIONS, ATLANTA, GA.

Corbin, Eleanor
Cherokee, County
To Those Heretofore Paid

1903.

No. 1960.

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. Eleanor Corbin

OF

Cherokee County.

Widow of Joseph Corbin

Co. E Regiment 23rd Ia

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

24 1903.

AND HANDLED TO

Wm. H. Wright

OFFICE OF THE COMMISSIONER OF PENSIONS, ATLANTA, GA.

Corbin, Elender
Cherokee County
To Those Heretofore Paid

1902.

No. 1841

WIDOW'S PENSION,

For year ending Dec 31, 1902.

PAID TO

Mrs. Elender Corbin

OF

Cherokee County,

Widow of Joseph Corbin

Co. E Regiment 23rd Ia

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1902

AND HANDRED TO

344

OSK

USE W. HARTMAN'S TYPE PRINTING PLANT, GA.

Corbin, Elender
Cherokee County
To Those Heretofore Paid

1903.

No. 1900.

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. Elender Corbin

OF

Cherokee County,

Widow of Joseph Corbin

Co. E Regiment 23rd Ia

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1903.

216

OSK

USE W. HARTMAN'S TYPE PRINTING PLANT, GA.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cherokee

PERSONALLY COMES MRS.

Elender Corbin

Cherokee 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 1879. That she is the Widow of Joseph Corbin who was a soldier in Company E of the 23rd Regiment of Ia

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

1861, and served in the Army up to June 1864. That he lost his life on the June day of 1864. (State here

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

Did from relapsing measles

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 1864.

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

Sworn to and subscribed before me, this 4th day of July 1902. A. C. Conn Ordinary. Post Office

State of Georgia, Cherokee County. I, A. C. Conn Ordinary of said County, certify that I am well acquainted with Mrs. Elender Corbin who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 1879.

Given under my official signature and seal, this the 8th day of July 1902.

Official Seal. A. C. Conn Ordinary of Cherokee County.

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,

County of Cherokee

PERSONALLY COMES MRS.

Elender Corbin

Cherokee 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 1835. That she is the Widow of Joseph Corbin who was a soldier in Company E of the 23rd Regiment of Ia

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

1861, and served in the Army up to June 1864. That he lost his life on the June day of 1864. (State here

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

Did with Measles.

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 1864.

I have been paid a pension as a resident of Cherokee County for the year ending December 31, 1902, and now apply for the pension provided by law for the year ending December 31, 1903.

Sworn to and subscribed before me, this 4th day of July 1903. A. C. Conn Ordinary. Post Office

State of Georgia, Cherokee County. I, A. C. Conn Ordinary of said County, certify that I am well acquainted with Mrs. Elender Corbin who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 1835.

Given under my official signature and seal, this the 4th day of July 1903.

Official Seal. A. C. Conn Ordinary of Cherokee County.

NOTE.—All blank spaces must be filled.
Voucher and affidavit must bear date after January 1st, 1903.

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 1884

I have been paid a pension as a resident of Chester 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 8 day of July 1902. A. C. Connor Ordinary. Post-Office Chester

State of Georgia, Chester County. I, A. C. Connor Ordinary of said County, certify that I am well acquainted with Mrs. Eleanor Corbin, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 1879.

Given under my official signature and seal, this 8 day of July 1902. A. C. Connor Ordinary of Chester County.

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

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 1884

I have been paid a pension as a resident of Chester County for the year ending December 31, 1902, and now apply for the pension provided by law for the year ending December 31, 1903.

Sworn to and subscribed before me, this 4 day of July 1903. E. C. Connor Ordinary. Post-Office Chester

State of Georgia, Chester County. I, E. C. Connor Ordinary of said County, certify that I am well acquainted with Mrs. Eleanor Corbin, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 1884.

Given under my official signature and seal, this 4 day of July 1903. E. C. Connor Ordinary of Chester County.

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1903.

POWER OF ATTORNEY.

STATE OF GEORGIA, Chester County. I, Eleanor Corbin hereby authorize Mr. S. Wright of Atlanta to receive and receipt for the pension paid hereon, and request that he remit same to S. C. Connor at Chester. In Witness Whereof, I have hereunto set my hand and seal, this 8 day of July 1904.

Executed in presence of E. C. Connor [L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA, Chester County. I, Eleanor Corbin hereby authorize W. J. Webb of Chester to receive 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 9 day of July 1905. Eleanor Corbin [L. S.]

Executed in presence of J. D. Webb

Eleanor Corbin
Chester Co. Ga.

TO THOSE HERETOFORE PAID.

1904.

No. 2093

WIDOW'S PENSION

FOR
YEAR ENDING DECEMBER 31, 1904

PAID TO
Mrs. Eleanor Corbin
Chester County,
Widow of Joseph Corbin
Co. E Regiment 23rd La

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
FEB 18 1904.

AND HANDLED TO
Ordry
Gen. W. HAYDON, State Property ALBANY

Corbin, Eleanor
Chester Ga.

To Those Heretofore Paid.

1905.

No. 1964

WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO
Mrs. Eleanor Corbin
OF
Chester County,
Widow of Joseph Corbin
Co. E Regiment 23rd La

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
FEB 23 1905.

AND HANDLED TO
Webb
The Farmers' Printing and Publishing Co., Albany.
Gen. W. HAYDON, ALBANY, and State Property.

Cyrgul, Elander
Cherokee County
TO THOSE HERETOFORE PAID.
1904.
No. 2093
WIDOW'S PENSION
FOR
YEAR ENDING DECEMBER 31, 1904.
PAID TO
Mrs. Elander, E. Elander
County,
Cherokee
Widow of *Joseph H. Elander*
Co. *E*
Regiment *23rd Ga*
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
FEB 18
AND HANDLED TO
Ordly
J. W. LINDSEY, SHIP-PAID, ALABAMA.

Cyrgul, Elander
Cherokee County
TO THOSE HERETOFORE PAID.
1905.
No. 1964
WIDOW'S PENSION,
For year ending Dec. 31, 1905.
PAID TO
Mrs. Elander, E. Elander
OF
Cherokee
County,
Widow of *Joseph Elander*
Co. *E*
Regiment *23rd Ga*
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
FEB 23
AND HANDLED TO
Reck
1905.
J. W. LINDSEY, SHIP-PAID, ALABAMA.

Form No. 1.
FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, } PERSONALLY COMES MRS.
County of *Cherokee* } *Elander, E. Elander*
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 *1839*. That she is the Widow of
Joseph E. Elander who was a soldier in Company
E of the *23rd* Regiment of *Ga*
Volunteers, that he enlisted in said regiment on or about the month of
June 1864, and served in the Army up to *June* 1864. That he lost his
life on the day of *June* 1864. (State here
particulars of the husband's death, when, where and from what cause.)
Died in June 1864 with measles

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 1834

I have been paid a pension as a resident of *Cherokee* County for the
year ending December 31, 1903, and now apply for the pension provided by law for the year ending
December 31, 1904.

Sworn to and subscribed before me,
this *9th* day of *July* 1904. *E. Elander*
E. Elander Ordinary. Post Office *Cherokee*

State of Georgia, } *E. Elander*
Cherokee County. } Ordinary of said County, certify that I am well
acquainted with Mrs. *Elander, E. Elander* who made the above affidavit and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
herself to be, and that she has continuously resided in this State since the
day of *June* 1839

Given under my official signature and seal, this the *5th* day of *July* 1904.



E. Elander
Ordinary of *Cherokee* County

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1904.

Form No. 1.
For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, } PERSONALLY COMES MRS.
County of *Cherokee* } *Elander, E. Elander*
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 *1839*. That she is the Widow of
Joseph E. Elander who was a soldier in Company
E of the *23rd* Regiment of *Ga*
Volunteers, that he enlisted in said regiment on or about the month of
June 1864, and served in the Army up to *June* 1864. That he lost his
life on the day of *June* 1864. (State here
particulars of the husband's death, when, where and from what cause.)
Died with measles

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 1834

I have been paid a pension as a resident of *Cherokee* 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,
this *9th* day of *July* 1905. *E. Elander*
E. Elander Ordinary. Post Office *Cherokee*

State of Georgia, } *E. Elander*
Cherokee County. } Ordinary of said County, certify that I am well
acquainted with Mrs. *Elander, E. Elander* who made the above affidavit and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
herself to be, and that she has continuously resided in this State since the
day of *June* 1839

Given under my official signature and seal, this the *9th* day of *July* 1905.



E. Elander
Ordinary of *Cherokee* County

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1905.

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 1854

I have been paid a pension as a resident of Cherokee County for the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me, this 9th day of Jan, 1904. E. C. Corbin Ordinary. Post Office Cherokee

State of Georgia, Cherokee County. Ordinary of said County, certify that I am well acquainted with Mrs. E. C. Corbin who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 1854

Given under my official signature and seal, this the 5th day of Jan, 1904.



E. C. Corbin
Ordinary of Cherokee County

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1904.

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 1854

I have been paid a pension as a resident of Cherokee 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, this 9th day of Jan, 1905. E. C. Corbin Ordinary. Post Office Cherokee

State of Georgia, Cherokee County. Ordinary of said County, certify that I am well acquainted with Mrs. E. C. Corbin who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 1854

Given under my official signature and seal, this the 7th day of Jan, 1905.



E. C. Corbin
Ordinary of Cherokee County

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1905.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cherokee County. I, E. C. Corbin, hereby authorize M. J. Webb of Cherokee County, to receive and receipt for the pension paid hereon, and request that he remit same to me at Shaple. In Witness Whereof, I have hereunto set my hand and seal, this 5th day of Jan, 1906. E. C. Corbin [L. S.]

Executed in presence of

F. M. Bladwell

POWER OF ATTORNEY.

STATE OF GEORGIA, Cherokee County. I, E. C. Corbin, hereby authorize M. J. Webb of Cherokee County, to receive and receipt for the pension paid hereon, and request that he remit same to me at Shaple. In Witness Whereof, I have hereunto set my hand and seal, this 5th day of Jan, 1907. E. C. Corbin [L. S.]

Executed in presence of

F. M. Bladwell

Corbin & Corbin
Cherokee County
To Those Heretofore Paid

1906.
No. 1706

WIDOW'S PENSION
For year ending Dec. 31, 1906.
PAID TO
Mrs. E. C. Corbin
OF
Cherokee County,
Widow of Joseph Corbin
Co. C Regiment 23rd Inf

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
FEB 1 1906,
AND HANDED TO

1906. No. 1706

Corbin & Corbin
Cherokee County
To Those Heretofore Paid

1907.
No. 1706

WIDOW'S PENSION
For year ending Dec. 31, 1907.
PAID TO
Mrs. E. C. Corbin
OF
Cherokee County,
Widow of Joseph Corbin
Co. C Regiment 23rd Inf

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
FEB 13 1907,
AND HANDED TO

1907. No. 1706

Corbin, E. Lindsey
Cherokee County
 To Those Heretofore Paid

1906.
 No. *1031*

WIDOW'S PENSION
 For year ending Dec. 31, 1906.
 PAID TO
Mrs. Elender Corbin
 OF
Cherokee County,
 Widow of *Joseph Corbin*
 Co. *C* Regiment *23rd* *Inf*

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT ISSUED
FEB 1 1906,
 AND HANDED TO

Printed at Pension and Pensions Co., 200 W. Harrison, St. Louis, Mo.

Corbin, E. Lindsey
Cherokee County
 To Those Heretofore Paid.

1907.
 No. *1706*

WIDOW'S PENSION
 For Year ending Dec. 31, 1907.
 PAID TO
Mrs. Elender Corbin
 OF
Cherokee County,
 Widow of *Joseph Corbin*
 Co. *C* Regiment *23rd* *Inf*

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT ISSUED
FEB 13 1907,
 AND HANDED TO

Printed at Pension and Pensions Co., 200 W. Harrison, St. Louis, Mo.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, } PERSONALLY COMES Mrs. *Elender Corbin*
 County of *Cherokee*

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 *1839*. That she is the Widow of *Joseph Corbin* who was a soldier in Company *B* of the *23rd* Regiment of *Inf* Volunteers, that he enlisted in said regiment on or about the month of *July* 1861 and served in the Army up to *June* 1864. That he lost his life on the *June* 1864 (State here particulars of the husband's death, when, where and from what cause.) *with relaps of measles*

Depoent 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 1854

I have been paid a pension as a resident of *Cherokee* County, for the year ending December 31, 1905, and now apply for the pension provided by law for the year ending December 31, 1906.

Sworn to and subscribed before me this *5th* day of *Jan* 1906. *Elender Corbin*
M. J. Webb Ordinary. Post Office

State of Georgia, } I, *M. J. Webb*
Cherokee County, } Ordinary of said County, certify that I am well acquainted with Mrs. *Elender Corbin*, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of *1839*

Given under my official signature and seal, this the *5th* day of *Jan* 1906.



M. J. Webb
 Ordinary of *Cherokee* County.

NOTE.—All blank spaces must be filled.
 Voucher and Affidavits must bear date after January 1st, 1906.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, } PERSONALLY COMES Mrs. *Elender Corbin*
 County of *Cherokee*

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 *1839*. That she is the Widow of *Joseph Corbin* who was a soldier in Company *B* of the *23rd* Regiment of *Inf* Volunteers, that he enlisted in said regiment on or about the month of *April* 1861, and served in the Army up to *April* 1864. That he lost his life on the *April* 1864. (State here particulars of the husband's death, when, where and from what cause.) *with measles*

Depoent 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 1854

I have been paid a pension as a resident of *Cherokee* County, for the year ending December 31, 1906, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me this *5th* day of *Jan* 1907. *Elender Corbin*
M. J. Webb Ordinary. Post Office

State of Georgia, } I, *M. J. Webb*
Cherokee County, } Ordinary of said County, certify that I am well acquainted with Mrs. *Elender Corbin*, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of *1839*

Given under my official signature and seal, this the *5th* day of *Jan* 1907.



M. J. Webb
 Ordinary of *Cherokee* County.

NOTE.—All blanks must be filled.
 Vouchers and Affidavits must bear date after January 1st, 1907.

Olen Cagle,

TO PAY-
1930. \$ 127
Cig. & C. Tax. \$
TOTAL.

Approved, and ordered paid,
apn 22 1934
Alfredson
A. L. HENSON,
Director, Veterans Service Office.

1930-26 0410
X 8.90 TOTAL 22.00

and do this before you please let me know, she is one of your pensioners
and if this is all O.K. you can sign on the back of blank,
With best wishes to you and yours,
Yours truly,
Olen Cagle
Olen Cagle,

\$ 330.00
CANTON, GA. Feb. 28 1934

RECEIVED OF JACOB MASSEY, ORDINARY, CHEROKEE COUNTY, GEORGIA
THIRTY and NO 100 DOLLARS
IN FULL SETTLEMENT OF CONFEDERATE PENSION FOR *March 2* 1934
WITNESS *Lawson & Poole*
PAYEE SIGN HERE
THE ACCOMPANYING CHECK WILL NOT BE PAID UNLESS THIS VOUCHER IS PROPERLY SIGNED AND WITNESSED.
AND REMAINS ATTACHED TO CHECK.

\$ 33.00 127.100
CANTON, GA. Feb. 28 1934

RECEIVED OF JACOB MASSEY, ORDINARY, CHEROKEE COUNTY, GEORGIA
One Hundred and Twenty Seven & no/100
THIRTY AND NO 100 DOLLARS
Funeral Expenses *Elender Corbin*
IN FULL SETTLEMENT OF CONFEDERATE PENSION FOR *March 2* 1934
WITNESS *Lawson & Poole*
PAYEE SIGN HERE
THE ACCOMPANYING CHECK WILL NOT BE PAID UNLESS THIS VOUCHER IS PROPERLY SIGNED AND WITNESSED.
AND REMAINS ATTACHED TO CHECK.

Application for Payment of Expenses of Last Illness and Funeral (Under Act of 1919) (To be disbursed by the Ordinary)

GEORGIA, Pikens, County:
Before me, the Ordinary of said County, comes Pink Townsend,
of said County, who, after being duly sworn, on oath says
that he knew Elender Corban late of said County, a Confed-
erate pensioner, and that said person is the identical person named and described in the attached
certified copy of burial certificate; and that said pensioner LEFT NO WIDOW and NO ESTATE of
ANY KIND OR VALUE sufficient to pay the expenses of last illness and funeral, which amounted
to the sum of \$ 180.90, as shown by sworn statements FULLY and COMPLETELY
ITEMIZED, hereto attached.
Sworn to and subscribed before me,
this the 27 day of Feb., 1934.
Olen Cagle Ordinary.

CERTIFICATE OF THE ORDINARY

GEORGIA, Pikens County.
I certify that Pink Townsend who subscribed
to the foregoing affidavit is known to me to be a person whose statement is entitled to full faith and
credit. I further certify that I knew Elender Corban the deceased
pensioner referred to in the foregoing affidavit and that said deceased was at the time of death
regularly enrolled as a pensioner on the records of file in my office. I further certify that said de-
ceased pensioner is the identical person named and described in the attached certified copy of burial
certificate, was not survived by a widow and left no estate of any kind sufficient to pay the expenses
of last illness and burial for which claim is made.
Given under my hand and seal of office, this the 27 day of Feb., 1934.
(Seal of Ordinary) *Olen Cagle* Ordinary.

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 form, giving 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 be) of _____, 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 widow, 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.

S. \$30.00 RECEIVED OF JACOB MASSEY, ORDINARY, CHEROKEE COUNTY, GEORGIA
 THIRTY and NO 100
 IN FULL SETTLEMENT OF CONFEDERATE PENSION FOR Funeral Expenses 193
 WITNESS Allen Eagle
 PAYEE SIGN HERE
LAWSON & POOLE
By Willie Book
 THE ACCOMPANYING CHECK WILL NOT BE PAID UNLESS THIS VOUCHER IS PROPERLY SIGNED AND WITNESSED.

S. ~~30.00~~ 127.100 CANTON, GA. Feb. 28 1935
 RECEIVED OF JACOB MASSEY, ORDINARY, CHEROKEE COUNTY, GEORGIA
 One Hundred & Twenty Seven & no/100
 THIRTY AND NO 100
 IN FULL SETTLEMENT OF CONFEDERATE PENSION FOR Funeral Expenses Elander Corbin 1935
 WITNESS Allen Eagle
 PAYEE SIGN HERE
LAWSON & POOLE
By Willie Book
 THE ACCOMPANYING CHECK WILL NOT BE PAID UNLESS THIS VOUCHER IS PROPERLY SIGNED AND WITNESSED.

that he knew Elander Corban late of said County, a Confed-
 erate pensioner, and that said person is the identical person named and described in the attached
 certified copy of burial certificate; and that said pensioner LEFT NO WIDOW and NO ESTATE of
 ANY KIND OR VALUE sufficient to pay the expenses of last illness and funeral, which amounted
 to the sum of \$ 180.90, as shown by sworn statements FULLY and COMPLETELY
 ITEMIZED, hereto attached.
 Sworn to and subscribed before me,
 this the 17 day of Feb., 1934
Allen Eagle Ordinary.

CERTIFICATE OF THE ORDINARY
 GEORGIA, Pickens County.
 I certify that Pink Townsend who subscribed
 to the foregoing affidavit is known to me to be a person whose statement is entitled to full faith and
 credit. I further certify that I knew Elander Corban the deceased
 pensioner referred to in the foregoing affidavit and that said deceased was at the time of death
 regularly enrolled as a pensioner on the records of file in my office. I further certify that said de-
 ceased pensioner is the identical person named and described in the attached certified copy of burial
 certificate, was not survived by a widow and left no estate of any kind sufficient to pay the expenses
 of last illness and burial for which claim is made.
 Given under my hand and seal of office, this the 17 day of Feb., 1934
 (Seal of Ordinary) Allen Eagle Ordinary.

- INSTRUCTIONS:
- 1st. Certified copy of Burial Certificate must accompany this application.
 - 2nd. Require these claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
 - 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 be) of _____, 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 widow, 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.

STATEMENT
 JASPER, GA. Feb. 15 1934
Mr. Pink Townsend
Jasper, Ga.
 IN ACCOUNT WITH
LAWSON & POOLE
 GENERAL MERCHANDISE
 1 Coakit 165 00
 1 Burial Drive 15 00
 1 Pr. Rose 90
 \$180 90
 Sworn to and subscribed to before me this the
 17th day of February, 1934.
Allen Eagle
 Ordinary Pickens, County, Ga.

STATE BOARD OF HEALTH
 BUREAU OF VITAL STATISTICS
PERMIT FOR BURIAL OR REMOVAL
 A SATISFACTORY DEATH CERTIFICATE having been filed with me, permission is hereby granted
 to bury or remove, according to the facts as stated below, the body of
 Full Name Elander Corbin Age 92 Sex Female Race White
 Date of Death February, 15th 1934 Cause of Death Leakage of heart, & High blood pressure
 Place of Death Pickens County, Ga. Residence Pickens County, Ga.
 Place of Burial Old Remaques Church Date of Burial February, 16, 1934
 No. _____ Signed Dr. P. Book Local Registrar.
 Dated Feb. 17, 1934 Address Jasper, Ga.

S. \$30.00 45.00 CANTON, GA. April 27 1934
 RECEIVED OF JACOB MASSEY, ORDINARY, CHEROKEE COUNTY, GEORGIA
 Forty Five and NO 100
 IN FULL SETTLEMENT OF CONFEDERATE PENSION FOR On Funeral Mrs. Elander Corbin 1934
 WITNESS Allen Eagle
 PAYEE SIGN HERE
LAWSON & POOLE
By Willie Book
 THE ACCOMPANYING CHECK WILL NOT BE PAID UNLESS THIS VOUCHER IS PROPERLY SIGNED AND WITNESSED.

STATEMENT

JASPER, GA. Feb. 15 1934


Mr. Pink Townsend
Jasper, Ga.
 IN ACCOUNT WITH #3
LAWSON & POOLE
 GENERAL MERCHANDISE

1 Casket
 1 Burial Dress
 1 Re. Rose

165 00
 15 00
 90
 \$180 90

Lawson & Poole
 By Wm. Poole

Sworn to and subscribed to before me this the
 17th day of February, 1934.
Allen Cagle
 Ordinary Pickens County, S.C.

 **STATE BOARD OF HEALTH**
 BUREAU OF VITAL STATISTICS
PERMIT FOR BURIAL OR REMOVAL

A SATISFACTORY DEATH CERTIFICATE having been filed with me, permission is hereby granted
Lawson & Poole of Jasper, Ga.
 (Person Asking Permit) (Postoffice Address)

to bury or remove, according to the facts as stated below, the body of

Full Name of Deceased Elander Corbin Age 92 Sex Female Race White
 Date of Death February, 15th 1934 Cause of Death Lesion of heart, & High blood
 Place of Death Pickens County, Ga. Residence Pickens County, Ga. Pressure
 Place of Burial Old Reformation Church Date of Burial February, 16, 1934
 No. _____ Signed D. P. Poole Local Registrar.
 Dated Feb. 17 1934 Address Jasper, Ga.

S. 3030 45.00 CANTON, GA. April 27 1934

RECEIVED OF JACOB MASSEY, ORDINARY, CHEROKEE COUNTY, GEORGIA

Forty Five
 THIRTY AND NO/100 _____ DOLLARS

On Funeral Mrs. Elander Corbin
 IN FULL SETTLEMENT OF CONFEDERATE PENSION FOR _____ 1934

WITNESS _____ PAYEE SIGN HERE
W. H. Thomas Lawson & Poole
 By Wm. Poole

THE ACCOMPANYING CHECK WILL NOT BE PAID UNLESS THIS VOUCHER IS PROPERLY SIGNED AND WITNESSED.
 AND REMAINS ATTACHED TO CHECK

I do certify that this is a true copy of the death certificate
 of Mrs. Elander Corbin, now on file in my Office.

D. P. Poole
 D. P. Poole, local Registrar.

I do certify that this is a true copy of the death certificate
of Mrs. Elanor Cerbin, now on file in my Office.

D. P. Peale
D.P. Peale, local Register.

POWER OF ATTORNEY.

STATE OF GEORGIA.

COUNTY.

I,

of

herby authorizes

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

at

by

Witness my hand and seal, this

day of

190

Executed in presence of

[L. S.]

Covingtons James E.
Cherokee County

No.

OK for 1906

INDIGENT PENSION.

1905

Dec 1906

Name *James E Covington*

County *Cherokee*

Co. *D. 23* *4th* Regt.

Approved *190*

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

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

9/27/06

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

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

9/27/06

ATTORNEY.

of _____
I that he remits same to _____
by _____
day of _____, 190 _____.
[L.S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

_____ COUNTY.

I, _____ hereby authorize

of _____

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

at _____

by _____

Witness my hand and seal, this _____ day of _____, 190 _____.
[L.S.]

Executed in presence of _____

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

_____ COUNTY.

James E. Livingston of said State and County, desiring to avail himself of the Pension Act (Section 1254, Code), hereby submits his proofs, and after being duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside? (Give State County and post-office).
James E. Livingston, Milledgeville, Ga.
2. How long and since when have you been a resident of this State? All my life
3. When and where were you born? 14th March 1840, Bartow Co., Ga.
4. When and where and in what company and regiment did you enlist or serve? Co. V, 2nd Regt. in Infanteria, 31st day of August 1861
Camp McDonald
5. How long did you remain in such company and regiment? until Surrender 1865
6. When and where was your company and regiment surrendered and discharged? Near Greensborough N.C. 1865
7. Were you present with your company and regiment when it was surrendered? Yes was
and by whose authority? I was present
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? I was present
9. How much can you earn (gross) per annum by your own exertions or labor? About half
10. What has been your occupation since 1865? Farmer & Mechanic
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? Infirmary and Poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state where you are totally blind and when and where you lost your sight? Had Rheumatism contracted during war and have had it ever since
13. What property, real and personal, or income, do you possess, and its gross value? Nothing but small and personal property worth \$200
14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? W. about 1892 or 1893 sold small tract of land for \$200
for day dole
15. In what County did you reside during those years, and what property did you then return for taxation? In Clarke County
16. How were you supported during the years 1899, 1900, 1901 and 1902? by my own labor mostly
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? I don't know cost, about all
18. What was your employment during 1898, 1899, 1901 and 1902? What pay did you receive in each year? Farming mostly
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? No family
20. Are you receiving any pension? If so, what amount and for what disability? No
21. Have you ever made an application for pension before? No
22. How many applications have you ever made and under what class? None

Every Question MUST Be Answered.

Sworn to and subscribed before me this the _____ day of _____, 190 _____.
_____ Ordinary,
of _____ County.

James E. Livingston
Applicant.

Livingston James E.
Clarke County

INDIGENT PENSION.

1905
Dec 1906

Name James E. Livingston
County Clarke
Co. A 23rd Regt.

Approved _____ 190 _____.
JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

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

9/27/06

Livingston James E.
Cherokee County
Oct 1906
INDIGENT PENSION.
1905
Dec 1906
 Name *James E. Livingston*
 County *Cherokee*
 Co. *S.* 23rd Regt.
 Approved _____ 190____
JOHN W. LINDSEY,
 Commissioner of Pensions.
WARRANT HANDED TO
 Ordinary will write name of Applicant, Company and Regiment on back as indicated above.
97760

EVERY QUESTION MUST
 support? If upon the third, state whether you are totally blind and when and where you lost your sight? *Infirmary*
and County. Have Pensioners
contracted during war and have had
it ever since
 13. What property, real and personal, or income, do you possess, and its gross value? *Nothing but*
small and personal property worth \$25
 14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902 and what disposition, if any, by sale or gift, have you made of same? *I don't know*
about 1898
I sold small tract of land for \$200
to pay debts
 15. In what County did you reside during those years, and what property did you then return for taxation?
In Cherokee County
 16. How were you supported during the years 1899, 1900, 1901 and 1902? *By my own*
labor
 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? *I don't know cost, about all*
 18. What was your employment during 1898, 1899, 1901 and 1902? What pay did you receive in each year?
Farming mostly
 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? *No family*
 20. Are you receiving any pension? If so, what amount and for what disability? *No*
 21. Have you ever made an application for pension before? *No*
 22. How many applications have you ever made and under what class? *None*
 Sworn to and subscribed before me this the _____ day of _____ 190____
James E. Livingston
 Applicant.
 _____ Ordinary,
 _____ County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Cherokee COUNTY.
 _____ of said State and County, having been presented as a witness in support of the application of *James E. Livingston* for pension under section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:
 1. What is your name and where do you reside? *J. H. Young*
Cherokee County, Ga.
 2. Are you acquainted with *James E. Livingston* the applicant; if so, how long have you known him? *Since about 45 years*
in Cherokee County, ever since I have known him
in Co. S. 23rd Regt. I was with him
 3. Where does he reside, and how long and since when has he been a resident of this State?
 4. When, where and in what company and regiment did he enlist, and how do you know?
 5. Were you a member of the same company and regiment? *I was*
 6. How long did he perform regular military duty? *something over four years*
 7. When and where was his command surrendered? *Near Greensburg*
12th April 1865
 8. Were you present when it surrendered? *I was*
 9. Was applicant present? *He was*
 10. If he was not present, where was he? *He was present*
 When did he leave his command? _____ For what cause? _____
 By what authority he left? _____ How do you know all of this?

11. What property, effects or income has the applicant? (Give your means of knowledge.)
I don't know of any.
 12. What property, effects or income did the applicant possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same? *I don't know of any*
 13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom?
Not that I know of
 14. What is the applicant's occupation and physical condition? *Farmer*
Rather weak
 15. Is the applicant unable to support himself by labor of any sort; if so, why? *I think so*
on account of Rheumatism
 16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? *By himself*
as far as know
 17. What portion of his support for these four years was derived from his own labor or income?
About all I suppose
 18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? *He has Rheumatism*
 19. Who composes family? What property have they? Children's age and their earning capacity?
Has no family
 20. What interest have you in the recovery of a pension by this applicant? *None*
 Sworn to and subscribed before me, this the _____ day of _____ 190____
J. H. Young
 Witness.
 _____ Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cherokee COUNTY.
 Personally came before me *John M. Tuck* and _____
Jo. A. Smith, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully _____
James E. Livingston, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:
Applicant is suffering from rheumatism
in arms and shoulders, which he
does not get over, and keeps him
from working, he contracted same, when
in such case he is excused from war,
and that we have no interest in said pension being allowed.
 Sworn to and subscribed before me, this the _____ day of _____ 190____
J. M. Tuck Ordinary. *John M. Tuck*

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cherokee COUNTY.
 I, *W. J. Webb* Ordinary, in and for said County, hereby certify that the applicant, *James E. Livingston* resides in said County, and has been a bona fide resident of this State since the _____ day of _____ 189____ and that the witnesses, viz: *John M. Tuck* and *Jo. A. Smith* are of trustworthy character, and that their statements are entitled to full faith and credit.
 I further certify that the foregoing questions the applicant and each witness took the oath hereon prescribed, and that the full text of the affidavit was read to the applicant and witness before same was signed.
 I further certify that the tax digest of _____ County shows that applicant returned for taxation in his name in 1899 _____ Dollars of property, and in 1900 _____ Dollars of property; in 1901 _____ Dollars of property; in 1902 _____ Dollars of property.
 In my opinion the foregoing claim is _____ made in good faith.
 Witness my hand and seal of office, this _____ day of _____ 190____
W. J. Webb Ordinary,
 _____ County.

NOTE.

- 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 evidence you shall give will be the whole truth, so help you God."
- Additional affidavits may be attached if blank spaces are insufficient.
- In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.

11. What property, effects or income has the applicant? (Give your means of knowledge.)
I don't know of any.

12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same? *I don't know of any.*

13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom?
Not that I know of.

14. What is the applicant's occupation and physical condition?
Formerly rather weak.

15. Is the applicant unable to support himself by labor of any sort; if so, why?
I think so on account of Rheumatism.

16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902?
As far as known by family.

17. What portion of his support for these four years was derived from his own labor or income?
About all I suppose.

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

19. Who composes family? What property have they? Children's age and their earning capacity?
Has no family.

20. What interest have you in the recovery of a pension by this applicant?
None.

Sworn to and subscribed before me, this *25* day of *Sept.* 190*5*.
W. J. Webb Ordinary.

1. *W. J. Webb* Ordinary, in and for said County, hereby certify that the applicant *James E. Covington* resides in said County, and has been a bona fide resident of this State since the *all his life* day of *Life* 189*...* and that the witnesses, viz: *John W. Lindsey & John C. Nash* 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 affidavit was read to the applicant and witness before same was signed.

I further certify that the tax digest of *Cherokee* County shows that applicant returned for taxation in his name in 1899 *\$263.* Dollars of property; in 1900 *\$293* Dollars of property; in 1901 *No Return* Dollars of property; in 1902 *No Return* Dollars of property.

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

Witness my hand and seal of office, this *25* day of *Sept.* 190*5*.
W. J. Webb Ordinary,
Cherokee County.

NOTE.

1. 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 evidence you shall give will be the whole truth, so help you God."
 2. Additional affidavits may be attached if blank spaces are insufficient.
 3. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cherokee COUNTY.
 I, *J. E. Covington* hereby authorize *W. J. Webb* of *Cherokee* County to receive and receipt for the pension allowed, and request that he remit same to *me* at *Cherokee* by *me*.

WITNESS my hand and seal, this *8* day of *June* 1906.
James E. Covington [L. S.]

Executed in the presence of
E. M. Webb

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cherokee COUNTY.
 I, *James E. Covington* hereby authorize *W. J. Webb* of *Cherokee* County to receive and receipt for the pension allowed, and request that he remit same to *me* at *Cherokee* by *me*.

WITNESS my hand and seal, this *14* day of *Jan'y* 1907.
James E. Covington [L. S.]

Executed in presence of
W. J. Webb

Cons Section 1254.
 (FOR THOSE ALREADY ENROLLED.)

No. *2919.*

INDIGENT
 SOLDIER'S PENSION
 1906.

Name *James E. Covington*
 County *Cherokee*
 Co. *D.* Regiment *23rd*

WARRANT ISSUED

FEB 1 1906.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDLED TO
W. J. Webb

The Pension Office and Public Land Office, at Washington, D.C.

No aster.

Cons Section 1254.
 (FOR THOSE ALREADY ENROLLED.)

No. *6007*

INDIGENT
 SOLDIER'S PENSION
 1907.

Name *James E. Covington*
 County *Cherokee*
 Co. *D.* Regiment *23rd*

WARRANT ISSUED

FEB 13 1907.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDLED TO
W. J. Webb

The Pension Office and Public Land Office, at Washington, D.C.

Covington James E.
Cherokee County

Cons Section 1294.
(FOR THOSE ALREADY ENROLLED.)

No. 2919.

INDIGENT
SOLDIER'S PENSION
1906.

Name James E. Covington
County Cherokee
Co. 2 Regiment 23rd

WARRANT ISSUED

FEB 1 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

July

The Pension Section and Division of the U. S. W. Department, Wash.

No data

Covington James E.
Cherokee Co.

Cons Section 1294.
(FOR THOSE ALREADY ENROLLED.)

No. 6007

INDIGENT
SOLDIER'S PENSION
1907.

Name James E. Covington
County Cherokee
Co. 2 Regiment 23rd

WARRANT ISSUED

FEB 13 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

The Pension Section and Division of the U. S. W. Department, Wash.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Cherokee County.

Personally appears James E. Covington 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 1844; that he is 66 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 years in Company D, of 23rd Regiment of Georgia Vol. Inf.; that his physical condition is as follows:

that his property consists of the following items: Household

of the value of Twenty five Dollars. I am now earning by my labor, Twenty Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this the 8 day of Jan 1906.

M. J. Webb Ordinary.

State of Georgia,

Cherokee County.

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

do certify that I am well acquainted with James E. Covington 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 8 day of Jan 1906.

M. J. Webb Ordinary Cherokee County.

ALL
JURY
FEEL
HERE

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,

Cherokee County.

Personally appears James E. Covington 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 1840; that he is 66 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 years in Company D, of 23rd Regiment of Georgia Vol. Inf.; that his physical condition is as follows: Infirmary and poverty

that his property consists of the following items: Nothing but small amt of House hold.

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

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

Sworn to and subscribed before me, this the 14 day of Jan 1907.

James E. Covington Ordinary.

State of Georgia,

Cherokee County.

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

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

Given under my official signature and seal this 14 day of Jan 1907.

Ordinary Cherokee County.

ALL
JURY
FEEL
HERE

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

federate States (or of the State of Georgia) during the war between the States, and served for the term of 4 in Company D, of 23th Regiment of the 1st Inf.; that his physical condition is as follows:

that his property consists of the following items: Household

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

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

Sworn to and subscribed before me, this the

8 day of Jan, 1906.

W. J. Webb Ordinary.

State of Georgia,

Cherokee County.

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

do certify that I am well acquainted with J. E. Covington 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 8

day of Jan, 1906.

W. J. Webb Ordinary Cherokee County.



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

States, and served for the term of 4 in Company D, of 23th Regiment of Georgia Vol. Inf.; that his physical condition is as follows: Infirmary and poverty

that his property consists of the following items: Nothing but small amt of House hold.

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

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

Sworn to and subscribed before me, this the

14 day of Jan, 1907.

W. J. Webb Ordinary.

State of Georgia,

Cherokee County.

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

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

Given under my official signature and seal this 14

day of Jan, 1907.

W. J. Webb Ordinary Cherokee County.



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

STATE OF GEORGIA.

Ordinary's Certificate

Cherokee COUNTY }

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

Sworn under my hand and official seal of office this 2nd day of Oct 1914.

W. H. Lindsey Ordinary
of Cherokee County }

(SEAL)

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

Stewart, L. E.
Cherokee Co.

No. 1920
Cherokee Co.

Confederate
Soldier's Application
Under Act 1910—As Amended by Act of 1919.

County Cherokee
Name L. E. Stewart
Company A
Regiment 7th Reg. Va.
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-31-1919

Ordinary of said County, certify that I know

an in the person he represents himself to be and

the witness swearing to the

were duly sworn by me before signing the foregoing

and their statements are entitled to full faith and

29th day of Oct 1919

It is hereby sworn and witnessed by the following

are insufficient in county in which the applicant or witness resides and

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-31-1919

Ordinary's Certificate

STATE OF GEORGIA,

COUNTY.

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

Sworn under my hand and official seal of office this 29th day of Oct 1919
J. M. Self, Ordinary
of Cherokee County.
(SEAL)

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

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

Questions For Applicants to Answer

STATE OF GEORGIA,

COUNTY.

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

1. What is your name and where do you reside? (Give County and Post-office) L. E. Cowart, Box 100, Cherokee Co., Georgia
2. How long and since when have you been a continuous resident citizen of this State? Since 1847 to 72 years
3. Did you enlist in the Army of the Confederate States or in the organized militia of this State from 1861 to 1865? Yes
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) Sept or Oct 1864, Cherokee Co., Capt. P. H. Lyons Co. 1st
5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge) 8 or 9 months from Feb 1864 till May 12 1865
6. When and where was your Company and Regiment surrendered or discharged from the Service? May 12 1865, Cherokee Co.
7. Were you actually present with your command when it was surrendered or discharged? Yes
8. If you were not actually present, state specifically and clearly where you were.
- a. Where was your command when you left it?
- b. When did you leave the command?
- c. For what cause did you leave?
- d. By whose authority did you leave?
- e. For how long was your leave granted? In what way?
- f. Why did you not return to your command after leave expired?
- g. In what way were you prevented?
- h. What effort did you make to return?
- i. Were you captured during the war?
- 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? No
10. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? No

Sworn to and subscribed before me, this the 29th day of Oct 1919
J. M. Self, Ordinary
of Cherokee County.
(SEAL)

Confederate
Soldier's Application
Under Act 1910—As Amended by Act of 1919.

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-31-1919

Cowart, L. E.
Cherokee Co.
Nov 1920

Corwart, L. E.
Cherokee Co.

Nov 1820

Confederate

Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County

Name

Company

Regiment

Approved

J. W. LINDSEY
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-31-1919

- Where was your command when you left it?
- When did you leave the command?
- For what cause did you leave?
- By whose authority did you leave?
- For how long was your leave granted? In what way?
- Why did you not return to your command after leave expired?
- In what way were you prevented?
- What effort did you make to return?
- Were you captured during the war?
- If so, when, and where? In what prison were you held and when were you released?
- Are you drawing a pension of any amount from this State or the United States?
- Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed?

Sworn to and subscribed before me, this the

29th day of Oct. 1919

J. M. Selfield Ordinary
of Cherokee County.

(SEAL)

Questions for Witness as to Service

STATE OF GEORGIA.

Cherokee COUNTY.

Mr. J. F. Farnum of said State and County is hereby presented as a witness in support of the application of L. E. Corwart for the pension provided by the Act of 1910, as amended by the Act of 1919 in said State, and, after being sworn true answers to make to the questions propounded, answers as follows:

- What is your name and where do you reside? Mr. J. F. Farnum, 1124 Grand St., Cherokee Co., Ga.
- How long and since when have you known L. E. Corwart? 65 years since 1854 the applicant?
- Where does he now reside, and since when has he been a bona fide, continuing resident in this State, and how do you know? 1124 Grand St., Cherokee Co., Ga. all his life.
- When, where and in what Company and Regiment did L. E. Corwart enlist during war from 1861 to 1865? (Give date and place.) July 7, 1864, 1st Co. Oct. 1864, 1st Co. 1st Regt. 1st Div. 1st Army.
- How did you obtain your information of this Service? I enlisted at the same time and served with him till the surrender May 12, 1865.
- How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date.) 6 or 7 months from July 1864 till May 12, 1865.
- When and where was his command surrendered or discharged (give date and place.) May 12, 1865, Vicksburg, Miss.
- Were you personally present at the surrender? Yes.
- If not, where were you and how came you there?
- Was the applicant personally present with his command at surrender? Yes.
- If not where was he and how came him there?
- When did he leave his command? Where was his command when he left it? For what cause did he leave?
- By whose authority did he leave? and how long was he granted leave? How do you know?
- What effort did he make to return to his command and how do you know?
- Was applicant captured as a prisoner? If so, when and where? and when released?

Sworn to and subscribed before me, this the

29th day of Oct. 1919

J. M. Selfield Ordinary
of Cherokee County.

(SEAL)

8. Were you personally present at the surrender? Yes
 9. If not, where were you and how came you there?
 10. Was the applicant personally present with his command at surrender? Yes
 11. If not where was he and how came him there?
 12. When did he leave his command? Where was his command when he left it? For what cause did he leave?
 By whose authority did he leave? and how long was he granted leave? How do you know all that you have stated to be true? If of your own knowledge, tell clearly and specifically
 13. In what way was he prevented from returning to his command?
 How do you know?
 14. What effort did he make to return to his command and how do you know?
 15. Was applicant captured as a prisoner? If so, when and where?
 In what prison was he held? and when released
 Sworn to and subscribed before me, this the 25 day of Oct 1924 } W. J. Lamm
J. M. Seepell Ordinary
 of Cherokee County.
 (SEAL)

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Cherokee Georgia.
 I, Jacob Massey, Ordinary of said County, do certify that I personally know M. P. Cowart, the applicant, and that she is the lawful widow of J. E. Cowart and was on the indigent Pension Roll of said Cherokee County, and was paid a Pension from Cherokee County for 1924, and at the time of his death on the 21 day of May 1924, there was due to him and unpaid his Pension of Twenty five Dollars from the State of Georgia, and I know the within witness, and he is of a truthful and trustworthy character and entitled to full credit.
 Given under my hand and seal this 24 of December, 1924.
 (Seal of Ordinary)
Jacob Massey Ordinary
Cherokee County

Cowart, J. E.

County Cherokee

1924

Application for Pension Due Deceased Soldier
 (UNDER ACT 1891)
 (To be paid to his Widow or Dependents Children)

BY
 Men M. P. Cowart
 Widow J. E. Cowart
 Date of Marriage 1877
 Date of Death May 21 1924

Approved and ordered J. E. Cowart
J. E. Cowart
 JAN 3 1925
 Commission Expires

Ordinary: Fill out above in full and send this blank to Pension Department for approval before you pay out the money, and then return it with your pay-rolls for permanent filing in the Pension Department.

No money

GEORGIA, Cherokee County
 I hereby authorize and constitute J. E. Cowart, of said County, my lawful attorney to collect, and receipt for me in my name, for the Pension due me for 1924, through my deceased husband, J. E. Cowart, who was on Pension Roll and paid from Cherokee County for 1924.
 Witness my hand this 24 day of December, 1924

Attested before me:
Jacob Massey M. P. Cowart

Ordinary: Fill out above in full and send this blank to Pension Department for approval before you pay out the money, and then return it with your pay-rolls for permanent filing in the Pension Department.

Attested before me:
Jack Massey

* Malissa V. Carnatt

[illegible]

State of Georgia, and resided with him from the date of marriage to his death 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 24 day of December, 1924

Jacob Massey Ordinary }
Cherokee County }
(Seal of Ordinary)

Matilda V. Cowart (L. S.)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Cherokee County.

Personally before me Jacob Massey, who on oath says that he knew Matilda V. Cowart while in life and that he knows Mrs. Matilda V. Cowart, the

above applicant; and knows that the said Matilda V. Cowart

and Jacob Massey were in due form of law married in the County

of Cherokee in the State of Georgia on

the 24 day of December, 1884, and that they were residing

together as husband and wife at the time of his death on the 24 day of

December, 1924, and that she is his dependent widow.

Sworn to and subscribed before me this 24 day of December, 1924.

Jacob Massey Ordinary }
Cherokee County }
(Seal of Ordinary)

INSTRUCTIONS:
1st. This form is for widows of Service and Disabled Soldier pensioners, who died after November 1st. If pensioner died after January 1st, pension dependent children, but not widow, their guardian may use this form in their behalf.
2nd. Proof of marriage may be made by a copy of marriage record not be proven, it being only necessary to prove that pensioner and widow were living together at the time of marriage and at the time of death.
3rd. On any use the accompanying form of marriage certificate in common with the State, suitable only for transmission to the Pension Department. A plain certificate written on the back of the form of the Pension Department is the proper form.
4th. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the seal affixed, and that both of application, when filled, is filled in.
5th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the payment.
6th. Return the application with your final settlement to the Pension Department.
7th. The widow of a pension holder has proper proof-of-entitled receipt for this pension by signing name, as widow, opposite the name of widow of pension holder on the application. If the marriage took place before 1881, take another application, on the white blank, to which widow to join in her own right. November 1st is the last filing date for the next year's rolls.

MARRIAGE LICENSE

OF

AND

Issued 19

and recorded on page

Book of Marriage Licenses.

Ordinary.

GEORGIA, CHEROKEE COUNTY.

I, Jacob Massey, Ordinary and ex-officio clerk of the court of Ordinary of said County, do hereby certify that I have compared the foregoing marriage of L. E. Cowart and M. V. Timmons with the original record thereof, now remaining in this office, and the same is a correct transcript therefrom and of the whole of such original record.

In Testimony Whereof, I have hereunto set my hand and affixed the seal of the court of Ordinary.

This 24th day of December, 1924.

Jacob Massey
Ordinary and ex-officio C. C. O.

NAME Cowart, L. E. YEAR 1920 COUNTY Cherokee.

WHEN AND WHERE BORN? A resident of Georgia since 1847, 72 years.

ENLISTED WHEN AND WHERE? September or October, 1864, Cherokee County, Georgia.

RANK:

COMPANY AND REGIMENT? Company A, 11th Georgia Regiment (Findley's Regiment).

NAME OF CAPTAIN AND COLONEL? P. H. Lyons, Captain.

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED:

WHEN AND WHERE SURRENDERED? May 12, 1865, Kingston, Georgia.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED:

WITNESSES: W. J. Farmer - served with applicant.

SB.

.....No data.

MARRIAGE LICENSE

OF

AND

19

and recorded on page

Book of Marriage Licenses.

Ordinary.

GEORGIA, CHEROKEE COUNTY.

I, Jacob Massey, Ordinary and ex-officio clerk of the court of ordinary of said County, do hereby certify that I have compared the foregoing marriage of L.E. Cowart and M.V. Timmons with the original record thereof, now remaining in this office, and the same is a correct transcript therefrom and of the whole of such original record.

In Testimony Whereof, I have hereunto set my hand and affixed the seal of the court of ordinary.

This 24th day of December, 1924.

Jacob Massey
Ordinary and ex-officio C.O.C.

NAME Cowart, L. E.

YEAR 1920 COUNTY Cherokee.

WHEN AND WHERE BORN?

A resident of Georgia since 1847,
72 years.

ENLISTED WHEN AND WHERE?

September or October, 1864, Cherokee
County, Georgia.

RANK:

COMPANY AND REGIMENT?

Company A, 11th Georgia Regiment
(Findley's Regiment).

NAME OF CAPTAIN AND COLONEL?

P.H. Lyons, Captain.

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED:

WHEN AND WHERE SURRENDERED?

May 12, 1865, Kingston, Georgia.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED:

WITNESSES:

W. J. Farmer - served with applicant.

SB.

.....No data.

No. 42

Marriage License

State of Georgia Cherokee County

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

You are hereby authorized to join

L.E. Cowart and M.V. Timmons

in the Holy State of Matrimony according to the Constitution and Laws of this State and for so doing this shall be your License.

And you are hereby required to return this License to me with your Certificate hereon of the fact and date of the Marriage.

Given under my hand and seal this 13th day of Aug. 1877 19 O.W. Putnam (U.S.) Ordinary.

STATE OF GEORGIA CHEROKEE COUNTY

I certify that

L.E. Cowart and M.V. Timmons

were joined in Matrimony by me this 13 day of Aug. 1877

and

Recorded Dec. 14th, 1877 19 O.W. Putnam Ordinary.

B.C. Hall, M.C.

LICENSE OBTAINED UNDER OATH BY

WASHBURN & BRUCE CO. NASHVILLE, TENN.

Sevier County

You are hereby authorized to join

U. W. Timmons

And you are hereby required to return this License to me with your Certificate hereon of the fact and date of the Marriage.

Given under my hand and seal this 13th day of
Aug. 1877 C. W. Putnam

CERTIFICATE

CHEROKEE COUNTY

J. E. C. Ward

W. V. Timmons

were joined in Matrimony by me this 13 day of June, Nineteen Hundred

and 1877

Dec. 14th, 1977

15

F.C.Hall, M.C.

C. W. Putnam

— Ordinary

MARSHALL & BRUCE CO NASHVILLE TENN

PARTY PERFORMING CEREMONY RETURN TO ORDINARY TO BE RECORDED

Cowart, Malissa V.
of Cherokee County
for 1925

WIDOW'S APPLICATION

To Be Put on Roll in Her Own Right When
Husband Was on the Pension Roll
of Georgia.

County Cherokee
Name Malissa V. Cowart
Widow of L. C. Cowart
Company _____
Regiment _____
Date of Husband's Death 19
Date of Marriage 18
Approved Feb. 5, 1925

W. E. Harris
W. E. HARRIS
Commissioner of Pensions.

7/25/1924

Ordinary's Certificate

STATE OF GEORGIA.

Cherokee COUNTY.

I, Garret Mackey Ordinary of said County, do certify that I
know Mrs. Malissa V. Cowart 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 _____ day of _____ 1925.
(SEAL OF ORDINARY) Garret Mackey Ordinary.
Cherokee County

Instructions

1. Before any questions are answered the Ordinary must answer 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 witness."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Affidavits must be made before the Ordinary of the County of residence.
4. On affidavits no person shall be sworn who is not a resident of the County of residence.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage by some person, or by gen-
eral service—because Disabled Pensioners made no proof of service and were not required to do so.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of hus-
band's service—because Disabled Pensioners made no proof of service and were not required to do so.

Date of Marriage 18

Approved Feb. 5, 1925

Certificate

H. E. Harris
C. E. McGINNON
Commissioner of Pensions.

7/25/1924

Ordinary of said County, do certify that I the applicant for pension; that she is the person known as a bona fide resident of said County since January 1st, 1920; that I also know _____, the witness as to 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.

ce this day of 1925
J. Massey
Ordinary,
County

all 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." Additional affidavits may be attached if blank spaces are insufficient. All affidavits must be made before the Ordinary of the County of residence. Only widows who are married prior to first January, 1881, are entitled. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation. Widows 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.

County Malissa V. Bawert
Ordinary of County
Feb 5, 1925

WIDOW'S APPLICATION

To Be Put on Roll in Her Own Right When Husband Was on the Pension Roll of Georgia.

County Cherokee
Name Malissa V. Bawert
Widow of V. C. Bawert
Company
Regiment
Date of Husband's Death 19
Date of Marriage 18
Approved Feb. 5, 1925

H. E. Harris
C. E. McGINNON
Commissioner of Pensions.

7/25/1924

Ordinary's Certificate

STATE OF GEORGIA.

Cherokee

COUNTY.

I, *J. Massey* Ordinary of said County, do certify that I know Mrs. *Malissa V. Bawert*, 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 affidavits, 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 _____ day of _____, 1925
(SEAL OF ORDINARY) *J. Massey* Ordinary,
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. 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 certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows 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.

Ordinary's Certificate

STATE OF GEORGIA,

Cherokee COUNTY.

I, *Jacob Massey* Ordinary of said County, do certify that I know Mrs. *Malissa V. Cowart*, 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 affidavits, 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 _____ day of _____, 192____.

(SEAL OF ORDINARY) *Jacob Massey* Ordinary, *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. 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 certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows 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 *Malissa V. Cowart* of said County, who, after having been duly sworn, says that she is the widow of *Louis C. Cowart* to whom, in the County of *Cherokee* State of *Georgia* she was married on the *23* day of *Aug.* 18*77* and that she remained his wife, and resided with him to the date of his death in *April 25* 19*24* and that she has not since his death remarried; at the time of his death he was a resident of *Cherokee* County, in said State of Georgia, and he was on the *Confederate* Pension Roll of the State and paid a pension of \$*1.00* in *Cherokee* County for 19*24* (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 since *all her life* day of _____ 19____.

Sworn to and subscribed before me, this the

24 day of *July* 192*4*.
Jacob Massey Ordinary, *Cherokee* County. *Malissa V. Cowart* (Applicant)

(SEAL OF THE ORDINARY.)

Affidavit of Witness to Prove Marriage and Date of Death of Husband.

STATE OF GEORGIA,

_____ COUNTY.

Personally before me comes _____ known to be a responsible and truthful person, residing in said County, who after having been duly sworn, says that of deponent's own personal knowledge, Mrs. _____ who made the foregoing affidavit, is the lawful widow of _____ who died in _____ County in said State of _____ on the _____ day of _____, 19____, and that she has not since remarried; that she became the wife of _____ on the _____ day of _____, 18____; that she and he had resided together as husband and wife, continuously, since _____ day of _____, 19____, and that _____ was the same man who was on the pension roll of said State _____ from _____ County _____ when he died.

Sworn to and subscribed before me, this the

_____ day of _____, 19____.
_____ Ordinary
of _____ County.

(SEAL OF ORDINARY)

JACOB MASSEY, Ordinary

Ex-officio Clerk Court of Ordinary

OFFICE OF

ORDINARY CHEROKEE COUNTY

Canton, Georgia July 24th 1924.

Hon. C. E. McGregor.

Atlanta, Ga.

Dear sir: I am enclosing herewith Mrs. M. V. Cowart's application for pension.

Can you look on record and get "C" and Reg. as we have not got it here.

Do you have any idea when you will pay us ordinary's our fees?

Respectfully yours,

Jacob Massey

OFFICE OF
ORDINARY CHEROKEE COUNTY

Canton, Georgia July 24th 1924.

Hon.C.E.McGregor.

Atlanta, Ga.

Dear sir: I am enclosing herewith Mrs.M.V.Cowart's application for pension.

Can you look on record and get "C" and Reg.as we have not got it here .

Do you have any idea when you will pay us ordinary's our fees?

Respectfully yours,

Jacob Massey

of Georgia, and he was on the *Confederate* Pension Roll of the State and paid a pension of \$100.00 in *Cherokee* County for 1924 (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 since *all her life* day of _____ 19 _____

Sworn to and subscribed before me, this the *24* day of *July*, 192*4*.
Jacob Massey Ordinary
of *Cherokee* County.
(Applicant)

(SEAL OF THE ORDINARY.)

Affidavit of Witness to Prove Marriage and Date of Death of Husband.

STATE OF GEORGIA,

COUNTY.

Personally before me comes _____ known to be a responsible and truthful person, residing in said County, who after having been duly sworn, says that of deponent's own personal knowledge, Mrs. _____, who made the foregoing affidavit, is the lawful widow of _____ who died in _____ County in said State of _____ on the _____ day of _____, 19 _____, and that she has not since remarried; that she became the wife of _____ on the _____ day of _____, 18 _____; that she and he had resided together as husband and wife, continuously, since _____ day of _____, 19 _____, and that _____ was the same man who was on the pension roll of said State _____ from _____ County _____ when he died.

Sworn to and subscribed before me, this the _____ day of _____, 19 _____

Ordinary

of _____ County.

(SEAL OF ORDINARY)

JACOB MASSEY, Ordinary
Ex-officio Clerk Court of Ordinary

OFFICE OF
ORDINARY CHEROKEE COUNTY

Canton, Georgia July 24th 1924.

Hon.C.E.McGregor.

Atlanta, Ga.

Dear sir: I am enclosing herewith Mrs.M.V.Cowart's application for pension.

Can you look on record and get "C" and Reg.as we have not got it here .

Do you have any idea when you will pay us ordinary's our fees?

Respectfully yours,

Jacob Massey

GEORGIA, CHEROKEE COUNTY.

I, Jacob Massey, Ordinary and ex-officio clerk of the court of Ordinary of said County, do hereby certify that I have compared the foregoing copy of marriage of L.E.Cowart and Malissa V.Timmonds with the original record thereof, now remaining in this office, and the same is a correct transcript therefrom and of the whole of such original record.
In Testimony Whereof, I have hereunto set my hand and affixed the seal of the Court of Ordinary.
This 24th day of July 1924.

Jacob Massey
Ordinary and ex-officio C.C.O.

and wife, continuously, since _____ day of _____, 19____, and that _____
was the same man who was on the pension roll of said State _____ from _____
County _____ when he died.
Sworn to and subscribed before me, this the _____
day of _____, 19____
_____ Ordinary
of _____ County.

(SEAL OF ORDINARY)

JACOB MASSEY, Ordinary
Ex-officio Clerk of Ordinary

OFFICE OF
ORDINARY CHEROKEE COUNTY

Canton, Georgia July 24th 1924.

Hon. C. E. McGregor.

Atlanta, Ga.

Dear sir: I am enclosing herewith Mrs. M. V. Cowart's application for pension.

Can you look on record and get "O" and Reg. as we have not got it here.

Do you have any idea when you will pay us ordinary's our fees?

Respectfully yours,

Jacob Massey

GEORGIA, CHEROKEE COUNTY.

I, Jacob Massey, Ordinary and ex-officio clerk of the court of Ordinary of said County, do hereby certify that I have compared the foregoing copy of marriage of L. E. Cowart and Melissa V. Timmons with the original record thereof, now remaining in this office, and the same is a correct transcript therefrom and of the whole of such original record.
In Testimony Whereof, I have hereunto set my hand and affixed the seal of the Court of Ordinary.
This 24th day of July 1924.

Jacob Massey
Ordinary and ex-officio C.C.O.

OFFICE OF
ORDINARY CHEROKEE COUNTY

Canton, Georgia July 24th 1924.

Hon. O. E. McGregor.

Atlanta, Ga.

Dear sir: I am enclosing herewith Mrs. M. V. Cowart's application for pension.

Can you look on record and get "C" and Reg. as we have not got it here.

Do you have any idea when you will pay us ordinary's our fees?

Respectfully yours.

Jacob Massey

GEORGIA, CHEROKEE COUNTY.

I, Jacob Massey, Ordinary and ex-officio clerk of the court of Ordinary of said County, do hereby certify that I have compared the foregoing copy of marriage of L. E. Cowart and Malissa V. Timmonds with the original record thereof, now remaining in this office, and the same is a correct transcript therefrom and of the whole of such original record.

In Testimony Whereof, I have hereunto set my hand and affixed the seal of the Court of Ordinary.

This 24th day of July 1924.

Jacob Massey
Ordinary and ex-officio C.O.O.



L. E. Cowart

Malissa V. Timmonds

in the Holy State of Matrimony, according to the Constitution and Laws of this State and for so doing this shall be your license.

And you are hereby required to return this license to me with your Certificate hereon of the fact and date of the Marriage.

Given under my hand and seal this 21st day of August, 1877

O. W. Putnam

(L.S.) Ordinary

STATE OF GEORGIA

CERTIFICATE

CHEROKEE COUNTY

I Certify that

L. E. Cowart

and

Malissa V. Timmonds

were joined in Matrimony by me this 23 day of August Nineteen Hundred and 1877

Recorded Dec. 14th 1877 192
O. W. Putnam Ordinary

B. C. Hitt M. G.

GEORGIA. **CHEROKEE**

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

You are hereby authorized to join

L.E.Cowart and Malissa V.Timmons

in the Holy State of Matrimony according to the Constitution and Laws of this State and for so doing this shall be your License. And you are hereby required to return this License to me with your Certificate hereon of the fact and date of the Marriage.

Given under my hand and seal this 21st day of August, 1877

O.W.Putnam Ordinary (L.S.)

STATE OF GEORGIA **CERTIFICATE** **CHEROKEE COUNTY**

I Certify that L.E.Cowart and Malissa V.Timmons

were joined in Matrimony by me this 23 *day of* August *Nineteen Hundred*

and 1877

Recorded Dec. 14th 1877 *192* B.C.Hitt M.G.

O.W.Putnam Ordinary.

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

STATE OF GEORGIA, County of Cherokee
I, A. B. Berry Ordinary in and for said County of
Cherokee State of Georgia, hereby certify that I am acquainted with Mrs.
Cherokee the applicant for a pension in this case, and
know, from my own knowledge (or from positive proof presented to me by reputable wit-
nesses), that she resides in this County, and that she resided in the State of Georgia on
December 23, 1860, and has not lived out of the State since that date. That she is the
widow of William Berry deceased, and as such has heretofore
been allowed a pension for the year ending February 15th, 1893.

In Witness Whereof, I have hereto set my hand and affixed the seal of my office,
this, the 17 day of January, 1894.
A. B. Berry Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, County of Cherokee
KNOW ALL MEN BY THESE PRESENTS, That I, William Berry
of Cherokee County in said State, do hereby appoint A. B. Berry
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 en-
titled 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
 money which may be paid to me 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 17
 day of January, 1894.

Executed in the presence of us:
A. B. Berry, ordinary [L. S.]
D. B. Berry

Send amount by _____ to _____ and oblige
me at _____

DIRECTIONS.

Bowart, Susan
Cherokee
FOR THOSE HERETOFORE PAID.
1894.
No. 613
WIDOWS' PENSION,
for year ending February 15th, 1894.
— PAID TO —
Mrs. Susan Bowart
— OF —
Cherokee COUNTY.
WARRANT ISSUED
27 9 1894.
AND FORWARDED TO:
A. M. Roberts
Geo. W. HARRISON, State Printer, Atlanta.

Certificate of Ordinary of t

STATE OF GEORGIA, County of

I, *A. B. Berry*
Cherokee State of Geor
Unborn

know, from my own knowledge (or from witnesses), that she resides in this County, December 23, 1890, and has not lived on widow of *William M. Stewart* been allowed a pension for the year ending

In Witness Whereof, I have hereat this, the *17* day c

POWER C

STATE OF GEORGIA, *Cherokee*

KNOW ALL MEN BY THESE PRESEN

County in said State, do hereby appoint of *David Berry* and in my name, to receive and rec titled to from the State of Georgia as a foregoing affidavit; hereby authorizing Warrant that may be issued by the Gov coming to me for the reason aforesaid. IN WITNESS WHEREOF, I have here day of *January* 1894.

Executed in the presence of us:

A. B. Berry, ordinary
D. B. Berry

Send amount by

me at

—OF—
Cherokee COUNTY.
WARRANT ISSUED
27/9
AND MANDED TO
A. B. Berry
Geo. W. HARRISON, State Printer, Atlanta.

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

STATE OF GEORGIA, County of *Cherokee*

I, *A. B. Berry* Ordinary in and for said County of *Cherokee* State of Georgia, hereby certify that I am acquainted with Mrs. *Unborn* the applicant for a pension in this case, and

know, from my own knowledge (or from positive proof presented to me by reputable witnesses), that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of *William M. Stewart* deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1893.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the *17* day of *January* 1894.

[Seal]

A. B. Berry

Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, *Cherokee* County.

KNOW ALL MEN BY THESE PRESENTS, That I, *Unborn* of *Cherokee* County in said State, do hereby appoint *A. B. Berry* my true and lawful attorney in fact, for

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *17* day of *January* 1894.

Executed in the presence of us:

A. B. Berry, ordinary
D. B. Berry

DIRECTIONS.

Send amount by

me at

, and oblige

to

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

STATE OF GEORGIA, County of *Cherokee*

I, *A. B. Berry* Ordinary in and for said County of *Cherokee* State of Georgia, hereby certify that I am acquainted with Mrs. *Unborn* the applicant for a pension in this case, and

know from my own knowledge (or from positive proof presented to me by reputable witnesses), that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of *William M. Stewart* deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1894.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the *17* day of *January* 1895.

[Seal]

A. B. Berry

Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, *Cherokee* County.

KNOW ALL MEN BY THESE PRESENTS, That I, *Unborn* of *Cherokee* County in said State, do hereby appoint *A. B. Berry* my true and lawful attorney in fact, for

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *17* day of *January* 1895.

Executed in the presence of us:

A. B. Berry, ordinary
D. B. Berry

DIRECTIONS.

Send amount by

me at

, and oblige

to

WARRANT ISSUED
27/9
AND MANDED TO
A. B. Berry
1894.

WIDOW'S PENSION,
for year ending February 15th, 1894.
—PAID TO—
Unborn
—OF—
Cherokee COUNTY.

No. *613*
1894.

FOR THOSE HERETOFORE PAID.
Unborn
Cherokee

WARRANT ISSUED
27/9
AND MANDED TO
A. B. Berry
1895.

WIDOW'S PENSION,
for year ending February 15th, 1895.
—PAID TO—
Unborn
—OF—
Cherokee COUNTY.

No. *2398*
1895.

FOR THOSE HERETOFORE PAID.
Unborn
Cherokee

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 14 day of January 1894.

Executed in the presence of us:

J. B. Berry, ordinary.
D. B. Berry.

DIRECTIONS.

Send amount by _____ to me at _____, and oblige

titled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 5 day of January 1895.

Executed in the presence of us:

J. B. Berry, ordinary.
D. B. Berry.

DIRECTIONS.

Send amount by _____ to me at _____, and oblige

Clarke County
FOR THOSE HERETOFORE PAID.

1895.

No. 2398

WIDOW'S PENSION,

for year ending February 15th, 1895.

PAID TO

William H. Bower

OR

Clarke County.

Widow of Mrs. Bower

WARRANT ISSUED

7th of 4

AND NAMED TO

1895.

Clarke County, Georgia.

FOR THOSE HERETOFORE PAID.

1894.

No. 613

WIDOW'S PENSION,

for year ending February 15th, 1894.

PAID TO

William H. Bower

OR

Clarke County.

Widow of Mrs. Bower

WARRANT ISSUED

27th of 9

AND NAMED TO

1894.

Clarke County, Georgia.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Clarke

Personally comes Mrs.

William H. Bower

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

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

continuously ever since the year 1819 That she is the Widow of

William H. Bower who was a Soldier in Company

of the 66th Regiment of Georgia

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

1863 and served in the Army up to Nov. 1863 That he lost his

life on the _____ day of _____ 18 (State here

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

Said husband was taken prisoner of war on the 25th day of Nov. 1863 at the Battle of Missionary Ridge Tenn. and died in Northern Prison

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 1844; 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

17 day of January 1894.

J. B. Berry Ordinary.

Post-office

William H. Bower
mark

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Clarke

Personally Comes Mrs.

Servant Bower

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

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

continuously ever since 1838 That she is the Widow of

William H. Bower who was a Soldier in Company

of the 66 Regiment of Georgia

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

1863 and served in the Army up to November 1863 That he lost his

life on the _____ day of _____ 18 (State here

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

Said husband was taken prisoner of war at the Battle of Missionary Ridge on the 25th day of November 1863 and died in Northern Prison

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 1844; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this

5th day of January 1895.

J. B. Berry Ordinary.

Post-office

Servant Bower
mark

Sworn and said in northern prison

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 1844; 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

17 day of January, 1894.

A. C. Brown Ordinary.

Post-office

Sworn to and subscribed before me, this

The 25th day of November 1893
and said in northern prison

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 1844; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this

17 day of January, 1895.

A. C. Brown Ordinary.

Post-office

Sworn to and subscribed before me, this

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

STATE OF GEORGIA, County of Cherokee

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

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

Susan Cowart the applicant for a pension in this case, and

know from my own knowledge (or from positive proof presented to me by reputable witnesses,) that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of William Cowart deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1895.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the 17 day of January, 1896.

A. C. Brown Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cherokee County.

I, Susan Cowart hereby authorize Webb Roberts

of Cherokee County to receive and receipt for the pension paid hereon and request

that he remit same to me at Ball Ground Ga.

In WITNESS WHEREOF, I have hereunto set my hand and seal, this 17 day of January, 1896.

Susan Cowart [L.S.]

Executed in the presence of

A. C. Brown Ordinary
of Cherokee County

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

STATE OF GEORGIA, County of Cherokee

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

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

Susan Cowart the applicant for a pension in this case, and

know from my own knowledge (or from positive proof presented to me by reputable witnesses,) that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of Wm. H. Cowart 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 17 day of January, 1897.

A. C. Brown Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cherokee County.

I, Susan Cowart hereby authorize Webb Roberts

of Cherokee Co. to receive and receipt for the pension paid hereon and request

that he remit same to me at Ball Ground Ga.

In WITNESS WHEREOF, I have hereunto set my hand and seal, this 17 day of January, 1897.

Susan Cowart [L.S.]

Executed in the presence of

Webb Roberts

WIDOW'S PENSION,

No. 3579

1896.

Cherokee County

FOR THE YEAR ENDING FEBRUARY PAID.

PAID TO

Widow of William Cowart

OF

Cherokee County.

WARRANT ISSUED

2/11

AND NAMED TO

1896.

Don. W. Johnson, State Printer.

Cherokee County

1897.

No. 3511

WIDOW'S PENSION,

FOR THE YEAR ENDING FEBRUARY PAID.

PAID TO

Widow of Susan Cowart

OF

Cherokee County.

WARRANT ISSUED

2/11

AND NAMED TO

1897.

Don. W. Johnson, State Printer.

I, Cherokee County hereby authorize me to receive and receipt for the pension paid hereon and request that he remit same to me at Ball Ground Ga.
In WITNESS WHEREOF, I have hereunto set my hand and seal, this 4th day of January 1896.

Executed in the presence of

A. C. Cunningham
of Cherokee County

Susan Cowart [L.S.]
mark

I, Susan Cowart hereby authorize me to receive and receipt for the pension paid hereon and request that he remit same to me at Ball Ground Ga.
In WITNESS WHEREOF, I have hereunto set my hand and seal, this 12th day of January 1897.

Executed in the presence of

Webb Corn

Susan Cowart [L.S.]
mark

For THOSE HERETOFORE PAID.
1896.
No. 3549
WIDOW'S PENSION,
for year ending February 15th, 1896.
PAID TO
Susan Cowart
OF
Cherokee County,
widow of William Cowart
WARPAINT ISSUED
2/11
AND PAID TO
her
1896.
Geo. W. Johnson, State Printer.

For THOSE HERETOFORE PAID.
1897.
No. 3511
WIDOW'S PENSION,
for year ending February 15th, 1897.
PAID TO
Susan Cowart
OF
Cherokee County,
widow of William Cowart
RICHARD JOHNSON,
Comptroller of Finance.
WARPAINT ISSUED
2/11
AND PAID TO
her
1897.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, } Personally Comes Mrs.
County of Cherokee } Susan Cowart

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 the year 1824 That she is the Widow of William Cowart who was a Soldier in Company H of the 66 Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of August 1862 and served in the Army up to Nov 1862 That he lost his life on the day of 18 (State here full particulars of the husband's death, when, where and from what cause.)

Said husband was killed in Prison at
Shenandoah City in the State of Virginia
the 30th day of May 1864 and died in Prison

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 1824, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Cherokee County for the year ending February 15th, 1896, and now apply for the pension provided by law for the year ending February 15th, 1896.

Sworn to and subscribed before me, this
4th day of July 1896.
A. C. Cunningham Ordinary.

Post-office

Susan Cowart
mark

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, } Personally Comes Mrs.
County of Cherokee } Susan Cowart

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 1827 That she is the Widow of William H. Cowart who was a Soldier in Company N of the 66 Regiment of Georgia Volunteers, that enlisted in said regiment on or about the month of October 1863 and served in the Army up to Fall of 1864 That he lost his life on the day of 1864 (State here full particulars of the husband's death, when, where and from what cause.) Died in Prison in the 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 1825, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Cherokee County for the year ending February 15th, 1896, and now apply for the pension provided by law for the year ending February 15th, 1897.

Sworn to and subscribed before me, this
12 day of Jan 1897.
Allen C. Corn Ordinary.

Post-office

Susan Cowart
mark
Ball Ground Ga.

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 1845, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Cherokee County for the year ending February 15th, 1895, and now apply for the pension provided by law for the year ending February 15th, 1896.

Sworn to and subscribed before me, this 11th day of Jan 1896.
A. B. Conn Ordinary.

Susan Cowart
her
mark
Post-office

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 1845, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Cherokee County for the year ending February 15th, 1896, and now apply for the pension provided by law for the year ending February 15th, 1897.

Sworn to and subscribed before me, this 12 day of Jan 1897.
Allen C. Conn Ordinary.

Susan Cowart
her
mark
Post-office Ball Ground Ga.

POWER OF ATTORNEY.

State of Georgia, Cherokee County.
I, Susan Cowart hereby authorize G. W. Roberts
of Ball Ground Ga to receive and receipt for the pension paid hereon and request that he remit same to me at Ball Ground Ga

In WITNESS WHEREOF, I have hereunto set my hand and seal, this 15 day of Jan 1896.
Susan Cowart [L. S.]
her
mark

Executed in the presence of

Webb Conn

POWER OF ATTORNEY.

State of Georgia, Cherokee County.
I, Susan Cowart hereby authorize Allen Roberts
of Ball Ground Ga

to receive and receipt for the pension paid hereon and request that he remit same to me at Ball Ground

In WITNESS WHEREOF, I have hereunto set my hand and seal, this 2 day of Jan 1897.

Executed in presence of

Webb Conn

Cowart, Susan
Cherokee Co.
For Those Heretofore Paid.

1898.

NO. 3698

WIDOW'S PENSION,
For year ending February 15th, 1898.

Mrs. Susan Cowart

or

Cherokee

County,
Widow of William H. Cowart

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

1898.

AND HANDED TO

G. W. Roberts

Geo. W. Harrison, State Printer, Atlanta.

Cowart, Susan
Cherokee County
For Those Heretofore Paid.

1899.

NO. 3044

WIDOW'S PENSION,
For year ending February 15th, 1899.

Mrs. Susan Cowart

or

Cherokee

County,
Widow of Wm. H. Cowart

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

1899.

AND HANDED TO

G. W. Roberts

Geo. W. Harrison, State Printer, Atlanta.

Cowart Susan
Cherokee Co.
For Those Heretofore Paid.
1898.
NO. 3698
WIDOW'S PENSION,
For year ending February 15th, 1898.
Mrs Susan Cowart
PAID TO
OF
Cherokee
County,
Widow of *William H Cowart*
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT ISSUED
2/26
AND HANDED TO
A. N. Roberts
1898.
GEO. W. HARRISON, STATE PRINTER, ATLANTA.

Cowart Susan,
Cherokee County
For Those Heretofore Paid.
1899.
NO. 3044
WIDOW'S PENSION,
For year ending February 15th, 1899.
Mrs Susan Cowart
PAID TO
OF
Cherokee
County
Widow of *Wm. H. Cowart*
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT ISSUED
7/4
AND HANDED TO
A. N. Roberts
1899.
GEO. W. HARRISON, STATE PRINTER, ATLANTA.

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA, } Personally Comes Mrs.
County of *Cherokee* } *Susan Cowart*

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 *October* 18 *27*. That she is the Widow of *William H Cowart* who was a Soldier in Company *H* of the *66* Regiment of *Georgia* Volunteers, that he enlisted in said regiment on or about the month of *August* 186 *2* and served in the Army up to *1864*. That he lost his life on the day of *1864*. (State here full particulars of the husband's death, when, where and from what cause.) *Died in Prison in Rock Island Illinois in the 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, and that she became his wife in the year 18 *44*

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

Sworn to and subscribed before me, this *15* day of *January* 1898. *Susan Cowart* her mark
Allen C. Coates Ordinary. Post-Office *Rock Ground*

State of Georgia, }
Cherokee County. } *Allen C. Coates*
Ordinary of said County, certify that I am well acquainted with Mrs. *Susan Cowart* who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of *October* 18 *44*

Given under my official signature and seal this *15* day of *January* 1898.
Allen C. Coates
Ordinary of *Cherokee* County.

Official Seal.

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA, } Personally Comes Mrs.
County of *Cherokee* } *Susan Cowart*

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 *Oct* 18 *26*. That she is the Widow of *William H Cowart* who was a soldier in Company *H* of the *66* Regiment of *Georgia* Volunteers, that he enlisted in said regiment on or about the month of *Aug* 186 *3* and served in the Army up to *1863*. That he lost his life on the day of *1864*. (State here full particulars of the husband's death, when, where and from what cause.) *Died in Prison at Rock Island Illinois in the 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, and that she became his wife in the year 18 *46*

I have been allowed a pension as a resident of *Cherokee* 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 *2* day of *January* 1899. *Susan Cowart* her mark
Allen C. Coates Ordinary. Post-Office *mark*

State of Georgia, }
Cherokee County. } *Allen C. Coates*
Ordinary of said County, certify that I am well acquainted with Mrs. *Susan Cowart* who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of *Oct* 18 *26*

Given under my official signature and seal this *2* day of *January* 1899.
Allen C. Coates
Ordinary of *Cherokee* County.

Official Seal.

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 1844

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

Sworn to and subscribed before me, this 15 day of January 1898.

Susan Cowart
her mark
Post-Office Base Ground

State of Georgia,
Cherokee County.

I Allen C Cowart
Ordinary of said County, certify that I am well acquainted

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

has continuously resided in this State since the day of October 1844

Given under my official signature and seal this the 15 day of January 1898.

Allen C Cowart
Ordinary of Cherokee County.

Official Seal

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 1845

I have been allowed a pension as a resident of Cherokee 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 2 day of January 1899.

Susan Cowart
her mark
Post-Office

State of Georgia,
Cherokee County.

I Allen C Cowart
Ordinary of said County, certify that I am well acquainted

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

has continuously resided in this State since the day of Oct 1826

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

Official Seal

Allen C Cowart
Ordinary of Cherokee County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cherokee County.

I, Susan Cowart hereby authorize W. H. Wright
of Cherokee

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

Albion Cowart at Base Ground

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 15 day of Jan 1900.

Executed in presence of

Albion Cowart

Susan Cowart [L. S.]
her mark

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cherokee County.

I, Susan Cowart hereby authorize Albion Cowart
of Cherokee

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

me at Base Ground

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 15 day of Jan 1901.

Executed in presence of

Albion Cowart

Susan Cowart [L. S.]
her mark

more power atty to bond

Cowart, Susan
Cherokee, Ga.
To Those Heretofore Paid.

1900.

No. 808

WIDOW'S PENSION,

For year ending February 15th, 1900.

PAID TO

Albion Cowart

OF

Cherokee County,

Widow of Susan Cowart

JNO. W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

Feb 13 1900,

AND HANDLED TO

Wright

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

Cowart, Susan
Cherokee County
To Those Heretofore Paid.

1901.

No. 254

WIDOW'S PENSION,

For year ending February 15th, 1901.

PAID TO

Albion Cowart

OF

Cherokee County.

Widow of Susan Cowart

JNO. W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

Feb 12 1901,

AND HANDLED TO

Cowart

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

FOR WIDOWS HERETOFORE ALLOWED PENSIONS

Cowart, Susan
Cherokee County
 To Those Heretofore Paid.

1900.

No. *808*

WIDOW'S PENSION,
 For year ending February 15th, 1900.

PAID TO
Mrs. Susan Cowart
 or
Cherokee County,
 Widow of *Wm. A. Cowart*

JNO. W. LINDSEY,
 Commissioner of Pensions.

WARRANT ISSUED
Oct 13 1900,
 AND HANDLED TO
Wright

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

Cowart, Susan
Cherokee County
 To Those Heretofore Paid.

1901.

No. *2254*

WIDOW'S PENSION,
 For year ending February 15th, 1901.

PAID TO
Mrs. Susan Cowart
 or
Cherokee County,
 Widow of *Wm. A. Cowart*

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT ISSUED
2/12 1901,
 AND HANDLED TO
Leon

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

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, } Personally Comes Mrs.
 County of *Cherokee* } *Susan Cowart*

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 *the year 1845* 18 That she is the Widow of *Wm. A. Cowart* who was a soldier in Company *A* of the *66* Regiment of *Geo.* Volunteers, that he enlisted in said regiment on or about the month of *Aug.* 1863 and served in the Army up to 1864 That he lost his life on the *1864* day of (State here particulars of the husband's death, when, where and from what cause) *Died in Hospital in 1864 of Diphtheria*

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 1845.

I have been allowed a pension as a resident of *Cherokee* County for the year ending February 15th, 1895, and now apply for the pension provided by law for the year ending February 15th, 1900.

Sworn to and subscribed before me, this *18* day of *Jan* 1900. *A. B. Cowart* Post Office *Cherokee* Ordinary.

State of Georgia, } *A. B. Cowart*
Cherokee County. } Ordinary of said County, certify that I am well acquainted with Mrs. *Susan Cowart*, 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 year 1845* day of 18.

Given under my official signature and seal, this the *18* day of *Jan* 1900.

Official Seal.

A. B. Cowart
 Ordinary of *Cherokee* County.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, } Personally Comes Mrs.
 County of *Cherokee* } *Susan Cowart*

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 *all her life* That she is the Widow of *Wm. A. Cowart* who was a soldier in Company *A* of the *66* Regiment of *Geo.* Volunteers, that he enlisted in said regiment on or about the month of *August* 1863 and served in the Army up to 1864 That he lost his life on the day of 1864 (State here particulars of the husband's death, when, where and from what cause) *Died in Hospital in 1864 of Diphtheria*

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 1845.

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

Sworn to and subscribed before me, this *5th* day of *Jan* 1901. *Susan Cowart* Post Office *Cherokee* Ordinary.

State of Georgia, } *A. B. Cowart*
Cherokee County. } Ordinary of said County, certify that I am well acquainted with Mrs. *Susan Cowart*, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of *all her life* 18.

Given under my official signature and seal, this the *5* day of *Jan* 1901.

Official Seal.

A. B. Cowart
 Ordinary of *Cherokee* County.

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 1840.

I have been allowed a pension as a resident of Cherokee County for the year ending February 15th, 1890, and now apply for the pension provided by law for the year ending February 15th, 1900.

Sworn to and subscribed before me, this

16th day of Jan, 1900.

A. B. Gorman Ordinary.

Post Office

Post Office

State of Georgia,

Cherokee County.

Ordinary of said County, certify that I am well acquainted with Mrs. Susan C. Gorman, 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 16th day of Jan, 1890.

Given under my official signature and seal, this the 16th day of Jan, 1900.

Official Seal.

Ordinary of Cherokee County.

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 1840.

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

Sworn to and subscribed before me, this

5th day of Jan, 1901.

Ordinary.

Post Office Post Office

State of Georgia,

Cherokee County.

Ordinary of said County, certify that I am well acquainted with Mrs. Susan C. Gorman, 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 5th day of Jan, 1890.

Given under my official signature and seal, this the 5th day of Jan, 1901.

Official Seal.

Ordinary of Cherokee County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cherokee County.

I, Susan C. Gorman, hereby authorize Mr. C. Gorman of Canton Ga. to receive and receipt for the pension paid hereon, and request that he remit same to My self at Post Office Ga.

In Witness Whereof, I have hereunto set my hand and seal, this 20th day of Jan, 1902.

Susan C. Gorman [L. S.]

Executed in presence of

A. B. Gorman

STATE OF GEORGIA,

Cherokee County.

I, Susan C. Gorman, hereby authorize Mr. A. B. Gorman of at Canton Ga. to receive and receipt for the pension paid hereon, and request that he remit same to Ed. B. Gorman at Canton Ga.

In Witness Whereof, I have hereunto set my hand and seal, this 14th day of Jan, 1903.

Susan C. Gorman [L. S.]

Executed in presence of

A. B. Gorman

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, Susan C. Gorman, hereby authorize Mr. A. B. Gorman of at Canton Ga. to receive and receipt for the pension paid hereon, and request that he remit same to Ed. B. Gorman at Canton Ga.

In Witness Whereof, I have hereunto set my hand and seal, this 14th day of Jan, 1903.

Susan C. Gorman [L. S.]

Executed in presence of

A. B. Gorman

Cawart, Susan
Cherokee, Ga.
To Those Hereofore Paid.

1902.

No. 1842

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Madison C. Gorman

OF

Cherokee County,

Widow of Mr. W. C. Gorman

Co. W. Regiment 66th

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

34 1902

AND HANDLED TO

Madison

USE W. HARRISON BULL PRINTING PLANT, GA.

Cawart, Susan
Cherokee, Ga.
To Those Hereofore Paid.

1903.

No. 1961

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Madison C. Gorman

OF

Cherokee County,

Widow of Mr. W. C. Gorman

Co. W. Regiment 66th

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

36 1903.

AND HANDLED TO

Madison

USE W. HARRISON BULL PRINTING PLANT, GA.

Cowart, Susan
Cherokee County
To Those Heretofore Paid.

1902.

No. 1842

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. Susan Cowart

OF

Cherokee County,

Widow of Mr. H. Cowart

Co. N. Regiment 66 Ga.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

34 1902

AND HANDLED TO

1902

1902

Cowart, Susan
Cherokee County
To Those Heretofore Paid.

1903.

No. 1961

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. Susan Cowart

OF

Cherokee County,

Widow of Mr. H. Cowart

Co. N. Regiment 66 Ga.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

196 1903

AND HANDLED TO

1903

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,

County of Cherokee

PERSONALLY COMES MRS.

Susan Cowart

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 all her life. That she is the Widow of

Mr. H. Cowart who was a soldier in Company

4 of the 66 Regiment of Ga.

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

1863, and served in the Army up to 1864. That he lost his

life on the day of 1864. (State here

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

Died in hospital in 1864 of diphtheria.

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 1845.

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

Sworn to and subscribed before me, this 20th day of Jan 1902. Susan Cowart Ordinary. Post-Office Ball Ground Ga.

State of Georgia, I, A. B. Connor Ordinary of said County, certify that I am well acquainted with Mrs. Susan Cowart 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 all her life day of 1845.

Given under my official signature and seal, this 20th day of Jan 1902.

Official Seal. A. B. Connor Ordinary of Cherokee County.

NOTE.—All blank spaces must be filled. Voucher and affidavit must bear date after January 1st, 1903.

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,

County of Cherokee

PERSONALLY COMES MRS.

Susan Cowart

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 all of her life. That she is the Widow of

Mr. H. Cowart who was a soldier in Company

4 of the 66 Regiment of Ga.

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

1863, and served in the Army up to 1864. That he lost his

life on the day of 1864. (State here

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

Died in hospital in 1864 of diphtheria.

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 1845.

I have been paid a pension as a resident of Cherokee County for the year ending December 31, 1902, and now apply for the pension provided by law for the year ending December 31, 1903.

Sworn to and subscribed before me, this 14th day of May 1903. Susan Cowart Ordinary. Post-Office Ball Ground Ga.

State of Georgia, I, A. B. Connor Ordinary of said County, certify that I am well acquainted with Mrs. Susan Cowart 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 all her life day of 1845.

Given under my official signature and seal, this 14th day of May 1903.

Official Seal. A. B. Connor Ordinary of Cherokee County.

NOTE.—All blank spaces must be filled. Voucher and affidavit must bear date after January 1st, 1903.

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 1845.

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

Sworn to and subscribed before me, this 20th day of Jan 1902, Susan Cowart Ordinary. Post-Office Ball Ground Ga.

State of Georgia, Cherokee County, I, A. B. Connor Ordinary of said County, certify that I am well acquainted with Mrs. Susan Cowart, 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 all her life day of 18.

Given under my official signature and seal, this the 20th day of Jan 1902.

Official Seal

Ordinary of Cherokee County.

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

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 1845.

I have been paid a pension as a resident of Cherokee County for the year ending December 31, 1902, and now apply for the pension provided by law for the year ending December 31, 1903.

Sworn to and subscribed before me, this 14th day of Jan 1903, Susan Cowart Ordinary. Post-Office Ball Ground Ga.

State of Georgia, Cherokee County, I, A. B. Connor Ordinary of said County, certify that I am well acquainted with Mrs. Susan Cowart, 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 all her life day of 18.

Given under my official signature and seal, this the 14th day of Jan 1903.

Official Seal

Ordinary of Cherokee County.

NOTE.—All blank spaces must be filled.
Voucher and affidavit must bear date after January 1st, 1903.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, Susan Cowart, hereby authorize Mr. A. B. Connor of Atlanta Ga to receive and receipt for the pension paid hereon, and request that he remit same to A. B. Connor, Esq. at Ball Ground Ga.
In WITNESS WHEREOF, I have hereunto set my hand and seal, this 11th day of February 1904.

Executed in presence of

A. B. Connor, Esq.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, Susan Cowart, hereby authorize Mr. J. M. Wright of Cherokee County to receive 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 21st day of January 1905.

Executed in presence of

J. M. Wright

TO THOSE HERETOFORE PAID.

1904.

No.

WIDOW'S PENSION

FOR

YEAR ENDING DECEMBER 31, 1904

PAID TO

Mrs. Susan Cowart

County,

Cherokee

Widow of Mr. J. M. Wright

Co. 54

Regiment 66

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT 18478

AND HANDED TO

1904.

Cherokee

Ge. W. Harrison, State Printer, Atlanta.

To Those Heretofore Paid.

1905.

No.

WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO

Mrs. Susan Cowart

OF

Cherokee County,

Widow of Mr. J. M. Wright

Co. 54 Regiment 66

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT 18478

AND HANDED TO

1905.

Cherokee

Ge. W. Harrison, State Printer, Atlanta.

Coward Susan
Cherokee County
TO THOSE HERETOFORE PAID.
1904.
No. *7291*
WIDOW'S PENSION
FOR
YEAR ENDING DECEMBER 31, 1904
PAID TO
Mrs. Susan Coward
or
Cherokee County,
Widow of *Wm. H. Coward*
Co. *H* Regiment *66 Ga*
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED *18 FEB 18*
AND HANDLED TO
Ordery
Chas. W. Harrison, State Printer, Atlanta.

Coward Susan
Cherokee County
To Those Heretofore Paid.
1905.
No. *1964*
WIDOW'S PENSION,
For year ending Dec. 31, 1905.
PAID TO
Mrs. Susan Coward
OF
Cherokee County,
Widow of *Wm. H. Coward*
Co. *H* Regiment *66*
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
18 FEB 23 1905.
AND HANDLED TO
Mick
Chas. W. Harrison, State Printer, Atlanta.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, } PERSONALLY COMES MRS.
County of *Cherokee* } *Susan Coward*

Cherokee 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 *Birth*. That she is the Widow of
Wm. H. Coward who was a soldier in Company
H of the *66* Regiment of *Ga*
Volunteers, that he enlisted in said regiment on or about the month of *August*
1863, and served in the Army up to 1864. That he lost his
life on the day of 1864. (State here

particulars of the husband's death, when, where and from what cause.)
Died in Hospital in 1864 with
diphtheria

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 1845

I have been paid a pension as a resident of *Cherokee* County for the
year ending December 31, 1903, and now apply for the pension provided by law for the year ending
December 31, 1904.

Sworn to and subscribed before me,
this *11* day of *May* 1904. *Susan Coward*
D. C. Brown Ordinary. Post Office: *Ball Ground Ga*

State of Georgia, } I, *D. C. Brown*
Cherokee County. } Ordinary of said County, certify that I am well
acquainted with Mrs. *Susan Coward* 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 Birth*
day of 18

Given under my official signature and seal, this the *11* day of *May* 1904.

D. C. Brown
Ordinary of *Cherokee* County

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1904.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, } PERSONALLY COMES MRS.
County of *Cherokee* } *Susan Coward*

all her life 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
Wm. H. Coward who was a soldier in Company
H of the *66* Regiment of *Ga*
Volunteers, that he enlisted in said regiment on or about the month of
186, and served in the Army up to 1864. That he lost his
life on the day of 18 (State here

particulars of the husband's death, when, where and from what cause.)
Died in Hospital in 1864
with diphtheria

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 1845

I have been paid a pension as a resident of *Cherokee* 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,
this *21* day of *Jan* 1905. *Susan Coward*
M. J. Meek Ordinary. Post-Office: *Ball Ground Ga*

State of Georgia, } I, *M. J. Meek*
Cherokee County. } Ordinary of said County, certify that I am well
acquainted with Mrs. *Susan Coward* who made the above affidavit and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
herself to be, and that she has continuously resided in this State since the
day of 18

Given under my official signature and seal, this the *21* day of *Jan* 1905.

M. J. Meek
Ordinary of *Cherokee* County

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1905.

soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1845

I have been paid a pension as a resident of Cherokee County for the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me,
this 11th day of May, 1904.
A. L. Brown Ordinary.

Susan Cowart
Post Office Ball Ground Ga

State of Georgia,
Cherokee County. } I, A. L. Brown
Ordinary of said County, certify that I am well acquainted with Mrs. Susan Cowart 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 Birth day of _____ 18____.

Given under my official signature and seal, this the 11th day of May, 1904.



A. L. Brown
Ordinary of Cherokee County

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1904.

Dependent's name was she was the wife of John Cowart 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 1845

I have been paid a pension as a resident of Cherokee 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,
this 21 day of Jan, 1905.
W. J. Webb Ordinary.

Susan Cowart
Post Office _____

State of Georgia,
Cherokee County. } I, W. J. Webb
Ordinary of said County, certify that I am well acquainted with Mrs. Susan Cowart Who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the _____ day of _____ 18____.

Given under my official signature and seal, this the 21 day of Jan, 1905.



W. J. Webb
Ordinary of Cherokee County

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1905.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County. }
I, Susan Cowart, hereby authorize
W. J. Webb of _____
to receive 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 15 day of Jan, 1907.

Susan Cowart [L. S.]

Executed in presence of

F. M. Webb

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County. }
I, Susan Cowart, hereby authorize
W. J. Webb to receive 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 15 day of Jan, 1907.

Susan Cowart [L. S.]

Executed in presence of

F. M. Webb

Cowart, Susan
Cherokee County
To Those Heretofore Paid
1906.
No. 1020
WIDOW'S PENSION
For year ending Dec. 31, 1906.
PAID TO
Mrs. Susan Cowart
OF
Cherokee County,
Widow of W. H. Cowart
Co. A Regiment 66 La
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
FEB 1 1907,
AND HANDED TO

THE PENSIONER'S NAME AND ADDRESS ON FILE IN THE OFFICE OF THE COMMISSIONER OF PENSIONS.

Cowart, Susan
Cherokee County
To Those Heretofore Paid.
1907.
No. 1705
WIDOW'S PENSION
For Year ending Dec. 31, 1907.
PAID TO
Mrs. Susan Cowart
OF
Cherokee County,
Widow of W. H. Cowart
Co. A Regiment 66 La
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
FEB 13 1907,
AND HANDING TO

THE PENSIONER'S NAME AND ADDRESS ON FILE IN THE OFFICE OF THE COMMISSIONER OF PENSIONS.

Cowart, Susan
Cherokee County
To Those Heretofore Paid.

1906.
No. *1020*

WIDOW'S PENSION
For year ending Dec. 31, 1906.
PAID TO
Mrs. Susan Cowart
OF
Cherokee County,
Widow of *Wm. H. Cowart*
Co. *H* Regiment *66* *Inf*

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
FEB 1 1906
AND HANDLED TO

See Pensions in Pensions and Pensions (1906) at Washington, D.C.

Cowart, Susan
Cherokee County
To Those Heretofore Paid.

1907.
No. *1705*

WIDOW'S PENSION
For Year ending Dec. 31, 1907.
PAID TO
Mrs. Susan Cowart
OF
Cherokee County,
Widow of *Wm. H. Cowart*
Co. *H* Regiment *66* *Inf*

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
FEB 13 1907
AND HANDLED TO

See Pensions in Pensions and Pensions (1907) at Washington, D.C.

For Widows Heretofore Allowed Pensions.

Form No. 1

STATE OF GEORGIA,
County of *Cherokee*

PERSONALLY COMES MRS.

Susan Cowart

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 *all her life*. That she is the Widow of *Wm. H. Cowart* who was a soldier in Company *H* of the *66th* Regiment of *Inf* Volunteers, that he enlisted in said regiment on or about the month of *Aug.* 186*2* and served in the Army up to *1864*. That he lost his life on the *1864* day of *April* 1864 (State here particulars of the husband's death, when, where and from what cause.)

He was in prison at Rock Island, Ill. and died in Hospital in 1864 of diphtheria.

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 1845.

I have been paid a pension as a resident of *Cherokee* County, for the year ending December 31, 1905, and now apply for the pension provided by law for the year ending December 31, 1906.

Sworn to and subscribed before me this *15th* day of *Jan* 1906.

W. J. Webb, Ordinary.

Susan Cowart
Post Office *Bull Shoals, Ga.*

State of Georgia,
Cherokee County.

I, *W. J. Webb*

Ordinary of said County, certify that I am well

acquainted with Mrs. *Susan Cowart*, 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 *all* day of *her life* 18*45*.

Given under my official signature and seal, this *15th* day of *Jan* 1906.

Official Seal

W. J. Webb
Ordinary of *Cherokee* County.

NOTE—All blank spaces must be filled.
Voucher and Affidavits must bear date after January 1st, 1906.

For Widows Heretofore Allowed Pensions.

Form No. 1

STATE OF GEORGIA,
County of *Cherokee*

PERSONALLY COMES MRS.

Susan Cowart

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 *all her life*. That she is the Widow of *Wm. H. Cowart* who was a soldier in Company *H* of the *66th* Regiment of *Inf* Volunteers, that he enlisted in said regiment on or about the month of *Aug.* 1862 and served in the Army up to *1864*. That he lost his life on the *1864* day of *April* 1864 (State here particulars of the husband's death, when, where and from what cause.)

He died in Hospital in 1864.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1852.

I have been paid a pension as a resident of *Cherokee* County, for the year ending December 31, 1906, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me this *15th* day of *Jan* 1907.

W. J. Webb, Ordinary.

Susan Cowart
Post Office *Bull Shoals, Ga.*

State of Georgia,
Cherokee County.

I, *W. J. Webb*

Ordinary of said County, certify that I am well

acquainted with Mrs. *Susan Cowart*, 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 *15* day of *Jan* 18*45*.

Given under my official signature and seal, this *15th* day of *Jan* 1907.

Official Seal

W. J. Webb
Ordinary of *Cherokee* County.

NOTE—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1907.

Volunteers, that he enlisted in said regiment on or about the month of Aug.
1863 and served in the Army up to 1864 That he lost his
life on the _____ day of _____ 1864 (State here
particulars of the husband's death, when, where and from what cause.)

Died in prison at Rock Island
in 1864
Died in Hospital in 1864 of
Syphilia

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 1845

I have been paid a pension as a resident of Cherokee County, for the
year ending December 31, 1905, and now apply for the pension provided by law for the year ending
December 31, 1906.

Sworn to and subscribed before me
this 15 day of Jan 1906.
W. J. Webb, Ordinary.

Susan Cowart
Widow
Post Office Cull Shoals

State of Georgia,
Cherokee County,

I, W. J. Webb

Ordinary of said County, certify that I am well
acquainted with Mrs. Susan Cowart, 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 all
day of her life 18____

Given under my official signature and seal, this the 15 day of Jan 1906.

{ Official
Seal }

W. J. Webb
Ordinary of Cherokee County.

NOTE.—All blank spaces must be filled.
Voucher and Affidavits must bear date after January 1st, 1906.

1863 and served in the Army up to _____ 1864 That he lost his
life on the _____ day of April 1864 (State here
particulars of the husband's death, when, where and from what cause.)

Died in Hospital in 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
soldier, and that she has never married since his death aforesaid, and that she became his wife in
the year 1852

I have been paid a pension as a resident of Cherokee County, for the
year ending December 31, 1906, and now apply for the pension provided by law for the year ending
December 31, 1907.

Sworn to and subscribed before me
this 15 day of Jan 1907.
W. J. Webb, Ordinary.

Susan Cowart
Widow
Post Office _____

State of Georgia,

Cherokee County,

I, W. J. Webb

Ordinary of said County, certify that I am well
acquainted with Mrs. Susan Cowart, 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 75
day of Jan 18____

Given under my official signature and seal, this the 15 day of Jan 1907.

{ Official
Seal }

W. J. Webb
Ordinary of Cherokee County.

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1907.

COWART, SUSAN
Widow
Cherokee Co.

Cowart, Susan
(Widow)
Cherokee Co.

See 66th Regt. Inf. Inf.
Company H

1 application, dated
1891

See 66th Regt. Inf. Inf.
Co. A.

1 application - 1893

See 66th Regt Ia. Inf.
Co. A.

See 66th Regt Ia. Inf.
Company H

1 application - 1893

1 application, dated
1891

Box, Georgia Anne
9/5 1911
Church Co

No. _____

Widow's Application

To Be Put on Roll in Her Own Right, when
Husband Was on Roll at Death.

21

County *Cherokee*

Name *Georgia A. Cox*

Widow of *M. L. Cox*

S. Stewart Bat

Approved _____

J. W. LINDSEY
Commissioner of Pensions

Chas. P. Byrd, State Printer, Atlanta.

7/5/11 9/5-1911

Widow of

*M. L. Cox**A. Stewart Bate*

Approved

J. W. LINDSEY
Commissioner of Pensions

Chas. P. Byrd, State Printer, Atlanta.

4/10/11 9/5-1911

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

Cherokee County.

Personally before me comes *Mrs Georgia Ann Cox* of said County, who, after being duly sworn, on oath says, that she is the widow of *M. L. Cox* to whom in the County of *Dawson* State of *Ga.* she was married on the *16th* day of *AUG* 19*06* and that she remained his wife, and resided with him to the date of his death in *Jan.* 19*11* and that she has not since his death remarried. At the time of his death he was a resident of *Cherokee* County, in *Ga.* said State of Georgia, and he was on the *Indigent* Pension Roll of the State and paid a pension of *\$50.* in *Cherokee* County for 19*11* per annum, on account of being a soldier in Company *D, Stewart's Battalion* Regiment *Ga.* (Volunteers of State Militia.)

At the death of *M. L. Cox* he was in the use and possession of the following property *No property.*

of the cash value of \$*0.00000000*

What property of any kind and of any value have you in your use, control and possession now, and the cash value, (State fully.) *None.*

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 of *Cherokee* and she has so continuously resided since *16th* day of *May* 19*06*

Sworn to and subscribed before me, this the *27th* day of *July* 19*11* *Georgia Ann Cox*
H. J. Mink Ordinary,
 of *Cherokee* County.

Affidavit of Witnesses to Prove Marriage and to Whom--Date of Death of Husband.

STATE OF GEORGIA,

Cherokee County

Personally before me come *Mrs Georgia Ann Cox* 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. *Georgia Ann Cox* who made the foregoing affidavit, is the lawful widow of *M. L. Cox* who died in *Cherokee* County in said State of *Ga.* on *16th* day of *May* 19*06* and that she has not since remarried. That she became the wife of *M. L. Cox* on the *16th* day of *May* 19*06* and that she and he had resided together as man and wife continuously since *16th* day of *May* 19*06* and that the *M. L. Cox* was the same man who was on the pension roll of said State *Cherokee* from *May* 19*06* to *Jan* 19*11* when he died.

Sworn to and subscribed before me, this the *27th* day of *July* 19*11* *Georgia Ann Cox*
H. J. Mink Ordinary,
 of *Cherokee* County.

Widow's Application

To Be Put on Roll in Her Own Right, when Husband Was on Roll at Death.

County

Name *Georgia Ann Cox*Widow of *M. L. Cox*

Approved

J. W. LINDSEY
Commissioner of Pensions

Chas. P. Byrd, State Printer, Atlanta.

4/10/11 9/5-1911

Sworn to and subscribed before me, this the
27th day of July 1911
N. J. Webb
Ordinary,
of Cherokee County.

**Affidavit of Witnesses to Prove Marriage and to Whom--Date of
Death of Husband.**

STATE OF GEORGIA,
County

Personally before me come _____ 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. _____ who made the foregoing affidavit, is
the lawful widow of _____ who died in _____ County in
said State of _____ on _____ day of _____ 19 _____ and that she
has not since remarried. That she became the wife of _____ on the _____ day
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 _____ from _____ County
when he died.

Sworn to and subscribed before me, this the _____
day of _____ 1911
Ordinary,
of _____ County.

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,
Cherokee County.

Personally before me comes J. W. Miller & H. Barker who after being sworn on
oath says, that they are freeholders of said County, and that they know Georgia Ann Cox
said County and knew her said husband M. L. Cox at his death on the _____
day of Jan 1911 that she and he were in the use, possession and control of the following
property at his death to wit: Nothing at all

of the value of \$ _____. That she is now in the use, possession and control of the following
property to wit: Nothing

of the value of \$ _____. Nothing

Sworn to and subscribed before me, this the _____
20 day of Aug 1911
N. J. Webb Ordinary, J. W. Miller & H. Barker
of Cherokee County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cherokee County.

I, N. J. Webb Ordinary of said County, do certify, that, I
know Mrs. Georgia Ann Cox 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
roll of 1908

That I also know J. W. Miller & H. Barker witness as to marriage and I also know
J. W. Miller & H. Barker who I know to be a resident free holder 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 this County shows that she returned property to the
amount of \$ _____ for 1909 \$ _____ for 1910 \$ _____

Sworn under my hand and official seal of office this _____ day of Sept 1911.
(SEAL) N. J. Webb Ordinary,
Cherokee County.

- NOTES 1. Before any questions are answered, the Ordinary shall swear applicant and the witness in the following words.
"You do solemnly swear that you will true answers make to each of the questions asked you and the evidence
you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. 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 present, or by
general reputation.

Sworn to and subscribed before me, this the

25 day of Aug 1911

J. M. Webb
Ordinary of Cherokee County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Cherokee County.

I, *J. M. Webb* Ordinary of said County, do certify, that, I know Mrs. *Georgia Ann Cox* 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

Mar. 4 1908
That I also know *see certificate* witness as to marriage and I also know *J. M. Webb, H. Barker* who I know to be a resident free holder 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 *this* County shows that *she* returned property to the amount of *nothing* for 1908 \$ *X* for 1909 \$ *X* for 1910 \$ *X* for 1911 \$ *X*

Sworn under my hand and official seal of office this *5* day of *Sept* 1911.

(SEAL.) *J. M. Webb* Ordinary. *Cherokee* County.

- NOTES 1. Before any questions are answered, the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. 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 present, or by general reputation.

Georgia Forsyth County,
I, *J. Jones* Ordinary and Ex Off
Clerk of the Court of Ordinary of
said County hereby certify that
the foregoing is a true copy of the
Marriage License and Certificate
of Marriage of *M L Cox* and
G A Harris as appears of file
and of record in my office.
Given under my hand and seal
of office this Aug 18-1911
J. Jones Ordinary
and Ex Off Clerk of
the Court of Ord.

State of Georgia Forsyth County
To any Ordained Minister of the
Gospel, Judges of the Superior Court
Justice of the Superior Court or
Justice of the Peace
You are hereby authorized to join Mr
Marion L Cox and Miss Georgia
Ann Harris in the Holy State of
Matrimony according to the Consti-
tution and Laws of the State; and
for so doing this shall be your
sufficient License
Given under my hand and seal
This Aug 17-1866
Wm D Bentley
Ordinary

Georgia Forsyth County
I certify that on the 16th day of Aug
1866 in obedience to the authority
of this license I united *M L*
Cox and *G A Harris* in the holy
bonds of Matrimony.
A H Wilkie J P

Georgia Forsyth County -
I J. Jones, Ordinary and Ex Off
Clerk of The Court of Ordinary of
said County hereby certify that
the foregoing is a true copy of the
Marriage License and Certificate
of Marriage of M L Cox and
G A Harris as appears of file
and of record in my Office.
Given under my hand and seal
of Office This Aug 18-1911

J. Jones Ordinary
and Ex Off Clerk of
The Court of Ord.

Justices of the Peace
You are hereby authorized to join Mr
Marion L Cox and Miss Georgia
Ann Harris in the holy state of
Matrimony according to the Const
tution and Laws of the State: and
for so doing this shall be your
sufficient License

Given under my hand and seal
This Aug 15th 1866

Wm J Bentley
Ordinary

Georgia Forsyth County

I certify that on the 16th day of Aug
1866 in obedience to the authority
of this license I united M L
Cox and G A Harris in the holy
bonds of Matrimony

A H McKie, J P

Coy. Jesse C.

Private. May 31, 1864
Wounded at Baldie
Ga. Feb. 1868.

Present Officer
Oct 17-1910

This Man Deserves
Honors 1864- at
Baldie Ga

J. W. Lindsey
Com. of Pen.

Coy. Jesse C.

Cherokee County
Discharged 11/19/10
No 12/12-1911

Dis. 1911

Confederate
Discharged 11/19/10
Soldier's Application.

✓ UNDER ACT 1910.

County Cherokee

Name Jesse C. Cox

Company Co. E. 23rd Reg

Regiment

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAR. F. BYRD, State Printer, Atlanta.

9/29/10

- e. For how long was your leave granted? In what way? For good. I was disabled and was discharged from further service.
- f. Why did you not return to your Command after leave expired? my leave never expired.
- g. In what way were you prevented? I was not required to return.
- h. What effort did you make to return? None.
- i. Were you captured during the war? yes
- j. If so, when and where? In what prison were you held and when were you released? Chancellorsville, May 3, 1863, put in prison at Washington, Released.
9. What property of every description 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.)
150 acres of land Val. \$500.00, 1 mule. Val. \$70. I hog. \$2. Wagon \$25.00, House hold \$25.00.
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, possession and control of yourself and wife and its cash value? (Make itemized list).
150 acres land, Val. \$500., 1 mule Val. \$100. Cow, Val. \$25.00 Wagon & Buggy Val. \$25.00 House hold Val. \$25.00, I hog, Val. \$2.00.
12. What annual or monthly income or earnings of yourself and wife and the source derived have you? None.
13. Are you drawing a pension of any amount from this State or the United States? No.
14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? None.

Sworn to and subscribed before me, this the 9 day of August, 1910 } J. M. Morris Jr. Ordinary,
of Cherokee County.

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,

Cherokee County.

I, J. B. Morris, of said State and County is hereby presented as witness in support of the application of J. C. Cox for the pension provided by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded, answers as follows:

1. What is your name and where do you reside? J. B. Morris, Resides in Cherokee County, Georgia.
2. How long and since when have you known the applicant? Since 1861.
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 resides in Cherokee County, Georgia in the same place since his birth.
4. When, where and in what Company and Regiment did enlist during war from 1861 to 1865? (Give date and place) July 1861, 1st Georgia Co. E. 29th Regt.
5. How did you obtain your information of this Service? I was stationed in service at the same time and place.
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) until May 2, 1863, he was discharged.
7. When and where was his Command surrendered or discharged (give date and place) I don't know.
8. Were you personally present at the Surrender? Yes.
9. If not, where were you and how came you there? I was absent from the army. I was wounded and disabled May 3, 1863.
10. Was the applicant personally present with his Command at surrender? No.
11. If not where was he and how came him there? He was discharged for disabilities the day before I received my discharge.
12. When did he leave his Command? May 2, 1863. Where was his Command when he left it? Chancellorsville, Va. for what cause did he leave? Discharged.
- By whose authority did he leave? Captain Daniel Ferguson and how long was he granted leave? for good. How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically). I was in the service with him.
13. In what way was he prevented from returning to his Command? Never able.
- How do you know? Of my own knowledge.
14. What effort did he make to return to his Command and how do you know? He was not required to return.
15. Was applicant captured as a prisoner? Yes. If so, when and where? Chancellorsville, Va. In what prison was he held? Not put in prison and when released? Captured but released before going to prison.

Sworn to and subscribed before me, this the 10th day of Aug. 1910 } J. B. Morris Ordinary,
of Cherokee County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Cherokee County.

Personally before me comes J. M. Morris, Jr. & F. V. Blackwell who on oath says that they are free holders residing in said County and we know J. C. Cox the applicant for pension and we know the property that is now in the use, possession and control of himself and wife and of its cash value to wit: (Make List by items and value.) 150 acres of land worth \$500. 10 \$500 dollars, 1 mule Val. \$100. Wagon & Buggy Val. \$25. I hog \$2.00 House hold Val. \$25.00.

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov.

1907. (State it fully by items.) None.

2. When and to whom was it sold or given to? Nothing.
 3. What was the price paid or stated to be paid? Nothing.
 4. What relation to this party to applicant? None.
 5. What disposition was made of the proceeds of the sale? None.
 6. Was the disposition of this property made in good faith and full value? or was it made to obtain a pension? disposed of none.
- Sworn to and subscribed before me, this the 9th day of Aug. 1910 } J. M. Morris Jr. Ordinary,
of Cherokee County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cherokee County.

I, J. B. Morris, Ordinary of said County, certify that I know the applicant J. C. Cox for Pension in the person he represents himself to be and resides in said County. That I also know J. B. Morris, Jr. the witness swearing to the service and F. V. Blackwell, who are free holders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Results of J. C. Cox shows that he was and wife value for tax in 1908 \$622.00 for 1909 \$684.00 for 1910 \$712.00.

Sworn under my hand and official seal of office this 10th day of Aug. 1910.

J. B. Morris Ordinary,
of Cherokee County.

- NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words "You do solemnly swear that you will true answers make to each question asked you and the evidence you shall give shall be the whole truth; so help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary and certified by him.
4. If applicant has no property at all in his possession, use or control of self and wife, affidavits of Free holders unnecessary.

of Cherokee County.
ORDINARY'S CERTIFICATE.
 STATE OF GEORGIA.
Cherokee County.
 I, J. J. Hesk Ordinary of said County, certify that I know
 the applicant J. J. Hesk for Pension for the person he represents himself to be and resides in
 said County. That I also know J. J. Hesk the witness swearing to the
 service and J. J. Hesk who are free holders, that
 they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and
 they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the
 Tax Results of J. J. Hesk shows that his and wife
 value for tax is in 1908 \$ 622.00 for 1909 \$ 688.00 for 1910 \$ 812.00
 Sworn under my hand and official seal of office this 13 day of Aug 1910.
J. J. Hesk Ordinary of Cherokee County.
 NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words
 "You do solemnly swear that you will true answers make to each question asked you and the evidence you
 shall give shall be the whole truth; so help you God."
 2. Additional affidavits may be attached if blank spaces are insufficient.
 3. All affidavits must be made before the Ordinary and certified by him.
 4. If applicant has no property at all in his possession, use or control of self and wife, affidavits of Free holders
 unnecessary.

Cherokee

County.

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov

i have seen a man an had
the law red an told him all
about my claim an he got
my claim was good an he
would git it for me now
other himself i dont want to
have to do that but will if
that the chance an you will
be surprisid to learn what
i know about your worth
in the pension office i am ^{come}
coming to atlanta soon I hope

✓
Woodstock go about no 2 24

22 1911

Mr Lindsey, I received your letter and was surprised at your opinion you have had by your action that one of our witnesses has sworn a lie you have took a great deal to be sure fifty dollars ago by an enemy and by other law full evidence. I don't see how I can get that is no court that will decide as you have done

I have seen a man and had the law read and told him all about my claim and he said my claim was good and he would get it for me now Mr Lindsey I don't want to have to do that but will if that the chance as you will be surprised to learn what I know about your mother in the pension office I am coming to Atlanta soon I hope

1 See the file 1911 ✓

Woodstock go about no 2 24
Mr Lindsey Dear sir I wrote to you Smith about my pension and he said he would have to go to the governor then the pension commiserator now Lindsey will you please take my papers to the governor and see what you can do if you get me on the role you can pay the governor and your self for all of the extra trouble you have with me please do that Mr Lindsey I can't work none at all and has no one to work for me now the michel is having two pensions you can find out by one of the senators at Washington

2 ✓

if you can find one man in the 23 ga that will make oath that I deserted from the 23 ga march the first 1864 or any other time I will give up my claim please don't give my name about the two pensions you can get that from the government that is the way her neighbors tell it I can not swear to that
your friend Jesse
2204
please let me know on that will and that all

smith about my pension
and he said he would have to
go to the governor then the
pension commissioner now
kindly will you please take
my papers to the governor and
see what you can do if you
get me on the role you can pay the
governor and your self for all of
the extra trouble you have with
me please do that Mr. Lindsey
or can't work none at all
and has no one to work for me
Martha Mitchell is having two
pensions you can find out by
one of the senators
at Washington

me 23 ya that will make
oath that I deserted from the
23rd Ga. March the first 1864
or any other time I will
give up my claim
please don't give my name
about the two pensions
you can get that from
the government that is the
way her majesty tell it
I can not swear to that
your friend Jesse
Cox
please let me know
on that will and that
all

W. J. WEBB
Ordinary
CHEROKEE COUNTY

F. M. BLACKWELL
Clerk
COURT OF ORDINARY

CANTON, GA

State of Georgia--Cherokee County.

Personally appeared before me, Alfred Edwards, who after being
duly sworn says, in support of the application of Jesse C Cox for the
Pension authorized by Act of 1910, that he was a member of Company G
23rd Ga. Reg., that said J. C. Cox was a member of ~~same~~ Company, that he
remembers him as a member of ~~same~~ Company, that he was with the Command
in Florida in March 1864, and that if said J. C. Cox deserted he did not
at that time know such to be the fact, that he never heard of it at
the time.

Sworn to and subscribed before me,
this Aug. 8th 1911.

Alfred Edwards

W. J. Webb, Ord.

Personally appeared before me, Alfred Edwards, who after being duly sworn says, in support of the application of Jesse C Cox for the Pension authorized by Act of 1910, that he was a member of Company ~~23rd~~ 23rd Ga. Reg., that said J. C. Cox was a member of ~~some~~ Company, that he remembers him as a member of ~~some~~ Company, that he was with the Command in Florida in March 1864, and that if said J. C. Cox deserted he did not at that time know such to be the fact, that he never heard of it at the time.

Sworn to and subscribed before me,
this Aug. 8th 1911.

Alfred Edwards

W. J. Webb, Clerk

POWER OF ATTORNEY.

STATE OF GEORGIA.

I, _____, County _____,

do hereby authorize _____

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

at _____ by _____ day of _____ 190__.

Witness my hand and seal, this _____ day of _____ 190__.

(L. S.)

Executed in presence of _____

Box, Marion L.
Chewtree

O.K. Jan 1910

INDIGENT PENSION

✓ 1909

Name *Marion L. Cox*

County *Chewtree*

Co. *D. Stewart Bn.* Regt

Approved _____ 190__

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Chas. F. Byrd, State Printer, Atlanta, Ga.

9-22-09

JOHN W. LINDSEY,
Commissioner of Penitents.

WARRANT HANDED TO

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

Chas. F. Byrd, State Prison, Atlanta, Ga.

9-22-09

IRNEY.

herby authorize
of
remit same to
by
1909
(L. S.)

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY

I, _____ hereby authorize

of

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

at

by

Witness my hand and seal, this _____ day of _____ 1909.

(L. S.)

Executed in presence of

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Cherokee County.

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

1. What is your name and where do you reside? *(Give State, County and Postoffice.)*
Marion L. Cox, Cherokee Co. Ga. O. B. Birmingham
2. How long and since when have you been a resident of this State?
all of life
3. When and where were you born?
Joseph Co. Ga. Nov. 22, 1842
4. When and where and in what company and regiment did you enlist or serve?
*Sept. 1864
Joseph Co. Ga. Company D. Stewart's Battalion*
5. How long did you remain in such company and regiment?
until May 1865
6. When and where was your company and regiment surrendered and discharged?
At Kingston Ga. May 1865
7. Were you present with your company and regiment when it was surrendered? *I was*
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? *I was present*
9. How much can you earn (gross) per annum by your own exertions or labor?
About half way
10. What has been your occupation since 1865?
Farming
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?"
12. If upon the first ground, state how long you have been in such condition that you could not earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind and when and where you lost your sight.
Infirmity and poverty
13. What property, real and personal, or income, do you possess, and its gross value?
About one hundred dollars Personal Property
14. What property, real or personal, did you possess in 1903, 1904, 1905, 1906, 1907 and 1908, and what disposition, if any, by sale or gift, have you made of same?
Nothing personal property have not disposed of any
15. In what County did you reside during those years, and what property did you then return for taxation?
In Cherokee Co. until 1704 since then in Chastell
16. How were you supported during the years 1903, 1904, 1905, 1906, 1907, 1908 and 1909? *By my own labor with help of my family*
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?
Don't know Cost I contribute about half
18. What was your employment during 1903, 1904, 1905, 1906, 1907, 1908 and 1909? What pay did you receive in each year?
Farming
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?
wife and one daughter who is of age
20. Are you receiving any pension? If so, what amount and for what disability?
No
21. Have you ever made an application for pension before?
Yes
22. How many applications have you ever made and under what class?
Indigent Class

Every Question MUST Be Answered.

Sworn to and subscribed before me this the _____ day of _____ 1909.

Marion L. Cox Applicant.

Cherokee County.

Boh, Marion L. Cox, Cherokee Co. O.K. Jan 1910

INDIGENT PENSION

1909

Name *Marion L. Cox*
County *Cherokee*
Co. *D. Stewart's Bat.* Regt

Approved

190

JOHN W. LINDSEY,
Commissioner of Penitents.

WARRANT HANDED TO

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

Chas. F. Byrd, State Prison, Atlanta, Ga.

9-22-09

Boys, Marion Co.
Cherokee Co.
Ch. Jan 1910

INDIGENT PENSION

1909

Name Marion L Cox
County Cherokee
Co. St. Louis Bat. Regt
Approved 190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Collector will certify name of Applicant, Company and Regiment on back as indicated above.

9-22-09

Every Question Must

third, state whether you are totally blind and when and where you lost your right.
Infirmity and poverty

13. What property, real and personal, or income, do you possess, and its gross value? About one hundred dollars Personal Property

14. What property, real or personal, did you possess in 1903, 1904, 1905, 1906, 1907 and 1908, and what disposition, if any, by sale or gift, have you made of same? Nothing Personal Property have not disposed of any property

15. In what County did you reside during those years, and what property did you then return for taxation? In Forsyth Co until 1904 since then in Cherokee

16. How were you supported during the years 1903, 1904, 1905, 1906, 1907, 1908 and 1909? By my own labor with help of my family

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? Does Not Know Cash Contribution about half

18. What was your employment during 1903, 1904, 1905, 1906, 1907, 1908 and 1909? What pay did you receive in each year? Family

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? wife and one daughter who is of age

20. Are you receiving any pension? If so, what amount and for what disability? no

21. Have you ever made an application for pension before? Yes

22. How many applications have you ever made and under what class? two one Indigent Class

Sworn to and subscribed before me this the 2 day of Sept, 1909
H. J. Webb Ordinary,
of Cherokee County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Cherokee County.

James Price of said State and County, having been presented as a witness in support of the application of Marion L Cox for pension under section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? James Price Cherokee County Ga

2. Are you acquainted with Marion L Cox the applicant; if so, how long have you known him? Yes About since 1864

3. Where does he reside, and how long and since when has he been a resident of this State? in Cherokee County Ga since 1864 Forsyth Co Ga Co. St. Louis Bat.

4. When, where and in what company and regiment did he enlist, and how do you know? 1864 Forsyth Co Ga Co. St. Louis Bat.

5. Were you a member of the same company and regiment? I was

6. How long did he perform regular military duty? I left the Co. in March 1865

7. When and where was his command surrendered? I was not with them after the

8. Were you present when it surrendered? No

9. Was applicant present? I don't know

10. If he was not present, where was he?

When did he leave his command? For what cause?

By what authority he left? Discharge by James Price

How do you know all of this? Below Ans. by C.B. Cox

11. What property, effects or income has the applicant? (Give your means of knowledge.) Small amount of Personal Property

12. What property, effects or income did the applicant possess in 1903, 1904, 1905, 1906, 1907, 1908 and 1909? Nothing but Personal Property

and what disposition, if any, did he make of same? none

13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? no

14. What is the applicant's occupation and physical condition? Farmer Afflicted with Rheumatism

15. Is the applicant unable to support himself by labor of any sort; if so, why? Yes, not able to work but very little

16. How was he supported during the years 1903, 1904, 1905, 1906, 1907, 1908 and 1909? By help of his family

17. What portion of his support for those four years was derived from his own labor or income? but very little

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code. Crippled up with Rheumatism and old age

19. Who composes family? What property have they? Children's ages and their earning capacity? wife and one daughter

20. What interest have you in the recovery of a pension by this applicant? none

Sworn to and subscribed before me, this the 2 day of Sept, 1909
H. J. Webb Ordinary,
James Price Witness,
C.B. Cox Witness.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cherokee County.

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

Suffering from Rheumatism, are both hands & wrists, & his right leg and infirm & paralyze him unable to earn or support by manual labor.

and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the 2 day of Sept, 1909
H. J. Webb Ordinary,
W. M. Hollingsworth
J. M. Bates W.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cherokee County.

I, H. J. Webb Ordinary, in and for said County, hereby certify that the applicant Marion L Cox resides in said County, and has been a bona fide resident of this State since the 2 day of Sept, 1862 and that the witnesses, viz.: James Price and C.B. Cox 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 herein prescribed, and that the full text of the affidavit was read to the applicant and witness before same was signed.

I further certify that the tax digest of Cherokee County shows that applicant returned for taxation in his name in 1901 0 Dollars of property, and in 1903 0 Dollars of property; in 1904 0 Dollars of property; in 1905 0 Dollars of property; in 1906 0 Dollars of property; in 1907 0 Dollars of property; in 1908 0 Dollars of property; in 1909 0 Dollars of property.

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

Witness my hand and seal of office, this 2 day of Sept, 1909
H. J. Webb Ordinary,
of Cherokee County.

NOTE.

1. Before any questions are answered, the Ordinary shall swear applicant, and the witnesses in the following words: "You shall true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God."

2. Additional affidavits may be attached if blank spaces are insufficient.

3. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.

11. What property, effects or income has the applicant? (Give your means of knowledge.)
Small amount of Personal Property
12. What property, effects or income did the applicant possess in 1903, 1904, 1905, 1906, 1907, 1908 and 1909?
Nothing but personal property
- and what disposition, if any, did he make of same? none
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom?
no
14. What is the applicant's occupation and physical condition?
Farmer Afflicted with Rheumatism
15. Is the applicant unable to support himself by labor of any sort; if so, why?
Yes, not able to work but very little
16. How was he supported during the years 1903, 1904, 1905, 1906, 1907, 1908 and 1909?
by help of his family
17. What portion of his support for these four years was derived from his own labor or income?
but very little
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code
Crippled up with Rheumatism and old age
19. Who composes family? What property have they? Children's ages and their earning capacity?
wife and one daughter
20. What interest have you in the recovery of a pension by this applicant?
none
- Sworn to and subscribed before me, this the 2 day of Sept, 1909
H. J. Math Ordinary.

Ordinary, in and for said County, hereby certify the applicant Marion L. Cox resides in said County, and has been a bona fide resident of this State since the day of _____ 1892 and that the witnesses, viz: James Price and C. B. Cox

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 affidavit was read to the applicant and witness before same was signed.

I further certify that the tax digest of Cherokee County shows that applicant returned for taxation in his name in 1901 _____ Dollars of property, and in 1903 _____ Dollars of property; in 1904 _____ Dollars of property; in 1905 _____ Dollars of property; in 1906 _____ Dollars of property; in 1907 _____ Dollars of property; in 1908 _____ Dollars of property; in 1909 _____ Dollars of property.

Eighty two
Eighty seven
Eighty one
Twenty nine

In my opinion the foregoing claim is _____ made in good faith.
Witness my hand and seal of office, this 2 day of September, 1909
W. J. Webb Ordinary,
of Cherokee County.

NOTE.

- 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 evidence you shall give will be the whole truth, so help you God."
- Additional affidavits may be attached if blank spaces are insufficient.
- In every case the Ordinary must certify to the character of the witnesses, and as to the execution of the proof as above set out.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA.

Hall County.

J. P. Strathorn of said State and County, having been presented as a witness in support of the application of Marion L. Cox for pension under section 1254, Code, and after being duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside?
Blomery Branch Hall County Ga.

2. Are you acquainted with Marion L. Cox, the applicant; if so, how long have you known him?
yes about 48 years

3. Where does he reside, and how long and since when has he been a resident of this State?
Cherokee Co. Ga. about 46 years in my knowledge

4. When, where and in what company and regiment did he enlist and how do you know?
July 1864. Cavalry Co. Ga. 1st Regt. Alabama Bn.

5. Were you a member of the same company and regiment?
I was

6. How long did he perform regular military duty?
from July 1864 to May 1865

7. When and where was the command surrendered?
May 1865. Ringgold Ga.

8. Were you present when it surrendered?
Yes

9. Was applicant present?
Present

10. If he was not present, where was he?
Present

When did he leave his command?
May 1865 For what cause?
Paroled

By what authority he left?
Regimental How do you know all of this?
I was member of same Co. & Bn. and was paroled at same time

11. What property, effects or income has the applicant? (Give your means of knowledge.)

12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, did he make of same?

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

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

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

16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907?

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

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

19. Who composes family? What property have they? Children's ages and their earning capacity?

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

Sworn to and subscribed before me, this the 20 day of Aug, 1909
H. J. Math Ordinary.

2. Where does he reside, and how long and since when has he been a resident of this State?
Chenille Co. Ga. about 44 years being known to
3. When, where and in what company and regiment did he enlist, and how long did he serve?
May 1864 Company C 1st Ga. Inf. Regt. Atlanta Ga.
4. Were you a member of the same company and regiment?
I was
5. How long did he perform regular military duty?
From Feb. 1865 to May 1865
6. When and where was the command surrendered?
May 1865. Ringgold Ga.
Paroled
7. Were you present when it surrendered?
I was
8. Was applicant present?
Yes
9. If he was not present, where was he?
Present
10. When did he leave his command?
May 1865 For what cause?
Paroled
By what authority he left?
Regimental How do you know all of this?
I was member of same Co. & Paroled
and was paroled at same time
11. What property, effects or income has the applicant? (Give your means of knowledge.)

12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907,
and what disposition, if any, did he make of same?
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom?
14. What is the applicant's occupation and physical condition?
15. Is the applicant unable to support himself by labor of any sort; if so, why?
16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907?
17. What portion of his support for these four years was derived from his own labor or income?
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under
Section 1254, Code.
19. Who compose family? What property have they? Children's ages and their earning capacity?

20. What interest have you in the recovery of a pension by this applicant?
Sworn to and subscribed before me, this the
20 day of Aug 1902
M. H. [Signature] Ordinary, J. P. [Signature] Witness

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

STATE OF GEORGIA, County of Cherokee
 I, D. L. Lamm Ordinary in and for said County of
Cherokee, State of Georgia, hereby certify that I am acquainted with Mrs.
Rachael L. Lamm the applicant for a pension in this case, and
 know from my own knowledge (or from positive proof presented to me by reputable wit-
 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
 widow of Lamm, D. L. deceased, and as such has heretofore
 been allowed a pension for the year ending February 15th, 1894.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office,
 this, the 11th day of January, 1895.
D. L. Lamm Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cherokee County.
 KNOW ALL MEN BY THESE PRESENTS, That I, Rachael L. Lamm
 of Cherokee County in said State, do hereby appoint Wm. H. Lamm 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 en-
 titled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the
 foregoing indenture, hereby authorizing my said Attorney to receipt in my name for any
 Warrant 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 11th
 day of January, 1895. Rachael L. Lamm [L. S.]

Executed in the presence of us:

D. L. Lamm
J. A. Lamm

DIRECTIONS.

Send amount by Cherokee to D. L. Lamm Ordinary, to
 me at Lamm, D. L. and oblige
Rachael L. Lamm

Cof, Rachael
 Cherokee Co.
 FOR THOSE HERETOFORE PAID.

1895.
W. H. Lamm 1894
 No. 2409

WIDOW'S PENSION.

for year ending February 15th, 1895.

—PAID TO—

M. Rachael L. Lamm
Wm. H. Lamm 1894

—OF—

Cherokee County.
 widow of Lamm, D. L.

WARRANT ISSUED

Feb 4

1895.

AND HANDED TO

Atty
 Geo. W. Lamm, State Printer.

Certificate of Ordinary of 1

STATE OF GEORGIA:

I, D. L. Loom

Cherokee County, State of Georgia,

know from my own knowledge (or from

reputable witnesses), that she resides in this County,

December 23, 1890, and has not lived out

widow of Samuel L. Cox

been allowed a pension for the year ending

In Witness Whereof, I have hereunto

this, the 11th day of

January, 1895.

D. L. Loom Ordinary.

POWER OF

STATE OF GEORGIA, Cherokee County.

KNOW ALL MEN BY THESE PRESENTS

County in said State, do hereby appoint

of Georgia

me, and in my name, to receive and recd

titled to from the State of Georgia as a

foregoing affidavit; hereby authorizing in

Warrant that may be issued by the Gov

coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have here

day of January, 1895.

Executed in the presence of us:

D. L. Loom Ordinary.

W. H. L. Loom

Send amount by check to D. L. Loom

me at Cherokee County, Georgia.

1895.

WARRANT ISSUED

Feb 4

AND HANDED TO

Atty

Geo. W. Harrison, Clerk of Prison.

1895.

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

Form No. 1.

STATE OF GEORGIA, County of Cherokee

I, D. L. Loom Ordinary in and for said County of

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

Rachael Cox the applicant for a pension in this case, and

know from my own knowledge (or from positive proof presented to me by reputable wit-

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

widow of Samuel L. Cox deceased, and as such has heretofore

been allowed a pension for the year ending February 15th, 1894.

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

this, the 11th day of January, 1895.

D. L. Loom Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Cherokee County.

KNOW ALL MEN BY THESE PRESENTS, That I, Rachael Cox

of Cherokee

County in said State, do hereby appoint Richard Johnson, Sec. & Cash

of Georgia my true and lawful attorney in fact, for

me, and in my name, to receive and receipt for whatever amount of money I may be en-

titled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the

foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any

Warrant that may be issued by the Governor, or for any sum of money which may be

coming to me for the reason aforesaid.

In WITNESS WHEREOF, I have hereunto set my hand and seal, this 11th

day of January, 1895. Rachael Cox [L. S.]

Executed in the presence of us:

D. L. Loom Ordinary.

W. H. L. Loom

DIRECTIONS.

Send amount by check to D. L. Loom Ordinary.

me at Cherokee County, Georgia.

Rachael Cox

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

Form No. 1.

STATE OF GEORGIA, County of Cherokee

I, Allen L. Loom Ordinary in and for said County of

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

Rachael Cox the applicant for a pension in this case, and

know from my own knowledge (or from positive proof presented to me by reputable witness-), that she

resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not

lived out of the State since that date. That she is the widow of Samuel Cox

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 11th day of January, 1897.

Allen L. Loom Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Cherokee County.

I, Rachael Cox hereby authorize Wm. A. Wright

of Atlanta Ga to receive and receipt for the pension paid hereon and request

that he remit same to A. L. Loom at Canton Ga.

In WITNESS WHEREOF, I have hereunto set my hand and seal, this 11th

day of January, 1897. Rachael Cox [L. S.]

Executed in the presence of us:

Allen L. Loom

WIDOW'S PENSION.

No. 2409

1895.

FOR THOSE HERETOFORE PAID.

for year ending February 15th, 1895.

PAID TO—

Rachael Cox

widow of Samuel L. Cox

Cherokee County.

WARRANT ISSUED

Feb 4

1895.

AND HANDED TO

Atty

Geo. W. Harrison, Clerk of Prison.

WIDOW'S PENSION.

No. 616

1897.

FOR THOSE HERETOFORE PAID.

for year ending February 15th, 1897.

PAID TO—

Rachael Cox

widow of Samuel L. Cox

Cherokee County.

WARRANT ISSUED

Feb 4

1897.

AND HANDED TO

Atty

Geo. W. Harrison, Clerk of Prison.

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 1845, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this
11 day of January 1895.
D. C. Linn Ordinary. Post-office

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 as a resident of Cherokee County for the year ending February 15th, 1896, and now apply for the pension provided by law for the year ending February 15th, 1897.

Sworn to and subscribed before me, this
11 day of January 1897.
D. C. Linn Ordinary. Post-office

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, Rachael Cox hereby authorize Mrs. H. M. Cox to

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

D. C. Linn at Cherokee Co.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 11 day of Jan 1900.

Executed in presence of

D. C. Linn

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, Rachael Cox hereby authorize

D. C. Linn to receive and receipt for the pension paid hereon and request that he remit same to

me at Cherokee Co.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 11 day of Jan 1901.

Executed in presence of

1900.

NO. 879

WIDOW'S PENSION,

For year ending February 15th, 1900.

PAID TO

Mrs. Rachael Cox

OF

County,

Cherokee

Widow of Samuel Cox

JNO. W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

Feb 13 1900,

AND HANDED TO

W. H. Hartsom

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

1901.

NO. 2457

WIDOW'S PENSION,

For year ending February 15th, 1901.

PAID TO

Mrs. Rachael Cox

OF

County,

Cherokee

Widow of Samuel Cox

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

Feb 12 1901,

AND HANDED TO

W. H. Hartsom

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

Cox Rachal
Charlottesville County
To Those Heretofore Paid.

1900.
From Pickens Co. 899
NO. *877*

WIDOW'S PENSION,
For year ending February 15th, 1900.
PAID TO
Mrs. Rachal Cox
or
Cherokee County,
Widow of *Samuel Cox*
JNO. W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
Feb 13
AND HANDED TO
Margitt
1900.
Geo. W. Hartman, State Printer, Atlanta.

Cox Rachal
Charlottesville County
To Those Heretofore Paid.

1901.
No. *245*

WIDOW'S PENSION,
For year ending February 15th, 1901.
PAID TO
Mrs. Rachal Cox
or
Cherokee County,
Widow of *Samuel Cox*
JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
2/12
AND HANDED TO
Leon
1901.
Geo. W. Hartman, State Printer, Atlanta, Ga.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, } Personally Comes Mrs.
County of *Cherokee* } *Rachal Cox*

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 *1876*. That she is the Widow of *Samuel Cox* who was a soldier in Company *A* of the *43rd* Regiment of *Georgia* Volunteers, that he enlisted in said regiment on or about the month of *March* 1861 and served in the Army up to *June* 1862. That he lost his life on the *day of June* 1862. (State here particulars of the husband's death, when, where and from what cause) *Said husband died in Hospital in Atlanta Ga in June 1862*

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 1852.

I have been allowed a pension as a resident of *Pickens* County for the year ending February 15th, 1897, and now apply for the pension provided by law for the year ending February 15th, 1900.

Sworn to and subscribed before me, this *1st* day of *June*, 1900. *Rachal Cox*
Post Office *Cherokee*
H. E. Gurne Ordinary.

State of Georgia, } I *H. E. Gurne*
Cherokee County. } Ordinary of said County, certify that I am well acquainted with Mrs. *Rachal Cox*, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the *day of* *June* 1862.

Given under my official signature and seal, this *1st* day of *June*, 1900.



H. E. Gurne
Ordinary of *Cherokee* County.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, } Personally Comes Mrs.
County of *Cherokee* } *Rachal Cox*

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 *1851*. That she is the Widow of *Samuel Cox* who was a soldier in Company *A* of the *43rd* Regiment of *Georgia* Volunteers, that he enlisted in said regiment on or about the month of *March* 1862, and served in the Army up to *June* 1862. That he lost his life on the *day of June* 1862. (State here particulars of the husband's death, when, where and from what cause) *Said husband died in Hospital in Atlanta Ga*

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 1852.

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

Sworn to and subscribed before me, this *1st* day of *June*, 1901. *Rachal Cox*
Post Office *Cherokee*
H. E. Gurne Ordinary.

State of Georgia, } I *H. E. Gurne*
Cherokee County. } Ordinary of said County, certify that I am well acquainted with Mrs. *Rachal Cox*, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the *day of* *June* 1862.

Given under my official signature and seal, this *1st* day of *June*, 1901.



H. E. Gurne
Ordinary of *Cherokee* County.

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

I have been allowed a pension as a resident of Cherokee County for the year ending February 15th, 1892, and now apply for the pension provided by law for the year ending February 15th, 1900.

Sworn to and subscribed before me, this 1st day of May 1900. Rachael Cox Post Office Cherokee Ordinary H. C. Burr

State of Georgia, Cherokee County. } I H. C. Burr Ordinary of said County, certify that I am well acquainted with Mrs. Rachael Cox, 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 1st day of May 1881.

Given under my official signature and seal, this 1st day of May 1900.

Official Seal.

H. C. Burr Ordinary of Cherokee County.

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 1852.

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

Sworn to and subscribed before me, this 1st day of May 1901. Rachael Cox Post Office Cherokee Ordinary H. C. Burr

State of Georgia, Cherokee County. } I H. C. Burr Ordinary of said County, certify that I am well acquainted with Mrs. Rachael Cox, 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 1st day of May 1881.

Given under my official signature and seal, this 1st day of May 1901.

Official Seal.

H. C. Burr Ordinary of Cherokee County.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cherokee County. } I, Rachael Cox, hereby authorize H. C. Burr of Cherokee County, to receive and receipt for the pension paid hereon, and request that he remit same to me at Cherokee. In Witness Whereof, I have hereunto set my hand and seal, this 1st day of May 1902. Rachael Cox [L. S.]

Executed in presence of

H. C. Burr

POWER OF ATTORNEY.

STATE OF GEORGIA, Cherokee County. } I, Rachael Cox, hereby authorize H. C. Burr of Cherokee County, to receive and receipt for the pension paid hereon, and request that he remit same to me at Cherokee. In Witness Whereof, I have hereunto set my hand and seal, this 1st day of May 1903. Rachael Cox [L. S.]

Executed in presence of

H. C. Burr

Cox, Rachael
Cherokee, County,
To Those Hereofore Paid.

1902.

No. 1843

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. Rachael Cox

OF

Cherokee County.

Widow of Samuel Cox
Co. 14th Regiment, 1st Div.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1902

24 AND HANDS TO

only

W. W. HARRISON, STATE PRINTER, ATLANTA, GA.

Cox, Rachael (Mrs)
Cherokee, County
To Those Hereofore Paid

1903.

No. 1962

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. Rachael Cox

OF

Cherokee County.

Widow of Samuel Cox
Co. 14th Regiment, 1st Div.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1903.

24 AND HANDS TO

only

W. W. HARRISON, STATE PRINTER, ATLANTA, GA.

Cor. Rachel Cox
Cherokee County
 To Those Heretofore Paid.
1902.
 No. 1843
WIDOW'S PENSION,
 For year ending Dec. 31, 1902.
 PAID TO
Mrs. Rachel Cox
 of *Cherokee* County,
 Widow of *Samuel Cox*
 Co. S. 45. Regiment *42nd*
 JOHN W. LINDSEY,
 Commissioner of Pensions.
WARRANT ISSUED
 34
 AND HANDLED
 1902
 1903

Cor. Rachel Cox
Cherokee County
 To Those Heretofore Paid.
1903.
 No. 1962
WIDOW'S PENSION,
 For year ending Dec. 31, 1903.
 PAID TO
Mrs. Rachel Cox
 of *Cherokee* County,
 Widow of *Samuel Cox*
 Co. *42nd* Regiment
 JOHN W. LINDSEY,
 Commissioner of Pensions.
WARRANT ISSUED
 2/6
 AND HANDLED
 1903

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
 County of *Cherokee* } PERSONALLY COMES MRS. *Rachel Cox*
Cherokee
 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 *1831*. That she is the Widow of
Samuel Cox who was a soldier in Company
 of the *43* Regiment of *6th*
 Volunteers, that he enlisted in said regiment on or about the month of *March*
1862, and served in the Army up to *June* *1862*. That he lost his
 life on the *June* day of *June* *1862*. (State here
 particulars of the husband's death, when, where and from what cause.)
Died in hospital at Atlanta Ga with fever

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 *1852*.

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

Sworn to and subscribed before me,
 this *3* day of *July* 1902. *Rachel Cox*
A. C. Conn, Ordinary. Post-Office

State of Georgia,
Cherokee County. I, *A. C. Conn*
 Ordinary of said County, certify that I am well
 acquainted with Mrs. *Rachel Cox*, who made the above affidavit and
 am satisfied that the facts therein stated are true, and I know she is the individual she represents
 herself to be, and that she has continuously resided in this State since the
 day of *1831*.

Given under my official signature and seal, this *3* day of *July* 1902.

Official Seal. *A. C. Conn*
 Ordinary of *Cherokee* County.

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,
 County of *Cherokee* } PERSONALLY COMES MRS. *Rachel Cox*
Cherokee
 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 *1831*. That she is the Widow of
Samuel Cox who was a soldier in Company
 of the *43* Regiment of *6th*
 Volunteers, that he enlisted in said regiment on or about the month of *March*
1862, and served in the Army up to *June* *1862*. That he lost his
 life on the *June* day of *June* *1862*. (State here
 particulars of the husband's death, when, where and from what cause.)
Died in hospital at Atlanta Ga with fever

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 *1852*.

I have been paid a pension as a resident of *Cherokee* County for the
 year ending December 31, 1902, and now apply for the pension provided by law for the year ending
 December 31, 1903.

Sworn to and subscribed before me,
 this *5* day of *July* 1903. *Rachel Cox*
A. C. Conn, Ordinary. Post-Office

State of Georgia,
Cherokee County. I, *A. C. Conn*
 Ordinary of said County, certify that I am well
 acquainted with Mrs. *Rachel Cox*, who made the above affidavit and
 am satisfied that the facts therein stated are true, and I know she is the individual she represents
 herself to be, and that she has continuously resided in this State since the
 day of *July* *1831*.

Given under my official signature and seal, this *5* day of *July* 1903.

Official Seal. *A. C. Conn*
 Ordinary of *Cherokee* County.

NOTE.—All blank spaces must be filled.
 Voucher and affidavit must bear date after January 1st, 1903.

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 1882.

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

Sworn to and subscribed before me, this 3 day of July 1902. Richard X Cox Post-Office Ordinary.

State of Georgia, Cherokee County. I, A.C. Connor Ordinary of said County, certify that I am well acquainted with Mrs. Rachael Cox, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 1-31.

Given under my official signature and seal, this 3 day of July 1902. A.C. Connor Ordinary of Cherokee County.

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

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 1882.

I have been paid a pension as a resident of Cherokee County for the year ending December 31, 1902, and now apply for the pension provided by law for the year ending December 31, 1903.

Sworn to and subscribed before me, this 5 day of July 1903. Richard X Cox Post-Office Ordinary.

State of Georgia, Cherokee County. I, A.C. Connor Ordinary of said County, certify that I am well acquainted with Mrs. Rachael Cox, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of July 1881.

Given under my official signature and seal, this 5 day of July 1903. A.C. Connor Ordinary of Cherokee County.

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1903.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cherokee County. I, Rachael Cox hereby authorize W. J. Webb of Cherokee to receive and receipt for the pension paid hereon, and request that he remit same to A.C. Connor Ordinary at Cherokee. In Witness Whereof, I have hereunto set my hand and seal, this 8 day of July 1904.

Executed in presence of Rachael Cox [L. S.]
A.C. Connor, Ordinary

POWER OF ATTORNEY.

STATE OF GEORGIA, Cherokee County. I, Rachael Cox hereby authorize W. J. Webb of Cherokee to receive and receipt for the pension paid hereon, and request that he remit same to A.C. Connor Ordinary at Cherokee. In Witness Whereof, I have hereunto set my hand and seal, this 8 day of July 1905.

Executed in presence of Rachael Cox [L. S.]
W. J. Webb

Widow Rachael Cox
Cherokee County
To Those Herebefore Paid.

1904.
No. 2092

WIDOW'S PENSION
FOR
YEAR ENDING DECEMBER 31, 1904.
PAID TO
Widow Rachael Cox
Cherokee County,
Widow of Daniel E. Cox
Co. B Regiment 43

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
FEB 18
AND HANDLED TO
W. J. Webb
[L. S.]

JOHN W. LINDSEY, SECRETARY OF THE ARMY.

Widow Rachael Cox
Cherokee County
To Those Herebefore Paid.

1905.
No. 1960

WIDOW'S PENSION,
For year ending Dec. 31, 1905.
PAID TO
Widow Rachael Cox
Cherokee County,
Widow of Daniel E. Cox
Co. A Regiment 43

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
FEB 23
AND HANDLED TO
W. J. Webb
[L. S.]

JOHN W. LINDSEY, SECRETARY OF THE ARMY.

Col Rachel
Charleston Co
TO THOSE HERETOFORE PAID.
1904.
No. *2092*
WIDOW'S PENSION
FOR
YEAR ENDING DECEMBER 31, 1904.
PAID TO
Mrs Rachel C. Co.
County,
Charleston
Widow of *Samuel C. Co.*
Co. *B* Regiment *43*
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
FEB 18 1904.
AND HANDLED TO
W. J. Webb
By W. J. Webb, State Printer, Atlanta.

Col. Richard
Charleston County
TO THOSE HERETOFORE PAID.
1905.
No. *1965*
WIDOW'S PENSION,
For year ending Dec. 31, 1905.
PAID TO
Mrs. Richard C. Co.
OF
Charleston County,
Widow of *Samuel C. Co.*
Co. *A* Regiment *43*
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
FEB 23 1905.
AND HANDLED TO
W. J. Webb
By W. J. Webb, State Printer, Atlanta.

Form No. 1.
FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, } PERSONALLY COMES MRS.
County of *Charleston* } *Rachel Co.*
who, being sworn says on oath, that she is a bona fide resident of said County of
Charleston State of Georgia, and that she has RESIDED in said State
continuously ever since *1831*. That she is the Widow of
Samuel C. Co. who was a soldier in Company
B of the *43d* Regiment of *Ga*
Volunteers, that he enlisted in said regiment on or about the month of *March*
1862, and served in the Army up to *June* *1862*. That he lost his
life on the *June* day of *June* *1862*. (State here
particulars of the husband's death, when, where and from what cause.)
Died in hospital in Atlanta Ga

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 *1852*.

I have been paid a pension as a resident of *Charleston* County for the
year ending December 31, 1903, and now apply for the pension provided by law for the year ending
December 31, 1904.

Sworn to and subscribed before me,
this *8* day of *May*, 1904. *Rachel C. Co.*
W. J. Webb Ordinary. Post Office *Wilmington*

State of Georgia, } I, *W. J. Webb*
Charleston County, } Ordinary of said County, certify that I am well
acquainted with Mrs. *Rachel Co.* who made the above affidavit and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
herself to be, and that she has continuously resided in this State since the
day of *June* *1831*.

Given under my official signature and seal, this the *8* day of *May*, 1904.



NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1904.

Form No. 1.
For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, } PERSONALLY COMES MRS.
County of *Charleston* } *Rachel Co.*
who, being sworn says on oath, that she is a bona fide resident of said County of
Charleston State of Georgia, and that she has RESIDED in said State
continuously ever since *1831*. That she is the Widow of
Samuel Co. who was a soldier in Company
A of the *43* Regiment of *Ga*
Volunteers, that he enlisted in said regiment on or about the month of *March*
1862, and served in the Army up to *June* *1862*. That he lost his
life on the *June* day of *June* *1862*. (State here
particulars of the husband's death, when, where and from what cause.)
Died in hospital at Atlanta Ga
with fever

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 *1852*.

I have been paid a pension as a resident of *Charleston* 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,
this *4* day of *May*, 1905. *Rachel C. Co.*
W. J. Webb Ordinary. Post Office *Wilmington*

State of Georgia, } I, *W. J. Webb*
Charleston County, } Ordinary of said County, certify that I am well
acquainted with Mrs. *Rachel Co.* who made the above affidavit and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
herself to be, and that she has continuously resided in this State since the
day of *June* *1831*.

Given under my official signature and seal, this the *4* day of *May*, 1905.



NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1905.

Volunteers, that he enlisted in said regiment on or about the month of March
1862, and served in the Army up to June 1862. That he lost his
life on the June day of June 1862. (State here
particulars of the husband's death, when, where and from what cause.)

Died in Hospital in Atlanta

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 Cherokee County for the
year ending December 31, 1903, and now apply for the pension provided by law for the year ending
December 31, 1904.

Sworn to and subscribed before me,
this 8 day of June, 1904. Rockwell Cox
Ed. L. Lamm Ordinary. Post Office State

State of Georgia, I, Ed. L. Lamm
Cherokee County. Ordinary of said County, certify that I am well
acquainted with Mrs. Rockwell Cox, who made the above affidavit and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
herself to be, and that she has continuously resided in this State since the
day of June 1862.

Given under my official signature and seal, this the 8 day of June 1904.

Official
Seal

Ed. L. Lamm
Ordinary of Cherokee County

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1904.

Volunteers, that he enlisted in said regiment on or about the month of March
1862, and served in the Army up to June 1862. That he lost his
life on the June day of June 1862. (State here
particulars of the husband's death, when, where and from what cause.)

Died in Hospital at Atlanta Ga
with fever

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 Cherokee 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,
this 4 day of June, 1905. Rockwell Cox
W. J. Webb Ordinary. Post Office Brumby

State of Georgia, I, W. J. Webb
Cherokee County. Ordinary of said County, certify that I am well
acquainted with Mrs. Rockwell Cox, Who made the above affidavit and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
herself to be, and that she has continuously resided in this State since the
day of June 1862.

Given under my official signature and seal, this the 4 day of June 1905.

Official
Seal

W. J. Webb
Ordinary of Cherokee County

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1905.

Exp. 4 mch. 22, 62.
 7 Cents.
 31/62, 73 mch.
 10/62, 12/62, 3/63.
 3/63, 4/63, 5/63.
 3/63, 4/63, 5/63.
 3/63, 4/63, 5/63.

Witness look up,
 12/62, 1/63, 2/63,
 3/63, 4/63, 5/63.
 12/62, 1/63, 2/63, 3/63, 4/63, 5/63.

6th Jan 1920
 Cherokee Co.

No. 1920
**Confederate
Soldier's Application**
 Under Act 1910—As Amended by Act of 1919.
 County Cherokee
 Name 73 F. Seriden
 Company 73 E
 Regiment 22 L
 Approved _____

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

NOTE: 1. Before any questions are answered the Ordinary shall meet applicant and witness in the following words:
 you give shall be the whole truth, do not give any false or untrue answers to each of the questions asked you and the evidence
 2. All affidavits must be sworn to by the Ordinary of the county in which the applicant or witness resides and
 must be certified by such Ordinary.

STATE OF GEORGIA.
 Ordinary's Certificate
 I, W. H. Stoddard COUNTY Cherokee
 Ordinary of said County, certify that I know
 the applicant 73 F. Seriden for pension is the person he represents himself to be and
 resides in said county. That I also know 8 73 Stoddard the witness swearing to the
 service; that they are both residents of said county and were duly sworn by me before signing the foregoing
 affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and
 credit.
 Sworn under my hand and official seal of office this 13 day of Aug 1920.
W. H. Stoddard Ordinary
 of Cherokee County }
 (SEAL)

Certificate

Ordinary of said County, certify that I know

ion is the person he represents himself to be and

3. 1862-1864 the witness swearing to the

were duly sworn by me before signing the forego-

and their statements are entitled to full faith and

13th day of Aug 1912

at once applicant and witnesses in the following words:
I am insufficient.
the county in which the applicant or witness resides and

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

Ordinary's Certificate

STATE OF GEORGIA,

Cherokee COUNTY.

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

Sworn under my hand and official seal of office this 13th day of Aug 1912.

J. M. Lindsey Ordinary
of Cherokee County.
(SEAL)

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you give shall be the whole truth. No help you God?" 2. Additional affidavits may be attached if blank spaces are insufficient. 3. All affidavits must be made before the Ordinary of the county in which the applicant or witness resides and must be certified by such Ordinary.

Confederate
Soldier's Application
Under Act 1910—As Amended by Act of 1919.

No. 100 for 1912

County, Cherokee
Name, B. F. Grisher
Company, E
Regiment, 22nd
Approved

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

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

Questions For Applicants to Answer

STATE OF GEORGIA,

Cherokee COUNTY.

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

1. What is your name and where do you reside? (Give County and Post-office) B. F. Grisher, Cherokee County.
2. How long and since when have you been a continuous resident citizen of this State? 75 years at age 84.
3. Did you enlist in the Army of the Confederate States or in the organized militia of this State from 1861 to 1865? Yes.
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) March 22nd, 1862, Atlanta Ga. Co. E. 22nd Reg. Inf.
5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge) From March 22nd 1862 till May 12th 1865.
6. When and where was your Company and Regiment surrendered or discharged from the Service? April 1865, Petersburg, Virginia.
7. Were you actually present with your command when it was surrendered or discharged? Yes.
8. If you were not actually present, state specifically and clearly where you were. I was at Fort on actual battle.
- a. Where was your command when you left it? Manassas, Virginia.
- b. When did you leave the command? At 2nd 1864.
- c. For what cause did you leave? Wounded.
- d. By whose authority did you leave? Was sent to Hospital.
- e. For how long was your leave granted? In what way? Was sent to Hospital.
- f. Why did you not return to your command after leave expired? Left by train on arrival.
- g. In what way were you prevented? Left by train on arrival.
- h. What effort did you make to return? None.
- i. Were you captured during the war? Yes.
- j. If so, when, and where? In what prison were you held and when were you released? Sent to Hospital in Manassas, Virginia, was released on parole for 6 months, was exchanged, returned home 1862.
9. Are you drawing a pension of any amount from this State or the United States? No.
10. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? No.

Sworn to and subscribed before me, this 13th day of Aug 1912, B. F. Grisher
J. M. Lindsey Ordinary
of Cherokee County.
(SEAL)

Brigadier B. F.
Cherokee Co

No. 100 Jan 1920

Confederate Soldier's Application Under Act 1910--As Amended by Act of 1919.

County Cherokee
Name T. F. Crisler
Company E
Regiment 2nd
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.
Byrd Printing Co. State Printer, Atlanta.

3163 1919
T. F. Crisler
Brigadier B. F.
Cherokee Co
3163 1919

- Sworn to and subscribed before me, this the _____ day of _____ 1919.
- a. Where was your command when you left it? Manassas Virginia
- b. When did you leave the command? Apr 28 1864
- c. For what cause did you leave? Wounded
- d. By whose authority did you leave? was sent to Hospital
- e. For how long was your leave granted? In what way? was sent to Hospital
- f. Why did you not return to your command after leave expired? left by go on active
- g. In what way were you prevented? left by go on active
- h. What effort did you make to return? _____
- i. Were you captured during the war? No
- j. If so, when, and where? In what prison were you held and when were you released? sent to 31/18
- k. Are you drawing a pension of any amount from this State or the United States? No
10. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? No

Sworn to and subscribed before me, this the _____ day of _____ 1919.

T. F. Crisler Ordinary

of Cherokee County.

(SEAL)

Questions for Witness as to Service

- STATE OF GEORGIA, _____ COUNTY.
- T. F. Crisler of said State and County is hereby presented as a witness in support of the application of T. F. Crisler for the pension provided by the Act of 1910, as amended by the Act of 1919 in said State, and, after being sworn true answers to make to the questions propounded, answers as follows:
1. What is your name and where do you reside? T. F. Crisler
2. How long and since when have you known _____ the applicant? 57 years since 1862
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? Cherokee Co. Cherokee Co. Ga.
4. When, where and in what Company and Regiment did _____ enlist during war from 1861 to 1865? (Give date and place.) March 22nd 1862 Co. E. 2nd Regt.
5. How did you obtain your information of this Service? I was in same Co.
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date.) 6 Months from Nov 1862 till Aug 20 1862
7. When and where was his command surrendered or discharged (give date and place) at not known
8. Were you personally present at the surrender? No
9. If not, where were you and how came you there? I was at home on furlough
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? _____ Where was his command when he left it? _____ For what cause did he leave? _____
13. By whose authority did he leave? _____ and how long was he granted leave? _____ How do you know all that you have stated to be true? If of your own knowledge, tell clearly and specifically. I served in the same Co. with the Aug 30 1862 when he was wounded and sent to Hospital.
13. In what way was he prevented from returning to his command? was on medical list
- How do you know? I have seen the medical list
14. What effort did he make to return to his command and how do you know? _____
15. Was applicant captured as a prisoner? at not known If so, when and where? _____ and when released _____
- Sworn to and subscribed before me, this the _____ day of _____ 1919.
- T. F. Crisler Ordinary
- of Cherokee County.
- (SEAL)

8. Were you personally present at the surrender? *Yes*
 9. If not, where were you and how came you there? *I was at home on January 1st - Canton, Ga.*
 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? Where was his command when he left it? For what cause did he leave?
 By whose authority did he leave? and, how long was he granted leave? How do you know all that you have stated to be true? If of your own knowledge, tell clearly and specifically.
I arrived in the same Co. at the time Aug. 20/1862 when he was wounded and left to himself.
 13. In what way was he prevented from returning to his command? *None on medical list*
 How do you know? *I have seen the medical list*
 14. What effort did he make to return to his command and how do you know?
 15. Was applicant captured as a prisoner? *Not then* If so, when and where?
 In what prison was he held? and when released
 Sworn to and subscribed before me, this the } *L. P. Smith*
13 day of *June* 19*09* }
J. M. Langford Ordinary
 of *Cherokee* County }
 (SEAL)

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, *Cherokee* County.
 I, *Jacob Massey* Ordinary of said County, do certify that I personally know *Mrs. Emma Brisler*, the applicant, and that she is the lawful widow of *B. F. Brisler*, who was on the Pension Roll of said *Cherokee* County, and was paid a Pension from *Cherokee* County for 192*8*, and at the time of his death on the *19* day of *March* 192*9*, there was due to him and unpaid his Pension of *Fifty* Dollars from the State of Georgia, and I know *E. D. Timley*, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.
 Given under my hand and seal this *6* of *April* 192*9*
 (Seal of Ordinary)
Jacob Massey Ordinary
Cherokee County

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, *Cherokee* County.
 I, *Jacob Massey* Ordinary of said County, do certify that I personally know *Mrs. E. F. Brisler*, the applicant, and that she is the lawful widow of *B. F. Brisler*, who was on the Pension Roll of said *Cherokee* County, and was paid a Pension from *Cherokee* County for 192*8*, and at the time of his death on the *19* day of *March* 192*9*, there was due to him and unpaid his Pension of *Two Hundred* Dollars from the State of Georgia, and I know *Mrs. E. F. Brisler*, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.
 Given under my hand and seal this *27* of *May* 192*9*
 (Seal of Ordinary)
Jacob Massey Ordinary
Cherokee County

Crisler, B. F.
 FIRST QUARTER 1929

Cherokee County
 192*9*

Application for Pension
 Due Deceased Soldier
 (UNDER ACT 1891)
 (To be paid to his Widow)

BY
Mrs. Emma Brisler
 Widow of *B. F. Brisler*
 Date of Marriage *Feb. 21 - 1883*
 Date of Death *Mar. 19* 192*9*
 Approved and ordered paid. *ck*
John W. Clark 192
 JOHN W. CLARK,
 Commissioner of Pensions.
 Ordinary: Fill out above in full and send this blank to Pension Department for approval before you pay out the money, and then return it with your pay-rolls for permanent filing in the Pension Department.

Crisler, B. F.
 SECOND QUARTER 1929

Cherokee County
 192*9*

Application for Pension
 Due Deceased Soldier
 (UNDER ACT 1891)
 (To be paid to his Widow)

BY
Mrs. B. F. Brisler
 Widow of *B. F. Brisler*
 Date of Marriage *Feb. 21 - 1883*
 Date of Death *March 19* 192*9*
 Approved and ordered paid. *ck*
John W. Clark 192
 JOHN W. CLARK,
 Commissioner of Pensions.
 Ordinary: Fill out above in full and send this blank to Pension Department for approval before you pay out the money, and then return it with your pay-rolls for permanent filing in the Pension Department.

Crisler, B. F.
FIRST QUARTER 1929

Cherokee County

1929

Application for Pension Due Deceased Soldier

(UNDER ACT 1891)
(To be paid to his Widow)

BY

Mrs. Emma Crisler
Widow of B. F. Crisler

Date of Marriage Feb. 21 - 1883
Date of Death Jan. 19 - 1929

Approved and ordered paid.

John W. Clark
JOHN W. CLARK,
Commissioner of Pensions.

Ordinary: Fill out above in full and send
this blank to Pension Department for ap-
proval before you pay out the money, and
then return it with your pay-roll for per-
manent filing in the Pension Department.

Crisler, B. F.
SECOND QUARTER 1929

Cherokee County

1929

Application for Pension Due Deceased Soldier

(UNDER ACT 1891)
(To be paid to his Widow)

BY

Mrs. B. F. Crisler
Widow of B. F. Crisler

Date of Marriage Feb. 21 - 1883
Date of Death March 19 - 1929

Approved and ordered paid.

John W. Clark
JOHN W. CLARK,
Commissioner of Pensions.

Ordinary: Fill out above in full and send
this blank to Pension Department for ap-
proval before you pay out the money, and
then return it with your pay-roll for per-
manent filing in the Pension Department.

Application for Pension Due Deceased Soldier

(To Be Paid to His Widow)

(UNDER ACT APPROVED OCTOBER 9, 1891)

STATE OF GEORGIA, Cherokee County.

Personally before me, the Ordinary of said County, comes Mrs. Emma Crisler
of said County, who after being duly sworn, on oath says that she is the widow of

B. F. Crisler

and that said Pensioner was on the Pension Roll of Cherokee County
and was paid a Pension of Fifty (\$50.00) Dollars

from said County for 4th Quarter, 1928, and that the said Pensioner died in
Cherokee County on the 19 day of March, 1929.

Applicant further swears that she married the said B. F. Crisler
on the 21 day of Feb., 1883 in Cherokee County and
State of Ga., and resided with him from the date of marriage to his death as his
lawful wife, and is now his dependent widow, and she asks that the 1st Qr. Pension, 1929
due and unpaid be paid to her.

Sworn to and subscribed before me this 6 day of April, 1929
J. L. Massey, Ordinary
Cherokee County
(Seal of Ordinary)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Cherokee County.

Personally before me comes J. L. Massey, who
on oath says that he knew B. F. Crisler while in life
and that he knows Mrs. Emma Crisler, the
above applicant; and knows that the said B. F. Crisler

and Mrs. Emma Crisler were in due form of law married in the County
of Cherokee in the State of Georgia on
the 21 day of February, 1883, and that they were residing
together as husband and wife at the time of his death on the 19 day of
March, 1929, and that she is his dependent widow.

Sworn to and subscribed before me this 6 day of April, 1929
J. L. Massey, Ordinary
Cherokee County
(Seal of Ordinary)

INSTRUCTIONS:

1st. Proof of marriage must be made.
2nd. Do not use the commonly large form of marriage certificate in common vogue throughout the State, suitable only for framing.
Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage
license is the proper thing.
3rd. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the
seals affixed, and that back of application, when folded, is filled in.
4th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make
the payment.
5th. Return this application with your final settlement to the Pension Department.
6th. The widow or person holding her proper power-of-attorney receipts for this pension by signing name, as widow, opposite the name
of husband, on the soldier pay roll.
7th. Only one pension is covered by this application. Take another application, on the white blank, to admit widow to rolls in her
own right.

Application for Pension Due Deceased Soldier

(To Be Paid to His Widow)

(UNDER ACT APPROVED OCTOBER 9, 1891)

STATE OF GEORGIA, Cherokee County.

Personally before me, the Ordinary of said County, comes Mrs. E. C. Crisler
of said County, who after being duly sworn, on oath says that she is the widow of

B. F. Crisler

and that said Pensioner was on the Pension Roll of Cherokee County
and was paid a Pension of Fifty (\$50.00) Dollars

from said County for 1st Quarter, 1929, and that the said Pensioner died in
Cherokee County on the 17th day of March, 1929.

Applicant further swears that she married the said B. F. Crisler
on the 21st day of Feb., 1883 in Cherokee County and
State of Ga., and resided with him from the date of marriage to his death as his
lawful wife, and is now his dependent widow, and she asks that the 2d Qr. Pension, 1929
due and unpaid be paid to her.

Sworn to and subscribed before me this 27 day of May, 1929
J. L. Massey, Ordinary
Cherokee County
(Seal of Ordinary)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Cherokee County.

Personally before me comes Ollie J. McClure, who
on oath says that he knew B. F. Crisler while in life
and that he knows Mrs. E. C. Crisler, the
above applicant; and knows that the said B. F. Crisler

and Mrs. E. C. Crisler were in due form of law married in the County
of Cherokee in the State of Ga. on
the 21st day of February, 1883, and that they were residing
together as husband and wife at the time of his death on the 17th day of
March, 1929, and that she is his dependent widow.

Sworn to and subscribed before me this 27 day of May, 1929
J. L. Massey, Ordinary
Cherokee County
(Seal of Ordinary)

INSTRUCTIONS:

1st. Proof of marriage must be made.
2nd. Do not use the commonly large form of marriage certificate in common vogue throughout the State, suitable only for framing.
Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage
license is the proper thing.
3rd. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the
seals affixed, and that back of application, when folded, is filled in.
4th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make
the payment.
5th. Return this application with your final settlement to the Pension Department.
6th. The widow or person holding her proper power-of-attorney receipts for this pension by signing name, as widow, opposite the name
of husband, on the soldier pay roll.
7th. Only one pension is covered by this application. Take another application, on the white blank, to admit widow to rolls in her
own right.

AFIDAVIT OF WITNESS

STATE OF GEORGIA, Cherokee County.

Personally before me comes E. J. Massey, who on oath says that he knew B. F. Crisler while in life and that he knows Mrs. Emma Crisler, the above applicant; and knows that the said B. F. Crisler and Mrs. Emma Crisler were in due form of law married in the County of Cherokee in the State of Georgia on the 21 day of February, 1883, and that they were residing together as husband and wife at the time of his death on the 19 day of March, 1929, and that she is his dependent widow.

Sworn to and subscribed before me this 6 day of April, 1929

Jacob Massey Ordinary E. J. Massey
Cherokee County

(Seal of Ordinary)

INSTRUCTIONS:

1st. Proof of marriage must be made.
2nd. Do not use the commonly large form of marriage certificate in common vogue throughout the State, suitable only for framing. Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage license is the proper thing.
3rd. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the seals affixed, and that back of application, when folded, is filled in.
4th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the payment.
5th. Return this application with your final settlement to the Pension Department.
6th. The widow or person holding her proper power-of-attorney receipts for this pension by signing name, as widow, opposite the name of husband on the soldier pay roll.
7th. Only the one pension is covered by this application. Take another application, on the white blank, to admit widow to rolls in her own right.

AFIDAVIT OF WITNESS

STATE OF GEORGIA, Cherokee County.

Personally before me comes Ollie J. McClure, who on oath says that he knew B. F. Crisler while in life and that he knows Mrs. E. C. Crisler, the above applicant; and knows that the said B. F. Crisler and Mrs. E. C. Crisler were in due form of law married in the County of Cherokee in the State of Georgia on the 21st day of February, 1883, and that they were residing together as husband and wife at the time of his death on the 19th day of March, 1929, and that she is his dependent widow.

Sworn to and subscribed before me this 27 day of May, 1929

Jacob Massey Ordinary Ollie J. McClure
Cherokee County

(Seal of Ordinary)

INSTRUCTIONS:

1st. Proof of marriage must be made.
2nd. Do not use the commonly large form of marriage certificate in common vogue throughout the State, suitable only for framing. Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage license is the proper thing.
3rd. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the seals affixed, and that back of application, when folded, is filled in.
4th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the payment.
5th. Return this application with your final settlement to the Pension Department.
6th. The widow or person holding her proper power-of-attorney receipts for this pension by signing name, as widow, opposite the name of husband on the soldier pay roll.
7th. Only the one pension is covered by this application. Take another application, on the white blank, to admit widow to rolls in her own right.

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Cherokee County.

I, Jacob Massey, Ordinary of said County, do certify that I personally know Mrs. E. C. Crisler, the applicant, and that she is the lawful widow of B. F. Crisler, who was on the Pension Roll of said Cherokee County, and was paid a Pension from Cherokee County for 1928, and at the time of his death on the 19 day of March, 1929, there was due to him and unpaid his Pension of Two Hundred Dollars from the State of Georgia, and I know Ollie McClure, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 27 of August, 1929

(Seal of Ordinary)

Jacob Massey Ordinary
Cherokee County

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Cherokee County.

I, Jacob Massey, Ordinary of said County, do certify that I personally know Mrs. Georgia Emma Crisler, the applicant, and that she is the lawful widow of B. F. Crisler, who was on the Pension Roll of said Cherokee County, and was paid a Pension from Cherokee County for 1929, and at the time of his death on the 19 day of March, 1929, there was due to him and unpaid his Pension of One Hundred and Fifty Dollars from the State of Georgia, and I know Miss Willie McClure, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 5th of December, 1929

(Seal of Ordinary)

Jacob Massey Ordinary
Cherokee County

Crisler, B. F.

THIRD QUARTER 1929

County Cherokee

1929

Application for Pension
Due Deceased Soldier
(UNDER ACT 1891)
(To be paid to his Widow)

BY
Widow of B. F. Crisler
Date of Marriage Feb. 21, 1883
Date of Death Mar. 19, 1929

Approved and ordered paid R.
August 31, 1929
JOHN W. CLARK,
Commissioner of Pensions.

Ordinary: Fill out above in full and send this blank to Pension Department for approval before you pay out the money, and then return it with your pay-rolls for permanent filing in the Pension Department.

Crisler, B. F.

FOURTH QUARTER 1929

County Cherokee

1929

Application for Pension
Due Deceased Soldier
(UNDER ACT 1891)
(To be paid to his Widow)

BY
Widow of B. F. Crisler
Date of Marriage Feb. 21, 1883
Date of Death Mar. 19, 1929

Approved and ordered paid R.
Dec. 11, 1929
R. de L. Lawrence
Commissioner of Pensions.

Ordinary: Fill out above in full and send this blank to Pension Department for approval before you pay out the money, and then return it with your pay-rolls for permanent filing in the Pension Department.

Crisler, B. F.
THIRD QUARTER 1929

Cherokee County

1929

Application for Pension Due Deceased Soldier

(UNDER ACT 1891)

(To be paid to his Widow)

BY

Mrs. B. F. Crisler
Widow of B. F. Crisler
Date of Marriage Feb. 21, 1883
Date of Death March 19, 1929

Approved and ordered paid.

August 31, 1929

JOHN W. CLARK,

Commissioner of Pensions.

Ordinary: Fill out above in full and send this blank to Pension Department for approval before you pay out the money, and then return it with your pay-rolls for permanent filing in the Pension Department.

Crisler, B. F.
FOURTH QUARTER 1929

Cherokee County

1929

Application for Pension Due Deceased Soldier

(UNDER ACT 1891)

(To be paid to his Widow)

BY

Mrs. Georgia Emma Crisler
Widow of B. F. Crisler
Date of Marriage Feb. 21, 1883
Date of Death March 19, 1929

Approved and ordered paid.

Dec 11, 1929

R. det. Lawrence

Commissioner of Pensions.

Ordinary: Fill out above in full and send this blank to Pension Department for approval before you pay out the money, and then return it with your pay-rolls for permanent filing in the Pension Department.

Application for Pension Due Deceased Soldier

(To Be Paid to His Widow)

(UNDER ACT APPROVED OCTOBER 3, 1891)

STATE OF GEORGIA, Cherokee County.

Personally before me, the Ordinary of said County, comes Mrs. B. F. Crisler
of said County, who after being duly sworn, on oath says that she is the widow of B. F. Crisler

and that said Pensioner was on the Pension Roll of Cherokee County
and was paid a Pension of Fifty Dollars (\$50.00) Dollars
from said County for 4th Quarter, 1928, and that the said Pensioner died in Cherokee County on the 19 day of March, 1929.

Applicant further swears that she married the said B. F. Crisler
on the 21 day of Feb., 1883, in Cherokee County and
State of Georgia, and resided with him from the date of marriage to his death as his
lawful wife, and is now his dependent widow, and she asks that the 3rd Qr. Pension, 1929,
due and unpaid be paid to her.

Sworn to and subscribed before me this 29 day of August, 1929.
Joseph Massey Ordinary
Cherokee County B. F. Crisler (L. S.)
(Seal of Ordinary)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Cherokee County.

Personally before me comes _____, who
on oath says that he knew B. F. Crisler while in life
and that he knows Mrs. B. F. Crisler, the
above applicant; and knows that the said B. F. Crisler
and Mrs. B. F. Crisler were in due form of law married in the County
of Cherokee in the State of Georgia on
the 21st day of February, 1883, and that they were residing
together as husband and wife at the time of his death on the 19 day of
March, 1929, and that she is his dependent widow.

Sworn to and subscribed before me this 29 day of August, 1929.
Joseph Massey Ordinary
Cherokee County Ollie McClure
(Seal of Ordinary)

INSTRUCTIONS:

1st. Proof of marriage must be made.
2nd. Do not use the enormously large form of marriage certificate in common vogue throughout the State, suitable only for framing. Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage license is the proper thing.
3rd. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the seals affixed, and that back of application, when folded, is filed in.
4th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the payment.
5th. Return this application with your final settlement to the Pension Department.
6th. The widow or person holding her proper power-of-attorney receipts for this pension by signing name, as widow, opposite the name of husband on the soldier pay roll.
7th. Only one pension is covered by this application. Take another application, on the white blank, to admit widow to rolls in her own right.

Application for Pension Due Deceased Soldier

(To Be Paid to His Widow)

(UNDER ACT APPROVED OCTOBER 3, 1891)

STATE OF GEORGIA, Cherokee County.

Personally before me, the Ordinary of said County, comes Mrs. Georgia Emma Crisler
of said County, who after being duly sworn, on oath says that she is the widow of B. F. Crisler

and that said Pensioner was on the Pension Roll of Cherokee County
and was paid a Pension of Fifty (\$50.00) Dollars
from said County for 2nd Quarter, 1929, and that the said Pensioner died in Cherokee County on the 19th day of March, 1929.

Applicant further swears that she married the said B. F. Crisler
on the 21 day of Feb., 1882, in Cherokee County and
State of Georgia, and resided with him from the date of marriage to his death as his
lawful wife, and is now his dependent widow, and she asks that the 4th Qr. Pension, 1929,
due and unpaid be paid to her.

Sworn to and subscribed before me this 5th day of December, 1929.
Joseph Massey Ordinary
Cherokee County Georgia Emma Crisler (L. S.)
(Seal of Ordinary)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Cherokee County.

Personally before me comes Miss Ollie McClure, who
on oath says that he knew B. F. Crisler while in life
and that he knows Mrs. Georgia Emma Crisler, the
above applicant; and knows that the said B. F. Crisler
and Georgia Emma McClure Crisler were in due form of law married in the County
of Cherokee in the State of Georgia on
the 21 day of Feb., 1882, and that they were residing
together as husband and wife at the time of his death on the nineteenth day of
March, 1929, and that she is his dependent widow.

Sworn to and subscribed before me this 5th day of December, 1929.
Joseph Massey Ordinary
Cherokee County Ollie McClure
(Seal of Ordinary)

INSTRUCTIONS:

1st. Proof of marriage must be made.
2nd. Do not use the enormously large form of marriage certificate in common vogue throughout the State, suitable only for framing. Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage license is the proper thing.
3rd. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the seals affixed, and that back of application, when folded, is filed in.
4th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the payment.
5th. Return this application with your final settlement to the Pension Department.
6th. The widow or person holding her proper power-of-attorney receipts for this pension by signing name, as widow, opposite the name of husband on the soldier pay roll.
7th. Only one pension is covered by this application. Take another application, on the white blank, to admit widow to rolls in her own right.

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Cherokee County.

Personally before me comes B. F. Crisler, who on oath says that he knew B. F. Crisler while in life and that he knows Mrs. B. F. Crisler, the above applicant; and knows that the said B. F. Crisler and Mrs. B. F. Crisler were in due form of law married in the County of Cherokee in the State of Georgia on the 21st day of February, 1882, and that they were residing together as husband and wife at the time of his death on the 19 day of March, 199, and that she is his dependent widow.

Sworn to and subscribed before me this 29 day of August, 1929.

Jacob Massey
Cherokee
(Seal of Ordinary)

Ordinary } Ollie McClure
County }

INSTRUCTIONS:

- 1st. Proof of marriage must be made.
- 2nd. Do not use the enormously large form of marriage certificate in common vogue throughout the State, suitable only for framing. Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage license is the proper thing.
- 3rd. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the seals affixed, and that back of application, when folded, is filled in.
- 4th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the payment.
- 5th. Return this application with your final settlement to the Pension Department.
- 6th. The widow or person holding her proper power-of-attorney receives for this pension by signing name, as widow, opposite the name of husband on the soldier pay roll.
- 7th. Only the one pension is covered by this application. Take another application, on the white blank, to admit widow to rolls in her own right.

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Cherokee County.

Personally before me comes Miss Ollie McClure, who on oath says that he knew B. F. Crisler while in life and that he knows Mrs. Georgia Emma Crisler, the above applicant; and knows that the said B. F. Crisler and Georgia Emma McClure Crisler were in due form of law married in the County of Cherokee in the State of Georgia on the 21 day of Feb., 1882, and that they were residing together as husband and wife at the time of his death on the nineteenth day of March, 1929, and that she is his dependent widow.

Sworn to and subscribed before me this 5th day of December, 1929.

Jacob Massey
Cherokee
(Seal of Ordinary)

Ordinary } Ollie McClure
County }

INSTRUCTIONS:

- 1st. Proof of marriage must be made.
- 2nd. Do not use the enormously large form of marriage certificate in common vogue throughout the State, suitable only for framing. Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage license is the proper thing.
- 3rd. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the seals affixed, and that back of application, when folded, is filled in.
- 4th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the payment.
- 5th. Return this application with your final settlement to the Pension Department.
- 6th. The widow or person holding her proper power-of-attorney receives for this pension by signing name, as widow, opposite the name of husband on the soldier pay roll.
- 7th. Only the one pension is covered by this application. Take another application, on the white blank, to admit widow to rolls in her own right.

JACOB MASSEY
ORDINARY CHEROKEE COUNTY
CANTON, GEORGIA

Oct 8th 1929

Hon. John C. Clerk, Commissioner of Pension,
Atlanta, Ga.

Dear Sir: RE: Application Mrs. B. F. Crisler.

I have your in regard to above and in reply beg to advise that I was sure I carried this application with me when I went to your office, but in making a search I find it here. Am enclosing same to you.

Sorry I made the mistake and caused you this trouble.

Yours very truly.

Jacob Massey
Ordinary.

NAME Crisler, B. F. YEAR 1920 COUNTY Cherokee.

WHEN AND WHERE BORN? A resident of Georgia all my life,

ENLISTED WHEN AND WHERE? March 22nd, 1862, Atlanta, Georgia.

RANK:

COMPANY AND REGIMENT? Company E, 22nd Georgia Regiment.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? April 23rd, 1864, wounded and was sent to hospital. Furloughed home but returned to my command at expiration of said furlough and was put on the retired list. I then returned to my home.

CAPTURED, WHEN AND WHERE? September 30th, 1862 at hospital in Warrenton, Virginia.

RELEASED: Exchanged October or November, 1862.

WHEN AND WHERE SURRENDERED? Command surrendered at Petersburg, Virginia, April, 1865.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? I was at home on retired list. Left my command at Manassas, Virginia, April 23, 1862.

DIED, WHEN AND WHERE?

BURIED:

WITNESSES: D. B. Smith - same company - - - No data.
SB.

Oct 8th 1929

Dear Sir: RE; Application Mrs.B.F.Crisler,

Sorry I made the mistake and caused you this trouble.

Yours very truly.

Isaac Mossey
Ordinary.

RANK:

COMPANY AND REGIMENT?

Company E, 22nd Georgia Regiment.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? April 23rd, 1864, wounded and was sent to hospital. Furloughed home but returned to my command at expiration of said furlough and was put on the retired list. I then returned to my home.

CAPTURED, WHEN AND WHERE?

September 30th, 1862 at hospital in

Warrenton, Virginia.

Exchanged October or November, 1862.

WHEN AND WHERE SURRENDERED?

Command surrendered at
Petersburg, Virginia, April, 1865.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? I was at home on
retired list. Left my command at Manassas, Virginia, April 23, 18

DIED, WHEN AND WHERE?

BURIED:

WITNESSES: D. B. Smith - same company - - - No date.

SB.

I hereby certify that the above is a correct transcript from the Records of Capt. Geo. E. 22nd Co. Regt.

Station Madison Station 17

Date April 23 1864

I R. K. 10th Genit
Cody to 8th na En

P. H. Bird

Fig. 1.

1910

1512

5012

3

10

1921
Alfred

Wm. C. C.

Yours,

March 1880

Parsons, J. A.

Cap. 16. 12

21.

Wm. L. Brown

1860

2

"Mrs. Goldies" on
in the autumn
in Atlanta being
king's suggestion
admission the same
30th Palace of Granada
August 1866 Mrs.
arrangement for visit
to the University
given the same time
1841 Mrs. Jones to L.
October 1863 Mrs.
since the 27th
1843 Ormonde's
death in 1843 Mrs.
the same Mrs. G.
return 23rd April

I certify that the above is a correct transcript from the Records of Capt.
Co. E. 22^d Co. Regt.

Station Madison Station 17

Date April 23 1864

I. R. G. no 10^a Serie
Volundy 60^a 8^a na Su

^{reimburse about}
I hereby certify that the above is a correct transcript from the Records of Capt.
Geo. E. 22nd Co. Regt.

Station Madison Station 19

Date April 23 1864

J. W. Kneel 10th Senior
Company 60th Ia. Inf.

BAD COPY***OR**LIGHT PRINT

POWER OF ATTORNEY. STATE OF GEORGIA.

Know all Men by these Presents, That I Geo. W. Harrison

County, Cherokee State of Georgia, do hereby appoint

of Cherokee County, Geo. W. Harrison my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the State of Georgia, and to execute and deliver to me, or to my assigns, a receipt for the same, as stated in the foregoing affidavit, hereby authorizing my said attorney to receive in my name, and to execute and deliver to me, or to my assigns, a receipt 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 1st day of October, 1893.

Applied in the presence of us:

Wm. A. Brown Cherokee

Send money to me as follows, by check to Geo. W. Harrison P. O. Cherokee County, Georgia.

1893.

Broff, Ira P.

No. 570 Application for Allowance

For the Year Ending October 31, 1893.

Applicant, Geo. W. Harrison
County, Cherokee
Amount, 50
Date of Warrant, 31
Entered on record, 31

1893.
Secretary of the Department.

WARRANT HANDED
W. H. Harrison
Geo. W. Harrison, State Printer, Atlanta.

STATE OF GEORGIA
For the purpose of receiving money

POWER OF ATTORNEY.

STATE OF GEORGIA.

Know all Men by these Presents, That John P. Bland of Cherokee County, State of Georgia, do hereby appoint

John P. Bland my true and lawful attorney in fact for me and in my name, to receive and collect for whatever and for any sum 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 10th day of October, 1893.

Witnessed in the presence of us, John P. Bland and John P. Bland Clerk of the County of Cherokee, Georgia.

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

Cherokee
1893.

Broft, Ira P.

No. 57
Application for Allowance

For the Year Ending October 24, 1893.

Applicant, John P. Bland
County, Cherokee

Amount, 50

Date of Warrant, 31

Entered on record, 31

1893.

Secretary Executive Department.

WARRANT HANDED TO John P. Bland

Geo. W. Harrison, State Printer, Atlanta.

STATE OF GEORGIA
FOR VERNER H. HARRISON, 1893

TORNEY.

my true and lawful attorney in fact, for
ever amount of money I may be entitled to
received as aforesaid in the military service of
the foregoing affidavits, hereby authorizing
him to set my hand and seal, this
1893.

[L. S.]

P. O.

County, Cherokee
Amount, 50
Date of Warrant, 3/27
Entered on record, 3/27
1893.
WARRANT HANDED TO
Secretary Enrolled Department.
Geo. W. Harrison, State Printer, Atlanta.

BAD COPY***OR**LIGHT PRINT

POWER OF ATTORNEY. STATE OF GEORGIA.

County, Cherokee
Know all Men by these Presents, That I, John P. Croft
of Cherokee County, State of Georgia, do hereby appoint
John P. Croft 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
1893.

Executed in the presence of us:

John P. Croft
DIRECTION.

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

Cherokee

1893.

Croft, John P.

No. 578
Application for Allowance
For the Year Ending October 31, 1893.

John P. Croft
Applicant, John P. Croft
County, Cherokee
Amount, 50
Date of Warrant, 3/27
Entered on record, 3/27
1893.

WARRANT HANDED TO
Secretary Enrolled Department.
Geo. W. Harrison, State Printer, Atlanta.

STATE OF GEORGIA.
FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

BAD COPY***OR**LIGHT PRINT

POWER OF ATTORNEY.

STATE OF GEORGIA, }

Cherokee County, }

Know all Men by these Presents, That I John P. Craft
of Cherokee County, State of Georgia, do hereby appoint

John P. Craft 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
12th day of March, 1893.

Executed in the presence of us: John P. Craft [L.S.]

John P. Craft

DIRECTION.

Send money to me as follows, by draft to Cherokee County, Georgia.

John P. Craft

Cherokee
1893.
Craft, John P.
Application for Allowance
No. 570
For the Year Ending October 31, 1893.
Applicant, John P. Craft
County, Cherokee
Amount, 50
Date of Warrant, 31
Entered on record, 31
1893.
WARRANT HANDED TO
Secretary Election Department.
Geo. W. Harrison, State Printer, Atlanta.

STATE OF GEORGIA:
FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

BAD COPY***OR**LIGHT PRINT

POWER OF ATTORNEY

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

STATE OF GEORGIA,

Cherokee County.

I, *Allen B. Croft* Ordinary of said County,
do certify that I am well acquainted with *Samuel P. Croft* 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 resides in this County.

I further certify that
before whom the foregoing affidavits were made and power of attorney was signed, is a
of said County, and the said affidavits and
signatures thereto are genuine.

Given under my official signature and seal, this *18* day of *March*, 1893.

Allen B. Croft

Ordinary *Cherokee* County.

EDWARD CLAYTON

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

Know all Men by these Presents, That I,

Sam. P. Croft

of *Cherokee*
William H. Harrison

County, State of Georgia, do hereby appoint
of *Atlanta Ga.* my true and lawful attorney in fact, for
me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the
State of Georgia 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 *30* *th*

day of *February*, 1894.

Sam. P. Croft [L. S.]

Executed in the presence of us

A. B. Croft, Ordinary

DIRECTIONS.

Send money to me as follows, by

Cherokee to *A. B. Croft, Ordinary*, *Wanton* P. O.

Cherokee County, Georgia. *Sam. P. Croft*

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

Know all Men by these Presents, That I, *Sam. P. Croft*

County, State of Georgia, do hereby appoint *Richard Johnson* 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 *4* *th*

day of *Feb*, 1895.

Sam. P. Croft [L. S.]

Executed in presence of us

A. B. Croft, Ordinary

DIRECTIONS.

Send money to me as follows, by *Cherokee* to *A. B. Croft, Ordinary*

Cherokee to *Wanton* P. O.

Cherokee County, Georgia. *Sam. P. Croft*

Cherokee Co
Croft, Sam. P.
(For Those Already Enrolled.)

No. *438*

Soldier's Pension.
1894.

Name *Sam. P. Croft*
County *Cherokee*
Disability *Head & neck*
Amount, \$ *50*
3/17
1894.
W. H. HARRISON,
Secretary Executive Department.
WARRANT HANDLED TO
Sam. P. Croft
Geo. W. Harrison, State Printer, Atlanta.

Cherokee Co
Croft, Sam. P.
(For Those Already Enrolled.)

No. *548*

SOLDIER'S PENSION.
1895.

Name *Sam. P. Croft*
County *Cherokee*
Disability *Throat*
Amount, \$ *50*
3/4
1895.
RICHARD JOHNSON,
Secretary Executive Department.
WARRANT HANDLED TO
att
W. H. H.
Geo. W. Harrison, State Printer, Atlanta.

Shenandoah Co
Croft, Ira C.
 (For Those Already Enrolled.)
 No. *438*
Soldier's Pension.
1894.
 Name *Ira C. Croft*
 County *Shenandoah*
 Disability *Head is sore*
 Amount \$ *50*
5/17
 1894.
W. H. HARRISON,
Secretary Executive Department.
 WARRANT HANDED TO
M. H.
Gen. W. Harrison, State Printer, Alaska.

Shenandoah Co
Croft, Ira C.
 (For Those Already Enrolled.)
 No. *848*
SOLDIER'S PENSION.
1895.
 Name *Ira C. Croft*
 County *Shenandoah*
 Disability *Throat*
 Amount \$ *50*
3/4
 1895.
RICHARD JOHNSON,
Secretary Executive Department.
 WARRANT HANDED TO
att
Gen. W. Harrison, State Printer, Alaska.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Shenandoah County.

PERSONALLY appears *Ira C. Croft* of
 County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
 and resident of said State, and has resided therein continuously ever since the *20th*
 day of *July* 1877; 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 *D*, of *28th* Regiment
 of *Georgia* Volunteers *Volunteer*'s Brigade; that whilst engaged in
 such military service at the battle of *Seven Pines* in the State
 of *Virginia* on the *2d* day of *June* 1862, he was
 wounded as follows: *By gunshot under left eye*
and lost in head 19 years and working
out on in side of throat having a running
sores

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887,
 and the acts amendatory thereof, and makes application for the allowance to which he is
 entitled for the year ending October 26th, 1894. I have heretofore been allowed a pension of
\$50 dollars, for the year 1893

Sworn to and subscribed before me, this, the *20th* day of *February* 1894. *Ira C. Croft*
D. C. Berry, Ordinary

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

STATE OF GEORGIA,
Shenandoah County.

I, *D. C. Berry* Ordinary of said County,
 do certify that I am well acquainted with *Ira C. Croft* 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 *20th*
 day of *February* 1894.



Ordinary

D. C. Berry
Shenandoah County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Shenandoah County.

PERSONALLY appears *Ira C. Croft* of *Shenandoah*
 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 *1837*; 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 *D*, of *28th* Regiment
 of *Georgia* Volunteers, *Volunteer*'s Brigade; that whilst engaged in
 such military service at the battle of *Seven Pines* in the State
 of *Virginia* on the *2d* day of *June* 1862, he was
 wounded as follows: *Gunshot Ball entering under left*
eye remaining in head 19 years and taken out on
in side of throat having a running sore

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887,
 and the acts amendatory thereof, and makes application for the allowance to which he is
 entitled for the year ending October 26th, 1895. I have heretofore been allowed a pension
 of *\$50* dollars, for the year 1894

Sworn to and subscribed before me, this, the *20th* day of *February* 1895. *Ira C. Croft*
D. C. Berry, Ordinary

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

STATE OF GEORGIA,
Shenandoah County.

I, *D. C. Berry* Ordinary of said County,
 do certify that I am well acquainted with *Ira C. Croft* 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 *20th*
 day of *February* 1895.



Ordinary of *Shenandoah* County.

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 1893

Sworn to and subscribed before me, this, the 20th day of February, 1894.

D. L. Berry, Ordinary

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

STATE OF GEORGIA,

Cherokee County.

I, *D. L. Berry*

Ordinary of said County, do certify that I am well acquainted with *Geo. P. Croft* 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 20th day of February, 1894.



Ordinary

D. L. Berry
Cherokee County.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26th, 1895. I have heretofore been allowed a pension of dollars, for the year 1894

Sworn to and subscribed before me, this, the 20th day of February, 1895.

D. L. Berry, Ordinary

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

STATE OF GEORGIA,

Cherokee County.

I, *D. L. Berry*

Ordinary of said County, do certify that I am well acquainted with *Geo. P. Croft* 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 20th day of February, 1895.



Ordinary *D. L. Berry* County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, *Geo. P. Croft* hereby authorize *Wm. H. Berry* of *Cherokee* County to receive and receipt for the pension paid hereon and request that he remit same to by *me* at *Woodstock, Ga.*

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 4th day of Feb., 1896.

Executed in presence of us

Geo. P. Croft [L. S.]
D. L. Berry ordinary

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, *Geo. P. Croft* hereby authorize *Wm. H. Berry* of *Cherokee* County to receive and receipt for the pension paid hereon and request that he remit same to by *me* at *Woodstock, Ga.*

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 6th day of Feb., 1897.

Executed in presence of

Geo. P. Croft [L. S.]
D. L. Berry ordinary

<i>Croft, Geo. P.</i>	No. 2707	SOLDIER'S PENSION.	
<i>Cherokee Co.</i>		1896.	
(For Those Already Enrolled.)			
Name <i>Geo. P. Croft</i>	County <i>Cherokee</i>	Disability <i>Wound & Throat</i>	Amount, \$50.00 Dollars
			3/4
			1896
			RICHARD JOHNSON,
			Secretary Executive Department.
			WARRANT HANDLED TO
			<i>Wm. H. Berry</i>
			Geo. W. Harrison, State Engineer, Atlanta, Ga.

<i>Croft, Geo. P.</i>	No. 2054	SOLDIER'S PENSION.	
<i>Cherokee County</i>		1897.	
(For Those Already Enrolled.)			
Name <i>Geo. P. Croft</i>	County <i>Cherokee</i>	Disability <i>Wound & Throat</i>	Amount, \$50.00
			2/24
			1897.
			RICHARD JOHNSON,
			Secretary Executive Department.
			WARRANT HANDLED TO
			<i>Wm. H. Berry</i>
			Geo. W. Harrison, State Engineer, Atlanta, Ga.

broff, June P
Cherokee Co.
ACT OF MARCH, 1862.
(For Those Already Enrolled.)

No. 2707

SOLDIER'S PENSION.
1896.

Name *Ans. broff*
County *Cherokee*

Disability *Wound & Throat*

Amount, \$ *50.00* Dollars
3/4 1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDLED TO

Uly

Geo. W. Harrison, State Printer, Atlanta.

Ans. broff
Cherokee Co.
ACT OF MARCH, 1862.
(For Those Already Enrolled.)

No. 20844

INVALID

SOLDIER'S PENSION.
1897.

Name *Ans. P. broff*

County *Cherokee*

Disability *Wound & Throat*

Amount, \$ *50.00*

2/24 1897.

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDLED TO

Uly

Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears *Ans. P. broff* 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 *1862*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *D*, of *24th* Regiment of *Georgia* Volunteers, *Calhoun's* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *7th* day of *June* 1862, he was wounded, injured or diseased as follows:

Wound under left eye. Ball remaining in head 12 years & losing it. Remaining since

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 20th, 1896. I have heretofore as a resident of *Cherokee* county been allowed a pension of *Twenty* dollars, for the year 1896.

Sworn to and subscribed before me, this, the

4th day of *July*, 1896.

A. L. Boone ordinary.

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

STATE OF GEORGIA,

Cherokee County.

I, *A. L. Boone* Ordinary of said County, do certify that I am well acquainted with *Ans. broff* 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 *4th* day of *July*, 1896.



Ordinary *Cherokee* County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears *Ans. P. broff* 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 *1862*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *D*, of *24th* Regiment of *Georgia* Volunteers, *Calhoun's* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *7th* day of *June* 1862, he was wounded, injured or diseased as follows:

Wound under left eye. Ball remaining in head 12 years & losing it. Remaining since

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 20th, 1897. I have heretofore under said law as a resident of *Cherokee* county been allowed an invalid pension of *Twenty* Dollars, for the year 1896.

Sworn to and subscribed before me, this, the

6th day of *July*, 1897.

Ans. P. broff POST OFFICE

A. L. Boone ordinary.

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

STATE OF GEORGIA,

Cherokee County.

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

Given under my official signature and seal, this *6th* day of *July*, 1897.



Ordinary *Cherokee* County.

and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1896. I have heretofore as a resident of Cherokee county been allowed a pension of \$15.00 dollars, for the year 1895.

Sworn to and subscribed before me, this, the 4th day of Feb, 1896. } Ira P. Croft
A. C. Burn ordy
Notary—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA, }
Cherokee County. }

I, A. C. Burn Ordinary of said County, do certify that I am well acquainted with Ira P. Croft 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 4th day of Feb, 1896.



A. C. Burn
Ordinary Cherokee County.

and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1897. I have heretofore under said law as a resident of Cherokee county been allowed an invalid pension of \$15.00 Dollars, for the year 1896.

Sworn to and subscribed before me, this, the 6th day of Feb, 1897. } Ira P. Croft
A. C. Burn ordy
Notary—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA, }
Cherokee County. }

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

Given under my official signature and seal, this 6th day of Feb, 1897.



A. C. Burn
Ordinary Cherokee County.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
Cherokee County. }

I, Ira P. Croft hereby authorize Wm. A. Wright of Atlanta, Ga

to receive and receipt for the pension paid hereon and request that he remit same to A. C. Burn, ordy by check at Benton Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 4th day of Feb, 1896.

Ira P. Croft [L. S.]
Executed in presence of
A. C. Burn, ordy

POWER OF ATTORNEY.

STATE OF GEORGIA, }
Cherokee County. }

I, Ira P. Croft hereby authorize Wm. A. Wright of Atlanta Ga

to receive and receipt for the pension paid hereon and request that he remit same to A. C. Burn ordy by check at Benton Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 4th day of Feb, 1896.

Ira P. Croft [L. S.]
Executed in presence of
A. C. Burn, ordy

Croft, Ira P.
Cherokee
ACT OF OCT. 1895.
(For Those Already Enrolled.)
No. 2124
INVALID
SOLDIER'S PENSION.
1898.
Name Ira P. Croft
County Cherokee
Disability Disability, Blood secured
Amount, \$ 60.00
2/16 1898.
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT HANDED TO
Wm
GEO. W. JARVIS, STATE PRINTER, ATLANTA.

Croft, Ira P.
Cherokee
ONE SECTION 120.
(For Those Already Enrolled.)
No. 2458
INVALID
SOLDIER'S PENSION.
1899.
Name Ira P. Croft
County Cherokee
Disability Disability, Blood secured
Amount, \$ 60.00
2/16 1899.
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT HANDED TO
Wm
GEO. W. JARVIS, STATE PRINTER, ATLANTA.

Croft, Ira P.
 ACT OF OCT. 1887.
 (For Those Already Enrolled.)
 No. *2124*
INVALID
SOLDIER'S PENSION.
1898.
 Name *Ira P. Croft*
 County *Cherokee*
 Disability *Head wound*
 Amount, \$ *50.00*
2/16
 1898.
 RICHARD JOHNSON,
 Commissioner of Pensions.
 WARRANT HANDED TO
W. W.
 GEO. W. HARRISON, STATE PRINTER, ATLANTA.

No data
Croft, Ira P.
 ACT OF OCT. 1887.
 (For Those Already Enrolled.)
 No. *2458*
INVALID
SOLDIER'S PENSION.
1899.
 Name *Ira P. Croft*
 County *Cherokee*
 Disability *Head wound*
 Amount, \$ *50.00*
2/16
 1899.
 RICHARD JOHNSON,
 Commissioner of Pensions.
 WARRANT HANDED TO
W. W.
 GEO. W. HARRISON, STATE PRINTER, ATLANTA.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears *Ira P. Croft* 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 *1864*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *B*, of *28*th Regiment of *Volunteers*, *60*th *Brigade*; that whilst engaged in such military service in the State of *Georgia*, on the *3rd* day of *June*, 1862, he was wounded, injured or diseased as follows:

Shot in right eye, ball coming out of an inside of throat leaving a running ulcer

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 20th, 1898. I have heretofore under said law as a resident of *Cherokee* county been allowed an invalid pension of *50* Dollars, for the year 1897.

Sworn to and subscribed before me, this, the *1st* day of *Feb*, 1898. *Ira P. Croft* POST-OFFICE

A. B. Curran ordinary

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

STATE OF GEORGIA,

Cherokee County.

I, *A. B. Curran* Ordinary of said County, do certify that I am well acquainted with *Ira P. Croft* 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 *4th* day of *Feb*, 1898.

A. B. Curran
 Ordinary *Cherokee* County.



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears *Ira P. Croft* 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 *1864*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *B*, of *28*th Regiment of *Volunteers*, *60*th *Brigade*; that whilst engaged in such military service in the State of *Georgia*, on the *3rd* day of *June*, 1862, he was wounded, injured or diseased as follows:

Shot in right eye, ball coming out of an inside of throat leaving a running ulcer

Deponent makes application for the pension to which he is entitled for the year ending October 20th, 1899. I have heretofore under said law as a resident of *Cherokee* County been allowed an invalid pension of *50* Dollars, for the year 1898.

Sworn to and subscribed before me, this, the *1st* day of *Feb*, 1899. *Ira P. Croft* POST OFFICE

A. B. Curran ordinary

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

STATE OF GEORGIA,

Cherokee County.

I, *A. B. Curran* Ordinary of said County, do certify that I am well acquainted with *Ira P. Croft* 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 *15th* day of *Feb*, 1899.

A. B. Curran
 Ordinary *Cherokee* County.



resident of Charlottesville county been allowed an invalid pension of Fifty Dollars, for the year 1897.
Sworn to and subscribed before me, this, the 14 day of Feb, 1898. } POST-OFFICE
A. C. Burns ordinary
Not-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,
Charlottesville County.

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

Given under my official signature and seal, this 14 day of Feb, 1898.



A. C. Burns
Ordinary Charlottesville County.

resident of Charlottesville County been allowed an invalid pension of Fifty Dollars, for the year 1898.
Sworn to and subscribed before me, this, the 15 day of Feb, 1899. } POST-OFFICE
A. C. Burns ordinary
Not-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,
Charlottesville County.

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

Given under my official signature and seal, this 15 day of Feb, 1899.



A. C. Burns
Ordinary Charlottesville County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Charlottesville County.

I, Ira P. Graft hereby authorize W. H. Minnett of Charlottesville to receive and receipt for the pension paid hereon and request that he remit same to me by check at Charlottesville

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 14 day of Feb, 1900.

Ira P. Graft [L. S.]

Executed in presence of

W. H. Minnett

POWER OF ATTORNEY.

STATE OF GEORGIA,
Charlottesville County.

I, Ira P. Graft hereby authorize A. C. Burns of Charlottesville to receive and receipt for the pension paid hereon and request that he remit same to me by check at Charlottesville

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 14 day of Feb, 1901.

Ira P. Graft [L. S.]

Executed in presence of

W. H. Minnett

COURT SECTION 120
(For Those Already Enrolled.)

No. 3071

**INVALID
SOLDIER'S PENSION.
1900.**

Name Ira P. Graft
County Charlottesville
Disability Disability
Amount, \$ 50.00
Warrant issued Jan 13 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

W. H. Minnett
Geo. W. Harrison, State Printer, Atlanta.

W. H. Minnett

COURT SECTION 120
(For Those Already Enrolled.)

No. 3458

**DISABLED
SOLDIER'S PENSION.
1901.**

Name Ira P. Graft
County Charlottesville
Disability Disability
Amount, \$ 50.00

2/12 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

W. H. Minnett
Geo. W. Harrison, State Printer, Atlanta.

W. H. Minnett

Craft, Ira P.
Cherokee Co.
CODE SECTION 190.
(For Those Already Enrolled.)
No. *8471*
INVALID
SOLDIER'S PENSION.
1900.
Name *Ira P. Craft*
County *Cherokee*
Disability *head & breast injury*
Amount, \$ *50.00*
Warrant issued *Nov 13 1900.*
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDLED TO
Warrant
Geo. W. Harrison, State Printer, Atlanta.
W. W. Carter

Craft, Ira P.
Cherokee Co.
CODE SECTION 190.
(For Those Already Enrolled.)
No. *2458*
DISABLED
SOLDIER'S PENSION.
1901.
Name *Ira P. Craft*
County *Cherokee*
Disability *head & breast injury*
Amount, \$ *50.00*
2/12 1901.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDLED TO
Warrant
Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears *Ira P. Craft* of *Cherokee* County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State and County, and has resided therein continuously ever since the day of *1882*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *D*, of *24*th Regiment of *Volunteers*, *5th* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *8*th day of *June* 1862, he was wounded, injured or diseased as follows:

bullet wound under left eye

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1900. I have heretofore under said law as a resident of *Cherokee* County been allowed an invalid pension of *\$50.00* Dollars, for the year 1899.

Sworn to and subscribed before me, this, *Ira P. Craft* day of *Aug* 1900. POST OFFICE

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

STATE OF GEORGIA,

Cherokee County.

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

Given under my official signature and seal, this *14* day of *Aug* 1900.

Ordinary *Cherokee* County.



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears *Ira P. Craft* 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 *1882*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *D*, of *24*th Regiment of *Volunteers*, *5th* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *8*th day of *June* 1862, he was wounded, injured or diseased as follows:

bullet wound under left eye going on head 15 years passing out looking running across in the street

Deponent makes application for the pension to which he is entitled for year ending October 26th, 1901. I have heretofore under said law as a resident of *Cherokee* County been allowed an invalid pension of *\$50.00* Dollars, for the year 1900.

Sworn to and subscribed before me, this, *Ira P. Craft* day of *Aug* 1901. Postoffice

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

STATE OF GEORGIA,

Cherokee County.

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

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

Ordinary *Cherokee* County.



ending October 26th, 1900. I have heretofore under said law as a resident of Cherokee County been allowed an invalid pension of Five Dollars, for the year 1895.
Sworn to and subscribed before me, this, the 2nd day of June, 1900. POST OFFICE Cherokee

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

STATE OF GEORGIA,

Cherokee County.

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

Given under my official signature and seal, this 6th

day of June, 1900.



Ordinary Cherokee County.

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

Sworn to and subscribed before me, this the 14th day of July, 1901. Postoffice Cherokee

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

STATE OF GEORGIA,

Cherokee County.

I, A. B. Lindsey Ordinary of said County, do certify that I am well acquainted with J. P. Croft 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 14th

day of July, 1901.



Ordinary Cherokee County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cherokee County.

I, J. P. Croft hereby authorize A. B. Lindsey of Cherokee to receive and receipt for the pension paid hereon and request that he remit same to me by mail at Cherokee.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 16 day of July, 1902.

J. P. Croft [L. S.]

Executed in presence of

A. B. Lindsey

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cherokee County.

I, J. P. Croft hereby authorize Mr. A. W. Wright of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to A. B. Lindsey by check at Cherokee.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 16 day of July, 1903.

J. P. Croft [L. S.]

Executed in presence of

A. B. Lindsey

CODER SECTION 100
(FOR THOSE ALREADY ENROLLED.)

No. 2106

DISABLED

**SOLDIER'S PENSION
1902.**

Name J. P. Croft
County Cherokee
Co. 1st Regiment 24th
Disability Wounded in battle
Amount, \$ 57.

1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

Croft

JOHN W. LINDSEY, State Printer, Atlanta.

CODER SECTION 100
(FOR THOSE ALREADY ENROLLED.)

No. 2107

DISABLED

**SOLDIER'S PENSION
1903.**

Name J. P. Croft
County Cherokee
Co. 1st Regiment 24th
Disability Wounded in battle
Amount, \$ 57.

1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

Croft

JOHN W. LINDSEY, State Printer, Atlanta.

Croft, J. P.
Cherokee Co.

CONFIRMATION FOR
(FOR THOSE ALREADY ENROLLED.)

No. 2106

DISABLED

SOLDIER'S PENSION 1902.

Name J. P. Croft
County Cherokee
Co. D. Regiment 28th
Disability (wound in head)
Amount, \$57. 24 1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harwood, State Printer, Atlanta.

14-24-12

Croft, J. P.
to broken Co.

CONFIRMATION FOR
(FOR THOSE ALREADY ENROLLED.)

No. 2278

DISABLED

SOLDIER'S PENSION 1903.

Name J. P. Croft
County Cherokee
Co. D. Regiment 28th
Disability Head wound
Amount \$50. 00 1/16 1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harwood, State Printer, Atlanta.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County,

Personally appears J. P. Croft 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 1833; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company D, of 28th Regiment of 7a Volunteers, Calhoun's Brigade; that whilst engaged in such military service in the State of Ga, on the 2 day of June 1862, he was wounded, injured or diseased as follows:

Wound in left eye resulting in the loss of sight, and in the throat and having a running ulcer.

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1902. I have heretofore, under said law, as a resident of Cherokee County, been allowed an invalid pension of \$17. 00 Dollars, for the year 1901.

Sworn to and subscribed before me, this 10 day of June 1902. J. P. Croft
x C. Croft Post-office Woodstock Ga

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

STATE OF GEORGIA,

Cherokee County,

I, A. C. Croft Ordinary of said County,

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

Given under my official signature and seal, this 10 day of June 1902.

A. C. Croft Ordinary Cherokee County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County,

Personally appears J. P. Croft 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 1833; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company D, of 28th Regiment of 7a Volunteers, Calhoun's Brigade; that whilst engaged in such military service in the State of Ga, on the 2 day of June 1862, he was wounded, injured or diseased as follows:

Wound in left eye resulting in the loss of sight, and in the throat and having a running ulcer.

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1903. I have heretofore, under said law, as a resident of Cherokee County, been allowed an invalid pension of \$17. 00 Dollars, for the year 1902.

Sworn to and subscribed before me, this 10 day of June 1903. J. P. Croft
x C. Croft Post-office Woodstock Ga

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

STATE OF GEORGIA,

Cherokee County,

I, A. C. Croft Ordinary of said County,

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

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

A. C. Croft Ordinary Cherokee County.

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

Cherokee County, been allowed an invalid pension of
\$10 Dollars, for the year 1901.
Sworn to and subscribed before me, this the 10 day of January 1902. Post-office Woodstock Ga
A.C. Carter

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

STATE OF GEORGIA,

Cherokee County.

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

Given under my official signature and seal, this 10
day of January 1902.



A.C. Carter Ordinary Cherokee County.

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

ending October 26th, 1903. I have heretofore, under said law, as a resident of
Cherokee County, been allowed an invalid pension of
10 Dollars, for the year 1902.

Sworn to and subscribed before me, this the 10 day of January 1903. Post-office Woodstock Ga
A.C. Carter

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

STATE OF GEORGIA,

Cherokee County.

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

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



A.C. Carter Ordinary Cherokee County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cherokee County.

I, J.P. Croft hereby authorize
Wm. S. Wright of Atlanta Ga.
to receive and receipt for the pension paid hereon, and request that he remit same to
A.C. Carter by check
at Atlanta Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 8
day of January 1904.

Executed in presence of

Wm. S. Wright

—[L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cherokee County.

I, J.P. Croft hereby authorize
Wm. S. Wright of Atlanta Ga.
to receive and receipt for the pension paid hereon, and request that he remit same to
by

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 10
day of January 1905.

Executed in the presence of

Wm. S. Wright

—[L. S.]

Croft, J.P.
Cherokee Co.
(FOR THOSE ALREADY ENROLLED.)

No. 2261

DISABLED
SOLDIER'S PENSION
1904.

Name J.P. Croft
County Cherokee
Co. B Regiment 28th
Disability Wound received
Amount, \$50.00
FEB 18 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

Wm. S. Wright
Geo. W. Harkins, Notary Public, Atlanta.

Wm. S. Wright

Croft, J.P.
Cherokee Co.
(FOR THOSE ALREADY ENROLLED.)

No. 3232

DISABLED
SOLDIER'S PENSION
1905.

Name J.P. Croft
County Cherokee
Co. B Regiment 28th
Disability Wound received
Amount, \$50.00
FEB 23 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

Wm. S. Wright
Geo. W. Harkins, Notary Public, Atlanta.

Craft, Ira P.
Cherokee Co.
 (FOR THOSE ALREADY ENROLLED.)
 No. *2261*
 DISABLED
SOLDIER'S PENSION
1904.
 Name *Ira P. Craft*
 County *Cherokee*
 Co. *E* Regiment *28th*
 Disability *Head, severed*
 Amount, \$80 ⁰⁰/₁₀₀
 FEB 18 1904.
 JOHN W. LINDSEY,
 Commissioner of Pensions
 WARRANT HANDLED TO
Andy
 Gen. W. Harrison, State Printer, Atlanta.

Craft, Ira P.
Cherokee Co.
 (FOR THOSE ALREADY ENROLLED.)
 No. *3232*
 DISABLED
SOLDIER'S PENSION
1905.
 Name *I. P. Craft*
 County *Cherokee*
 Co. *E* Regiment *28th*
 Disability *Head, severed*
 Amount, \$50 ⁰⁰/₁₀₀
 FEB 23 1905.
 JOHN W. LINDSEY,
 Commissioner of Pensions
 WARRANT HANDLED TO
9
 Gen. W. Harrison, State Printer, Atlanta.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears *Ira P. Craft* 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 *1885*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *B*, of *28th* Regiment of *Georgia* Volunteers *Calhoun's* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *8th* day of *June* 1862, he was wounded, injured or diseased as follows: *gunshot shell wound under left eye*

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

Sworn to and subscribed before me, this the *2nd* day of *July* 1904. *Ira P. Craft*
I. B. Lewis Post-office

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

STATE OF GEORGIA,

Cherokee County.

I, *D. C. Connor* Ordinary of said County, do certify that I am well acquainted with *Ira P. Craft* 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 *8th* day of *July* 1904.

D. C. Connor
 Ordinary *Cherokee* County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears *I. P. Craft* 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 *1835*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *D*, of *28th* Regiment of *Georgia* Volunteers *Calhoun's* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *22nd* day of *June* 1862, he was wounded, injured or diseased as follows: *gunshot wound in head at seven pines*

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1905. I have heretofore, under said law, as a resident of *Cherokee* County, been allowed an invalid pension of *Fifty* Dollars, for the year 1904.

Sworn to and subscribed before me, this the *17th* day of *June* 1905. *I. B. Lewis*
W. J. Webb Post-office

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

STATE OF GEORGIA,

Cherokee County.

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

Given under my official signature and seal, this *17th* day of *June* 1905.

W. J. Webb
 Ordinary *Cherokee* County.

NOTE.—Fill all blanks and of Company and Regiment.
 NOTE.—All vouchers and affidavits must bear date after January 1, 1905.

W. HARRISON, STATE PRINTER, ATLANTA.

Croft, J. P.
Cheer Co.

Cross Section 1200
(FOR THOSE ALREADY ENROLLED)

No. 1105

DISABLED
SOLDIER'S PENSION
1906.

Name J. P. Croft
County Cherokee
Co. 28th Regiment
Disability shot in head
Amount \$ 62.00
1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

The Pensioner's Name and Pension Co. J. W. Lindsey, Sec.

No 1105

Croft, J. P.
Cheer Co.

Cross Section 1200
(FOR THOSE ALREADY ENROLLED)

No. 2094

DISABLED
SOLDIER'S PENSION
1907.

Name J. P. Croft
County Cherokee
Co. 28th Regiment
Disability shot in face
Amount \$ 11.00
1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

The Pensioner's Name and Pension Co. J. W. Lindsey, Sec.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Cherokee County.

Personally appears J. P. Croft 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 1871, that he enlisted in the military service of the Confederate States, (or of the State of Ga) during the war between the States, and served as a Private in Company D, of 28th Regiment of Ga Volunteers Colquhoun's Brigade; that whilst engaged in such military service in the State of Ga, on the 2 day of June 1862, he was wounded, injured or diseased as follows: Ga shot wound in head at Seven Pines

Deponent makes application for the pension to which he is entitled for the year ending October 29th, 1906. I have heretofore, under said law, as a resident of Cherokee County, been allowed an invalid pension of Fifty Dollars, for the year 1906.

Sworn to and subscribed before me, this the 6 day of Jan 1906. J. P. Croft Post-Office N. J. Webb Only

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

State of Georgia,

Cherokee County.

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

Given under my official signature and seal, this 6th day of Jan 1906. N. J. Webb Ordinary Cherokee County.

ANY POST SEAL HERE

Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1st, 1906.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Cherokee County.

Personally appears J. P. Croft 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 1871, that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company D, of 28th Regiment of Ga Volunteers Colquhoun's Brigade; that whilst engaged in such military service in the State of Ga, on the 3rd day of June 1862, he was wounded, injured or diseased as follows: Shot in face

Deponent makes application for the pension to which he is entitled for the year ending October 29th, 1907. I have heretofore, under said law, as a resident of Cherokee County, been allowed an invalid pension of Fifty Dollars, for the year 1906.

Sworn to and subscribed before me, this the 17th day of Jan 1907. J. P. Croft Postoffice Newstead

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

State of Georgia,

Cherokee County.

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

Given under my official signature and seal this 17th day of Jan 1907. N. J. Webb Ordinary Cherokee County.

ANY POST SEAL HERE

Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1st, 1907.

personally appears. George 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 1831 that he enlisted in the military service of the Confederate States, (or of the State of Ga) during the war between the States, and served as a Private in Company 28, of 28th Regiment of 44 Volunteers Colquitt's Brigade; that whilst engaged in such military service in the State of Va, on the 2 day of June 1862, he was wounded, injured or diseased as follows:
Guns shot wound in head
at Seven Pines

Deponent makes application for the pension to which he is entitled for the year ending October 28th, 1906. I have heretofore, under said law, as a resident of Cherokee County, been allowed an invalid pension of Fifty Dollars, for the year 1906.

Sworn to and subscribed before me, this the 16 day of Jan 1906. M. J. Webb Only Post-Office Cherokee

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

State of Georgia,

Cherokee County.

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

Given under my official signature and seal, this 6 day of Jan 1906. M. J. Webb

Ordinary Cherokee County.



Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1st, 1906.

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 1831 that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company 28, of 28th Regiment of 44 Volunteers Colquitt's Brigade; that whilst engaged in such military service in the State of Va, on the 2 day of June 1862, he was wounded, injured or diseased as follows:
Shot in face

Deponent makes application for the pension to which he is entitled for the year ending October 28th, 1907. I have heretofore, under said law, as a resident of Cherokee County, been allowed an invalid pension of Fifty Dollars, for the year 1906.

Sworn to and subscribed before me, this the 17 day of Jan 1907. H. P. Dargatzis Postoffice Woodstock
M. J. Webb Only

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

State of Georgia,

Cherokee County.

I, M. J. Webb Ordinary of said County, do certify that I am well acquainted with J. P. Craft 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 17 day of Jan 1907. M. J. Webb

Ordinary Cherokee County.



Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1st, 1907.

Names of laborers for betterment by A. L. Harrison

✓ John H. Andrews amount	\$ 5.00
✓ C. L. Archer	50.00
✓ A. I. Avery	30.00
✓ Allen C. Corru	100.00
✓ Henry L. Garrison	100.00
✓ W. J. Harrison	50.00
✓ William Hill	50.00
✓ John W. James	50.00
✓ A. W. Landrum	30.00
✓ O. W. Perkins	100.00
✓ Henry D. Price	100.00
✓ Thaddeus L. Lott	50.00
✓ T. J. Thresh	50.00
	\$ 815.00

Names of subscribers for publication by DeLamar

✓ John F. Henderson	amount	\$ 5.00
✓ C. L. Archer	"	50.00
✓ A. L. Avery	"	30.00
✓ Allen C. Corru	"	100.00
✓ Henry L. Carnell	"	100.00
✓ W. J. Garrison	"	50.00
✓ William Will	"	50.00
✓ John W. James	"	50.00
✓ A. W. Landrum	"	30.00
✓ O. W. Perkins	"	100.00
✓ Henry G. Paine	"	100.00
✓ Thaddeus L. Larnette	"	50.00
✓ T. J. Threshers	"	50.00
		<u>\$ 815.00</u>

Cronan, Cassie (Mrs)
Cherokee County
 Approved.

WIDOW'S APPLICATION

To Be Put on Roll in Her Own Right When
 Husband Was on the Pension Roll
 of Georgia.

County *Cherokee*
 Name *Mrs Cassie Cronan*
 Widow of *L J Cronan*
 Company _____
 Regiment _____
 Date of Husband's Death *Feb 19th 1925*
 Date of Marriage *December 20 1857*
 Approved *John W. Blank*
28 July 25

John W. Blank
 Commissioner of Pensions.

4/13/1925

Ordinary's Certificate

STATE OF GEORGIA

COUNTY

I, *John W. Blank*

Ordinary of said County, do certify that I

know *Mrs Cassie Cronan*, 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 *J. M. Cronan*, 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 *15* day of *April*, 1925.
 (SEAL OF ORDINARY) *J. W. Blank* Ordinary,
Cherokee County

Instructions.

1. Before any questions are answered the Ordinary and applicant and the witness in the foregoing words:
 "You solemnly swear that you will true answers make to each of the questions asked you and the witness."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who are made before the Ordinary of the County of residence.
4. Attach certified copies of marriage license if obtainable. If not, prove marriage by some person or by gene-
 ral service—because Disabled Pensioners made no proof of service and were not required to do so.
5. Widows of Disabled Pensioners must use the Blue Application Blank and attach and prove full term of hus-
 band's service—because Disabled Pensioners made no proof of service and were not required to do so.

Ordinary of said County, do certify that I
applicant for pension; that she is the person
a bona fide resident of said County since
January 1st, 1920; that I also know
the witness as to
my me before signing the respective affi-
davit, and that they are truthful and trustworthy and their statements are entitled to full faith
and credit.

11 day of April, 1925.
A. K. Boyd
Ordinary,
Newton County

Ordinary of said County, do certify that I
applicant for pension; that she is the person
a bona fide resident of said County since
January 1st, 1920; that I also know
the witness as to
my me before signing the respective affi-
davit, and that they are truthful and trustworthy and their statements are entitled to full faith
and credit.

Ordinary of said County, do certify that I

Approved John W. Clark
4/8/1925
John W. Clark
Commissioner of Pensions.

4/13/1925

Ordinary of said County, do certify that I
applicant for pension; that she is the person
a bona fide resident of said County since
January 1st, 1920; that I also know
the witness as to
my me before signing the respective affi-
davit, and that they are truthful and trustworthy and their statements are entitled to full faith
and credit.

11 day of April, 1925.
A. K. Boyd
Ordinary,
Newton County

Ordinary of said County, do certify that I
applicant for pension; that she is the person
a bona fide resident of said County since
January 1st, 1920; that I also know
the witness as to
my me before signing the respective affi-
davit, and that they are truthful and trustworthy and their statements are entitled to full faith
and credit.

Approved John W. Clark
4/8/1925
John W. Clark
Commissioner of Pensions.

4/13/1925

Ordinary's Certificate

STATE OF GEORGIA.

Newton COUNTY.

I, A. K. Boyd, Ordinary of said County, do certify that I know Mrs. Cassie Cronan, 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 J. M. Cronan, the witness as to marriage, and that both 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.

Given under my hand and official seal of office this 11 day of April, 1925.
(SEAL OF ORDINARY) A. K. Boyd Ordinary,
Newton 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 space 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, 1861, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows 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.

Ordinary's Certificate

STATE OF GEORGIA,

Newton COUNTY.

I, G. L. Lloyd, Ordinary of said County, do certify that I know Mrs. Cassie Cronan, 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 J. N. Cronan, the witness as to marriage, and that both 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.

Given under my hand and official seal of office this 11 day of April, 1925.

(SEAL OF ORDINARY) G. L. Lloyd Ordinary,
Newton 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. 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 certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows 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.

State of Georgia, Newton County.

Personally appeared before me, A. L. Lloyd, Ordinary for said county, J. N. Cronan, a resident of said county who first being duly sworn deposes and says that he is a son of L. J. Cronan and Mrs. Cassie Cronan, that deponent was born the 3rd day of July, 1867, and that he was the fifth child of said marriage, he having two brothers and two sisters older than himself, and deponent says that he knows of his own knowledge that his said father and mother have been living together as husband and wife from his earliest recollection until the death of his father, Feb., 19th, 1925. Deponent says that from information, and having seen in the family bible a record of their marriage, that his said father and mother were married in Lumpkin county, Georgia on the 20th day of December, 1857. That his said father and mother moved from Lumpkin county, and for the past twenty years have been residents of Newton County, Georgia, and that his father was on the service pension roll of Newton county at the date of his death. The reason deponent is making this affidavit is because, none of the neighbors or friends of his father now living in Newton County, have known his father and mother longer than twenty years.

Sworn to and subscribed before me,
this the 11th day of April, 1925.
G. L. Lloyd
Ordinary, Newton County, Ga.

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. Cassie Cronan of said County, who, after having been duly sworn, says that she is the widow of L. J. Cronan to whom, in the County of Lumpkin State of Georgia she was married on the 20th day of December 1857, and that she remained his wife, and resided with him to the date of his death in February 1925 and that she has not since his death remarried; at the time of his death he was a resident of Newton County, in said State of Georgia, and he was on the Pension Roll of the State and paid a pension of \$10.00 in Newton County for 1924 (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 since 30th day of September 1857 Her Cassie + Cronan more (Applicant)
Sworn to and subscribed before me, this the 11th day of April, 1925
Frank P. Smith Ordinary
of Cherokee County.
(SEAL OF THE ORDINARY.)

Affidavit of Witness to Prove Marriage and Date of Death of Husband.

STATE OF GEORGIA,

Newton COUNTY.

Personally before me comes J. N. Cronan known to be a responsible and truthful person, residing in said County, who after having been duly sworn, says that of deponent's own personal knowledge, Mrs. Cassie Cronan, who made the foregoing affidavit, is the lawful widow of L. J. Cronan who died in Newton County in said State of Georgia on the 19 day of February, 1925, and that she has not since remarried; that she became the wife of L. J. Cronan on the 20 day of December, 1857; that she and he had resided together as husband and wife, continuously, since 20 day of Dec 1857, and that L. J. Cronan was the same man who was on the pension roll of said State from Newton County Feb., 19, 1925 when he died.

Sworn to and subscribed before me, this the 11 day of April, 1925
G. L. Lloyd Ordinary J. N. Cronan
of Newton County.

(SEAL OF ORDINARY)

than himself, and deponent says that he knows of his own knowledge that his said father and mother have been living together as husband and wife from his earliest recollection until the death of his father, Feb., 19th, 1925. Deponent says that from information, and having seen in the family bible a record of their marriage, that his said father and mother were married in Lumpkin county, Georgia on the 20th day of December, 1857. That his said father and mother moved from Lumpkin county, and for the past twenty years have been residents of Newton County, Georgia, and that his father was on the service pension roll of Newton county at the date of his death. The reason deponent is making this affidavit is because, none of the neighbors or friends of his father now living in Newton County, have known ~~his~~ his father and mother longer than twenty years.

Sworn to and subscribed before me,
this the 11th day of April, 1925.
G. L. Boyd
Ordinary, Newton County, Ga.

of Georgia, and he was on the Pension Roll of the State and paid a pension of \$100.00 in Newton County for 1924 (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 since 3rd day of September 1887. See the
Sworn to and subscribed before me, this the 11th day of April, 1925.
Frank P. Burt
Ordinary
Cherokee County.
Cassie Cronan
mon
(Applicant)
(SEAL OF THE ORDINARY.)

Affidavit of Witness to Prove Marriage and Date of Death of Husband. STATE OF GEORGIA,

Newton COUNTY.
Personally before me comes J. E. Cronan known to be a responsible and truthful person, residing in said County, who after having been duly sworn, says that of deponent's own personal knowledge, Mrs. Cassie Cronan, who made the foregoing affidavit, is the lawful widow of L. J. Cronan who died in Newton County in said State of Georgia on the 19 day of February 1925, and that she has not since remarried; that she became the wife of L. J. Cronan on the 20 day of December, 1857; that she and he had resided together as husband and wife, continuously, since 20 day of Dec 1857, and that L. J. Cronan was the same man who was on the pension roll of said State from Newton County Feb., 19, 1925 when he died.

Sworn to and subscribed before me, this the 11 day of April, 1925.
G. L. Boyd
Ordinary
Newton County.
J. E. Cronan
(SEAL OF THE ORDINARY.)

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY, }

I, J. W. Harrison hereby authorize

Paul Wright of Atlanta Ga

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

W. W. Harrison at Barbours Ga

Witness my hand and seal, this 5th day of May 1904.

Executed in presence of

J. W. Harrison

J. W. Harrison [L.S.]

Cronan L. J.
Cherokee G.
CODE SECTION 1364.
(FOR THOSE ALREADY ENROLLED.)

No. 5062
Erona Lumpkin 1903

C-16 INDIGENT
SOLDIER'S PENSION
1904.

Name L. J. Cronan
County Cherokee
Co. 6 Regiment 68th Va

WARRANT ISSUED

27th 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Q. S.

Geo. W. Harrison, State Printer, Atlanta.

no date

ATTORNEY.

hereby authorize _____
_____ *Chas. H. H. H.*
owed and request that he remit same to
_____ *Bartholomew Co.*

day of _____ 1904.
S. J. Cronan [L. S.]

County _____
Wagon _____
Co. _____ Regiment _____
WARRANT ISSUED
_____ 1904.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO
_____ *S. J.*
Geo. W. Harrison, State Printer, Atlanta.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,

_____ COUNTY. }

I, *J. G. Cronan* hereby authorize _____

_____ *Wm. H. Wright* of *Atlanta Ga.*

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

_____ *S. G. Cronan only* at *Bartholomew Co.*

by _____ *Chas. H.*

Witness my hand and seal, this _____ day of _____ 1904.

S. J. Cronan [L. S.]

Executed in presence of

_____ *S. G. Cronan only*

Cronan S. J.
Chas. H.
(FOR THOSE ALREADY ENROLLED.)

No. _____
Franklin 1203
INDIGENT
SOLDIER'S PENSION
1904.

Name _____
County _____
Wagon _____
Co. _____ Regiment _____

WARRANT ISSUED
_____ 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
_____ *S. J.*

Geo. W. Harrison, State Printer, Atlanta.

no date

Crowan L. G.
Charles G.
 (FOR THOSE ALREADY ENROLLED.)
 No. *516*
Ernest Langham 1883
 IS INDIGENT
SOLDIER'S PENSION
1904.

Name *L. G. Crowan*
 County *Cherokee*
 Co. *65th Regiment*

WARRANT ISSUED
7/8 1904.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT FORWARDED TO
Q. G.

Gen. W. Harrison, State Prison, Atlanta.
no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears *L. G. Crowan*, 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 *1884*, that he is *70* years old and by occupation a *Farming*, that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served for the term of *2 years* in Company *6*, of *65th* Regiment of *Georgia*; that his physical condition is as follows: *has arthritis in some of my fingers*

Larry Thacker
 that his property consists of the following items: *Small amount of House hold furniture*

of the value of *\$150* Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of *Cherokee* County been allowed a pension for the year *1883*.

Sworn to and subscribed before me, this the *5th* day of *July*, 1904. *L. G. Crowan*
L. G. Crowan Ordinary.

STATE OF GEORGIA,

Cherokee County.

I, *L. G. Crowan* Ordinary of said County, do certify that I am well acquainted with *L. G. Crowan*, 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 *5th* day of *July*, 1904.



L. G. Crowan
 Ordinary *Cherokee* County.

Note.—The blank spaces must be filled.
 Note.—Affidavits should not be taken after January 1st, 1904.

republican States (or of the State of _____) during the war between the States, and served for the term of 2 yrs in Company 6, of 65th Regiment of Georgia; that his physical condition is as follows: has arthritis in some of his fingers
and thumb

that his property consists of the following items: small amount of
house hold furniture

of the value of \$15 Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this the 5th day of May, 1904. } J. J. Croonan
J. J. Croonan Ordinary.

STATE OF GEORGIA, }
Cherokee County. }

I, J. J. Croonan Ordinary of said County, do certify that I am well acquainted with J. J. Croonan, 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 5th day of May, 1904.



J. J. Croonan
Ordinary. Cherokee

County.

NOTE.—The blank spaces must be filled.

NOTE.—Affidavits should not be taken after January 1st, 1904.

Croonan, J. J.
Cherokee Co.

Sec 65th Regt Co. Ar.
Co. C
3 applications
1905-06-07

See 65th Regt Co. B.

Co. C

3 applications

1905-06-07

Crossman, Nathaniel
Cherokee Co
in 2/19/08

No. _____

INDIGENT PENSION
1905

Name *Nathaniel Crossman*
County *Cherokee*
Co. *6* *23rd Ga.* Regt.
Approved _____ 1905

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

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

9/10/20/07

Pension office 8/30/05
Not an Aged man. It is not sufficient to state infirmity but to what extent has that infirmity effected or impaired his earning capacity. The law says that it must be such that he cannot earn his own support at any kind of labor or calling. This must be proven, can not be presumed.

J. W. Lindsey
Com. Of Pensions

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cherokee COUNTY,
I, *Nathaniel Crossman* hereby authorize
W. A. Webb of *Cherokee* County,
to receive and accept for the pension allowed and request that he remit same to _____
at *Cherokee* by *Webb*
Witness my hand and seal, this *13th* day of *Aug* 1907
Nathaniel Crossman [S.]

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

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

9/11/30/07

TORNEY.

Mr. Nathan
of Canton
County, Georgia
hereby authorize
my name to be
by Clerk
Sept. 1907
100
[Official Department S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, Nathaniel Crossmore hereby authorize
N. J. Webb of Canton

to receive and receipt for the pension allowed and request that he remit same to
at Canton by Webb

Witness my hand and seal, this 13th day of Aug. 1907

Nathaniel Crossmore (L. S.)

Executed in presence of

J. M. Blackwell

J. W. Lindsey
Comm. of Pensions

INDIGENT PENSION.

1906

Name Nathaniel Crossmore

County Cherokee

Co. B. 3rd Ga. Regt.

Approved 190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

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

9/11/30/07

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Cherokee COUNTY.

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

1. What is your name and where do you reside? (Give State County and post-office).
Nathaniel Crossmore, Reside at Natam, Cherokee Co. Ga.
2. How long and since when have you been a resident of this State? Since 1844.
3. When and where were you born? 1844 Cherokee County Ga.
4. When and where and in what company and regiment did you enlist or serve? 2 day of March 1864 in Co. G. 23rd Ga. Regiment
5. How long did you remain in such company and regiment? Until April 1865 About Thirteen Months
6. When and where was your company and regiment surrendered and discharged? Near Greensboro North Carolina in April 1865
7. Were you present with your company and regiment when it was surrendered? Yes
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority?
9. How much can you earn (gross) per annum by your own exertions or labor? Very little
10. What has been your occupation since 1865? Farming
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? Infirmary & Poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight?
Have some trouble
13. What property, real and personal, do you possess, and its gross value? I have no
14. What property, real or personal, did you possess in 1894, 1896, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? I had five about the same that I have now & have sold my own way any property
15. In what County did you reside during these years, and what property did you then return for taxation?
resided in Cherokee County Ga.
16. How were you supported during the years 1899, 1900, 1901 and 1902? by the labor of myself and wife
17. How much did your support cost for each of these years, and what portion did you contribute thereto by your own labor or income? I made a small crop and managed to live on it
18. What was your employment during 1898, 1899, 1901 and 1902? What pay did you receive in each year?

Every Question MUST Be Answered.

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? I have no family except myself and wife
20. Are you receiving any pension? If so, what amount and for what disability? No
21. Have you ever made an application for pension before? No
22. How many applications have you ever made and under what class? None

Sworn to and subscribed before me this the 14th day of August 1907. Nathaniel Crossmore Applicant.
N. J. Webb Ordinary,
of Cherokee County.

J. W. Lindsey
of Pennington

INDIGENT PENSION.

Debut

Name Nathanil Crockett
County Cherokee

Co. G. 23rd Gen. Regt.

Approved _____ 190 _____

JOHN W. LINDSEY,
Commissioner of Pennsylvania

WARRANT HANDED-TO

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

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

2/8/09/30/07

STATE OF GEORGIA.

Over the COUNTY.

H. J. Miller of said State and County, having been presented as a witness in support of the application of Nathaniel Groves for pension under section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and swears as follows:

- Answers as follows:
1. What is your name and where do you reside? *H. J. Wagner
Resides in Carroll County, Virginia*
 2. Are you acquainted with *Nathaniel C. Currence*, the applicant; if so, how long have you known him? *All our lives*
 3. Where does he reside, and how long and since when has he been a resident of this State? *Resides in Carroll County and has lived his life*
 4. When, where and in what company and regiment did he enlist, and how do you know? *He enlisted in 23rd Va. Cav. Co.*
 5. Were you a member of the same company and regiment? *I was*
 6. How long did he perform regular military duty? *For more than one year*
 7. When and where was his command surrendered? *Reston with N.C. I was*
Wounded April 4th 1865
 8. Were you present when it surrendered? *I was not*
 9. Was applicant present? *I think so he was with General J.*
 10. If he was not present, where was he? _____
- When did he leave his command? _____ For what cause? _____
- By what authority he left? _____ How do you know all of this? _____

11. What property, effects or income has the applicant? (Give your means of knowledge.)
Nothing at all - a small amount of personal property
12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same? *Nothing at all - his household goods or other personal property*
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom?
Has not sold any thing so far as I know
14. What is the applicant's occupation and physical condition? *Disorderly - physical condition weak*
15. Is the applicant unable to support himself by labor of any sort; if so, why? *In the best of my knowledge he is not stout or very able to work*
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? *by what labor he could perform -*
17. What portion of his support for these four years was derived from his own labor or income?
All so far as I know
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? *I know no is not a very strong man*
19. Who composes family? What property have they? Children's age and their earning capacity?
himself and wife
20. What interest will he in the recovery of a pension by this applicant? *none*
- Sworn to and subscribed before me, this the }
14 day of August, 1905 } *Chas. H. Huel*
My Sub. Witness.

STATE OF GEORGIA

Cherokee COUNTY

Personally came before me G. D. Blackwell and

_____ N. J. Coker _____, both known to me as reputable physicians
of said County, who, being severally sworn, say on oath that they have examined carefully _____

Nathaniel Carson, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

We find the Applicant suffering from
Chronic Bronchitis and chronic
Rheumatism

and that we have no interest in said pension being allowed

Sworn to and subscribed before me, this, the }
 15th day of Sept. 1905 }
 W. J. Webb }
 Ordinary. }
 G. A. Blackwell, M.D.
 H. J. Coker, M.D.

STATE OF GEORGIA.

Sciuroville COUNTY

- I, W. J. Webb Ordinary, in and for said County, hereby certify that the applicant Jonathan Edwards resides in said County, and has been a bona fide resident of this State since the _____ day of _____ 1894 and that the witnesses, viz.: E. D. Binkhwell, W. J. Lerch
H. J. Wheeler are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digest of Cherokee County shows that applicant
returned for taxation in his name in 1899 \$ 75 Dollars

property, and in 1900 874 Dollars of property; in 1901 855

_____ Dollars of property; in 1902
\$ 6-6 _____ Dollars of property.

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

Witness my hand and seal of office, this 15th day of July, 1902.

Witness my hand and seal of office, this _____ day of _____, 190____.

M. J. Webb Ordinary,

of Cherokee County.

NOTE

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

answers as follows:

1. What is your name and where do you reside? H. J. Wheeler
Reside in Cherokee County Georgia
2. Are you acquainted with Nathaniel Crossmore, the applicant; if so, how long have you known him? All our lives
3. Where does he reside, and how long and since when has he been a resident of this State? Reside in Cherokee County and was born in his life
4. When, where and in what company and regiment did he enlist, and how do you know? He enlisted in 23rd Co. 4th Reg. Va.
5. Were you a member of the same company and regiment? Yes
6. How long did he perform regular military duty? For more than one year
7. When and where was his command surrendered? Bentonville N.C. I was
8. Were you present when it surrendered? I was not
9. Was applicant present? I believe so he was with General Sherman
10. If he was not present, where was he? For what cause?
- When did he leave his command? How do you know all of this?
- By what authority he left?
11. What property, effects or income has the applicant? (Give your means of knowledge.) Nothing - except a small amount of personal property
12. What property, effects or income did the applicant possess in 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same? Nothing in his hands held or with personal property
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? Has not sold any thing so far as I know
14. What is the applicant's occupation and physical condition? Farmer
Physical condition - weak
15. Is the applicant unable to support himself by labor of any sort; if so, why? Is the best of my knowledge he is not stout for very able to work
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? by what labor in land & farm
17. What portion of his support for these four years was derived from his own labor or income? All so far as I know
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? I know him is not a very strong man
19. Who composes family? What property have they? Children's age and their earning capacity? himself and wife
20. What interest have you in the recovery of a pension by this applicant? none
Sworn to and subscribed before me, this the 14th day of August, 1905.
N. J. Webb Ordinary.

of said County, who, being severally sworn, say on oath that they have examined carefully.

Nathaniel Crossmore, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

He find the applicant suffering from
Chronic Bronchitis and chronic
Rheumatism

and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this, the 15th day of Sept, 1905.
N. J. Webb Ordinary.

E. D. Blackwell, M.D.
H. J. Wheeler, M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Cherokee COUNTY.

I, N. J. Webb Ordinary, in and for said County, hereby certify that the applicant, Nathaniel Crossmore resides in said County, and has been a bona fide resident of this State since the 15th day of Sept, 1898 and that the witnesses, viz.: E. D. Blackwell, M.D. H. J. Wheeler are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digest of Cherokee County shows that applicant returned for taxation in his name in 1898 \$75. Dollars of property; and in 1900 \$74. Dollars of property; in 1901 \$56. Dollars of property; in 1902 \$56. Dollars of property.

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

Witness my hand and seal of office, this 15th day of Sept, 1905.
N. J. Webb Ordinary,
of Cherokee County.

NOTE.

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

STATE OF GEORGIA, -CHEROKEE COUNTY.

Personally appeared before me the undersigned, Physicians personally known to me, who upon oath say that they have personally examined Nathaniel Crossmore, the applicant for a pension hereto, and that he is suffering from Chronic Bronchitis, and chronic Rheumatism, and by consequence of the above diseases renders him wholly unable to earn a support for himself by his labor.

Sworn to and subscribed to before me
this August, 13, 1907.

N. J. Webb Ordinary

E. D. Blackwell, M.D.
N. J. Webb

Personally appeared before me the undersigned,
Physians personally known to me, who upon oath say that
they have personally examined Nathaniel Crossmore, the
applicant for apension hereto, and that he is suffering
from Cronic Bronchitis, and eronic Rheumatism, and by
consequence of the above diseases renders him wholly unable
to earn a supprot for him-sällf by his labor.

Sworn to and subscribed to before me
this August, 13, 1907.

W. J. Webb Ordinary

R. D. Blackwell, M.D.
J. M. Bates, M.D.

Pension Office
States no claim
on part of husband
in any known
document - for
which a pension
can be allowed
J. W. Lindsey
Chas. P. Byrd

114-1914
County

No. _____

Widow's Pension

✓ UNDER ACT 1910

County Cherokee

Name N. J. Crow

Widow of McKinney Crow

A
43d Ga Regt

J. W. LINDSEY,
Commissioner of Pensions.

Chas. P. Byrd, State Printer

10/31-1914

43d Ga Regt

J. W. LINDSEY,
Commissioner of Pensions.

Chas. F. Rynd, State Printer

10/31-1914

Pension Office
has no record
on file of
any person
connected with
the 43d Ga Regt
in any way
connected with
the war of 1861-65
or the war of 1898-99

Widow's Pension

UNDER ACT 190

County

Shenandoah

Name

N. J. Crow

Widow of

William Crow

43d Ga Regt

J. W. LINDSEY,
Commissioner of Pensions.

Chas. F. Rynd, State Printer

10/31-1914

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

STATE OF GEORGIA,

Shenandoah County.

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

1. What is your name, and where do you reside? N. J. Crow: Shenandoah
2. How long and since when have you been a continuing resident of the State of Georgia? All my life
3. When, where and to whom were you married? Jan 15-1864 in Paducah Ky. to William Crow
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) At Lexington Va on the 4th May 1862
5. When and where did the Commands of your husband surrender or discharge from the army? At Lexington Va on the 4th May 1862
6. Was your husband personally present at the time of the surrender or discharge of this Command? Yes
7. If he was not present state clearly where he was?
8. Where was his command when he left?
9. For what cause did he leave his Command?
10. By whose authority did he leave his Command?
11. For how long was he granted leave of absence?
12. What was his physical condition when he left his Command?
13. What effort did he make to return to his Command?
14. In what way was he prevented from going back to Command?
15. Was he captured by the enemy at any time?
16. If so, when and where captured and where held as a prisoner, and when and for what cause released?
17. When and where did your husband die? July 18-1914 - Shenandoah Va
18. Were you residing together when he died? Yes
19. If not, how long had you resided apart?
20. What property of any description did you own, hold or control for your use and its cash value Nov. 4, 1908? (State same by items.) None
21. What property of any kind have you sold or given away since Nov. 4, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.)
22. What property of any description of any value have you now? None
23. Give list and cash value.
24. What are your annual earnings or income from any source and their value? None
25. Have you or your husband heretofore been paid a pension by the State? No
26. If so, when and for what cause were you or your husband placed on the Roll?

Sworn to and subscribed before me this the

29 day of Oct 1914

of Shenandoah County.

Ordinary.

g. In what way was he prevented from going back to Command?
h. Was he captured by the enemy at any time?
i. If so, when and where captured and where held as a prisoner, and when and for what cause released?

j. When and where did your husband die? July 18-1904 - Chatham Co
k. Were you residing together when he died? Yes
l. If not, how long had you resided apart?
m. What property of any description did you own, hold or control for your use and its cash value, Nov. 4, 1908? (State same by items.) None

10. What property of any kind have you sold or given away since Nov. 4, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.)

11. What property of any description of any value have you now? None
Give list and cash value.

12. What are your annual earnings or income from any source and their value? None
except - duty labor

13. Have you or your husband heretofore been paid a pension by the State? No
If so, when and for what cause were you or your husband placed on the Roll?

Sworn to and subscribed before me this the 29 day of Sept 1914 N J Crow
of Milledgeville Ordinary.
Chatham County.

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

STATE OF GEORGIA,
Chatham County.

Personally before me comes C. J. Harner & J. B. Carpenter who after being duly sworn true answers to make, to the following questions, answers as follows:

1. What is your name and where do you reside? C. J. Harner = Chatham Co
2. How long and since when have you known N J Crow applicant?
3. How long and since when has she continuously resided in this State? (Give date.) All her life

4. When and to whom was she married? McK. Crow How do you know? they lived together
5. How long and since when did you know McK. Crow in 1864 her husband? all her life

6. When and where did McK. Crow die? in Pines Co. Ga July 18-1904
the husband of Applicant die?

7. Were the applicant and her husband living together as husband and wife at the date of his death? Yes
8. If not, how long did they live apart before his death?

Were they divorced?

9. When, where and in what Company and Regiment did McK. Crow enlist? 1st Lt. Lyons Co. 1st Regt. 42nd Me
Regt.

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

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

12. When and where did his Command surrender, and was discharged? May 1865
At Lexington Va

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

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

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

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

Sworn to and subscribed before me this the 29 day of Oct 1914
C. J. Harner & J. B. Carpenter
of Chatham County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,
Chatham County.

Personally before me comes who on oath says that they are freeholders of said County and that they know of said County and know what property she owned on 4th Nov. 1908, and its cash value to be as set out by Schedule (A) as follows:

Personal property \$
Notes and accounts due \$
Total \$

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

Personal property \$
Money, Notes and Accounts \$

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

Acres of land worth \$
Horses and Mules \$
Cows and Hogs \$
Other Property \$
Income and Earnings \$
Total Value of all property and effects \$

Sworn and subscribed before me this the day of 1914

Ordinary.
of Chatham County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Chatham County.

I, J. M. Sawfield Ordinary of said County do certify that, I know N J Crow the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th Nov. 1908 of 85 State 1908 = Pines Co =

That I also know C. J. Harner & J. B. Carpenter the witness who swears to the service of husband, and who are freeholders. That all of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they all are truthful, trustworthy, and their statements are entitled to full faith and credit.

That the Tax Returns No entry at all Returned for Tax is for 1908 \$ for 1910 \$ for 1911 \$ for 1912 \$ for 1913 \$

Sworn under my hand and official seal of office this day of 1914

(SEAL.) J. M. Sawfield Ordinary,
Chatham County.

(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 asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary.
4. Only widows who married prior to first January 1870, are entitled.
5. Attach certified copies of marriage licenses if obtainable. If not, prove marriage, by some person, or by general reputation.

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

12. When and where did his Command surrender, and was discharged? May 1865
At Vicksburg, MS

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

14. Was the husband of applicant personally present at surrender? Yes. If not where was he? _____ when, where and for what cause did he leave Command? (Give date.) _____ By whose authority did he leave his Command? _____ and how long was he granted leave? _____ How do you know all this? _____

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

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

Sworn to and subscribed before me this the 29 day of Oct 1914
J. M. Saffell Ordinary.
Chas. E. Carpenter County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cherokee County.

I, J. M. Saffell Ordinary of said County do certify that, I know M. J. Lewis the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th Nov., 1908. of 25 Nov. 1908 - Pikes Co

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

That the Tax Returns M. J. Lewis Returned for Tax is for 1908 \$ _____ for 1910 \$ _____ for 1911 \$ _____ for 1912 \$ _____ for 1913 \$ _____

Sworn under my hand and official seal of office this _____ day of _____ 1914.

(SEAL.)

J. M. Saffell Ordinary.
Cherokee County.

(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 asked you and the evidence you shall give will be the truth. So help you God."

2. Additional affidavits may be attached if blank spaces are insufficient.

3. All affidavits must be made before the Ordinary.

4. Only widows who married prior to first January 1870, are entitled.

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

Widow's Affidavit--Who Lost Husband--Killed During War and Afterwards Married, now a Widow.

STATE OF GEORGIA,

Cherokee County.

Personally before me came M. J. Lewis of said county who after being sworn on oath says that she became the lawful wife of Wm. J. Lewis on the day of 2nd Aug. 1864 and that he died on the 10th day of Aug. 1864. enlist in Company Co. B Regiment 25th and was on the 14th day of Feb. 1864. killed or died as the result of an injury received while in line of duty on the _____ day of _____ 1864. leaving this applicant, his widow. That on the 15th day of Aug. 1864 she was married to M. J. Lewis of Pikes County, and that on the 10th day of Aug. 1864 in the county of Pikes State of GA said Wm. J. Lewis died and that this deponent is now a widow.

That she was on the 4th day of November, 1908 or at the death of her last husband left in the use, possession and control of the property. Stated in schedule (A)

_____ acres of land cash value of _____
_____ Horses or mules _____
_____ Hogs and cows and other stock _____
_____ money, notes, etc. _____
_____ actual income and savings _____

Total _____

SCHEDULE B.

That since the 4 of November, 1908 or the death of her husband, she has sold or given away the following property of the cash value _____ as follows _____

Total value _____

and that the proceeds were disposed of _____

SCHEDULE C.

That she is now in the use, possession and control of the following property at the cash value attached _____
_____ acres of land of the cash value _____
_____ Horses and cows of the cash value _____
_____ Hogs and other stock _____
_____ Cotton and other farm Products, worth _____

Total value of all property _____

and that the valuation of all of said property, is stated at its true cash value.

Sworn to and subscribed to by me this 27th day of Oct 1914.

J. M. Saffell Ordinary. } M. J. Lewis
Cherokee County } Cherokee County

Affidavit of the Witness to the Service and Death of Soldier Husband and Her Marriage.

STATE OF GEORGIA,

Cherokee County.

Personally before me come J. H. Hamaker who after being duly sworn on oath says that he knew Wm. J. Lewis that he enlisted in Company Co. B Regiment of 25th veterans 25th on the 2nd day of Aug. 1864 and that on the 10th day of Aug. 1864 he was killed or died as the result of the injury received while in line of duty as a soldier, in the Confederate army, and that he knows Mrs.

Widow's Application
UNDER ACT 1910.
Who Lost a Husband During War as a Soldier, Remarried and is Now a Widow.
County Cherokee
Name Mrs. J. J. Lewis
Soldier Husband's Name Wm. J. Lewis
Company B
Regiment 25th
Name of last husband Wm. J. Lewis
Approved _____
J. W. LINDSEY,
Commissioner of Pensions.
Chas. F. Boyd, State Printer, Atlanta.

Total value
and that the proceeds were disposed of

SCHEDULE C.

That she is now in the use, possession and control of the following property at the cash value attached

acres of land of the cash value

Horses and cows of the cash value

Hogs and other stock

Cotton and other farm Products, worth

Total value of all property

and that the valuation of all of said property, is stated at its true cash value.

Sworn to and subscribed to by me this 27th day of Sept. 1919

J. M. Hallfill Ordinary. } Mrs. M. J. Brown
Cherokee County }

Affidavit of the Witness to the Service and Death of Soldier
Husband and Her Marriage.

STATE OF GEORGIA,
Cherokee County.

Personally before me came J. H. Hammon who after being duly sworn on oath says that he knew M. J. Brown, that he enlisted in Company No. 3, Regiment of 25th 3rd veterans 25th on the 25th day of Feb. 1862 and that on the 18th day of Feb. 1864 he was killed or died as a result of the injury received while in line of duty as a soldier, in the Confederate army, and that he knows Mrs.

M. J. Brown the applicant. She and her said soldier husband were married on the 2nd day of Aug. 1863 and that she was his widow at his death, that he knows that the said M. J. Brown married again on the day of 19 to one M. J. Brown and that her said husband M. J. Brown died on the day of 19 and that the applicant is now a widow.

Sworn to and subscribed before me this 27th day of Sept. 1919

J. M. Hallfill Ordinary. } S. J. Hammon
Cherokee County }

Affidavit of the Witness to the Property and its Value.

STATE OF GEORGIA,
Cherokee County.

Personally before me who after being sworn on oath says that they are Free Holders of said County of and that they know Mrs. and that she was on the 4th day of November or at the death of her last husband, on the day of 19 and that he left her in the use, possession and control of property at its true cash value, as follows.

SCHEDULE A.

Lands whose cash value

Horses mules

Cows hogs and other stock

Money, notes and accounts

All other property

Total cash value of all property

SCHEDULE B.

We know that since the 4th November, 1908 or since the death of her last husband she has sold or given away property of the cash value of to-wit:

land worth

Horses and mules

Cows, hogs and stock of all kind

any and all other property

Total cash value

and we know that the proceeds of this property were its full cash value and was disposed of (State fully.)

SCHEDULE C.

We know that the applicant is now in the use, possession and control of property of the actual cash value as follows, to-wit:

Land of the cash value of

Horses and mules, cash value of

Cows hogs, and other stock

Wagon and Buggy

Other personal property

Money notes and accounts

Actual income and savings

Total cash value of all property

Sworn to and subscribed before me this day of 19

Ordinary

of Cherokee County

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cherokee County.

I am ordinary of said County and do certify that I know Mrs. the applicant for Pension and that I know that she is the person that she represents herself to be, and that she is a bona fide continuing resident of said county, and was on the 4th day of November, 1908.

That I also know witness to the service, of Husband's marriage, and the death of Husband, and I also know whom I know to be resident and free-holder of said county, that all of said persons were duly sworn by me before signing their respective affidavits and that they are truthful and trustworthy persons and their statements are entitled to full faith and credit.

That the Tax Books of County show returned property to the amount of 1908 for 1909 for 190 for 190

Given under my hand and official seal of office, this day of 191

Ordinary

of Cherokee County

Read this note.

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 whole truth. So help you God."

2. Additional affidavits may be attached if blank spaces are insufficient.

3. All affidavits must be made before the ordinary of the County of the residence of the person to be sworn.

4. Only widows whose husbands died from wounds or injuries, received in line of duty before 26 April 1865, since married and is now a widow are entitled to this Pension.

5. Attach copies of marriage license of both marriages or prove marriage, by some who know it, or by general reputation.

STATE OF GEORGIA.

County.

Personally before me _____ who after being sworn on oath says that they are Free Holders of said County of _____ and that they know Mrs. _____ and that she was on the 4th day of November or at the death of her last husband, on the _____ day of _____ 19____ and that he left her in the use, possession and control of property at its true cash value, as follows.

SCHEDULE A.

Lands _____ whose cash value _____
Horses _____ mules _____
Cows hogs and other stock _____
Money, notes and accounts _____
All other property _____
Total cash value of all property _____

SCHEDULE B.

We know that since the 4th November, 1908 or since the death of her last husband she has sold or given away property of the cash value of to-wit:

land worth _____
Horses and mules _____
Cows, hogs and stock of all kind _____
any and all other property _____
Total cash value _____

and we know that the proceeds of this property were _____ its full cash value and was disposed of (State fully.) _____

SCHEDULE C.

We know that the applicant is now in the use, possession and control of property of the actual cash value as follows, to-wit:

Land of the cash value of _____
Horses and mules, cash value of _____
Cows hogs, and other stock _____
Wagon and Buggy _____
Other personal property _____
Money notes and accounts _____
Actual income and savings _____
Total cash value of all property _____

Sworn to and subscribed before me this _____ day of _____ 19____

Ordinary _____
of _____ County _____

That the Tax Books of _____ County show _____ returned property to the amount of 1908 _____ for 1909 _____ for 190 _____ for 190 _____
Given under my hand and official seal of office, the _____ day of _____ 191 _____
Ordinary _____
County _____

Read this note.
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 whole truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the County of the residence of the person to be sworn.
4. Only widows whose husbands died from wounds or injuries, received in line of duty before 26 April 1865, since married and is now a widow are entitled to this Pension.
5. Attach copies of marriage license of both marriages or prove marriage, by some who know it, or by general reputation.

No. 123

State of Georgia.

County.

ORDINARY'S OFFICE,--35

I, *M. S. Long*, Ordinary and ex-officio Clerk of the Court of Ordinary of said County, do hereby certify that I have compared the foregoing copy of *Marriage Record of Warner M. Underwood and Nancy Jane Presley.*

Recorded in Book A-Page 177

with the original record thereof, now remaining in this office, and the same is a correct transcript therefrom, and of the whole of such original record.

In testimony whereof, I have hereunto set my hand and affixed the seal of the Court of Ordinary, this the *22* day of *Sept*, 191*7*

M. S. Long
Ordinary and ex-officio C. C. O.

J. M. SATTERFIELD, ORDINARY

W. D. MILLER, CLERK

OFFICE OF

ORDINARY CHEROKEE COUNTY

CANTON, GA. *Sept 27-1914*

Personally before me came Maude Lerow who on oath says she knows Mrs N. J. Lerow the applicant for pension also known her husband McKinney Lerow also knows what they were married on Jan 15 1864 at Ephraim Presleys = Presleys Lerow by Esq McKinney; Deponent says that she was present at said wedding.

Sworn to and subscribed before me this Sept 27-1914
J. M. Satterfield Only
Cherokee Co

Maude Lerow

State of Georgia.

County.

ORDINARY'S OFFICE,--33

I, *M. S. Long*, Ordinary and ex-officio Clerk of the Court of Ordinary of said County, do hereby certify that I have compared the foregoing copy of *Marriage Record of Warner M. Underwood and Nancy Jane Presley.*

Recorded in Book A-Page 22

with the original record thereof, now remaining in this office, and the same is a correct transcript therefrom, and of the whole of such original record.

In testimony whereof, I have hereunto set my hand and affixed the seal of the Court of Ordinary, this the *22* day of *Sept*, 191*7*

M. S. Long
Ordinary and ex-officio C. C. O.

ORDINARY CHEROKEE COUNTY

CANTON, GA. Sept 29-1914

Personally before me came Maude Brown who
oath says she knows Mrs M. S. Long the appl
for union also then her husband Mr. Long
also knows that they were married on Jan 12
1864 at Ephraim Presley-Pickens Co
by Rev Mr. Long. Deponent says that
was present at said wedding.

Sworn to and subscribed }
before me: This Sept 29-1914 } Maude B. Brown
J. M. Littlefield Only
Cherokee Co

No. 498



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

Warner M. Underwood and Nancy Jane Presley
You are hereby authorized to join
in the Holy State of Matrimony according to the Constitution and
Laws of this State and for so doing this shall be your License.
And you are hereby required to return this License to me with your
Certificate hereof of the fact and date of the Marriage.

Given under my hand and seal this *1st* day of
Aug 1863 *W. H. Simmons* (L.S.)
Ordinary.

STATE OF GEORGIA CERTIFICATE COUNTY OF PICKENS

I Certify that *Warner M. Underwood and Nancy Jane Presley*
were joined in Matrimony by me this *2* day of *Aug* 1863
and *63*

Recorded

H. B. Johnson M. L.
Ordinary.

State of Georgia

Pickens County

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

You are hereby authorized to join
Warner M Underwood and *Nancy Jane Presley*
in the Holy State of Matrimony according to the Constitution and
Laws of this State and for so doing this shall be your License.
And you are hereby required to return this License to me with your
Certificate hereon of the fact and date of the Marriage.

Given under my hand and seal this *1st* day of
Aug 1863 *W. H. Simmons* (L.S.)
Ordinary.

STATE OF GEORGIA CERTIFICATE COUNTY OF PICKENS

I Certify that *Warner M Underwood* and *Nancy Jane Presley*
were joined in Matrimony by me this *2* day of *Aug*
and *63* *Witness H Underwood*

Recorded

19
Ordinary

H. B. Johnson M. L.

LICENSE OBTAINED UNDER DATA BY

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cherokee County.

I, Thomas H. Tucker hereby authorize

Wm. H. McGill of Cherokee

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

Abraham at Cherokee by Abraham

Witness my hand and seal this 23 day of December 1897.

Executed in presence of John P. McGowan

Abraham

Cherokee
Cherokee County
No. 2080

INDIGENT PENSION
1897.

Name Thos. H. Tucker

County Cherokee

Approved 7/1 1897.

WARRANT HANDED TO

MAN

W. W. HARRIS, STATE PRINTER, ATLANTA.

7/18/97

WARRANT HANDED TO

RAW

GO. W. HARRIS, STATE PRINTER, ATLANTA.

5 11897

ATTORNEY.

of Cherokee County, Georgia, hereby authorize
me that he remit same to
by check
of December 1897.
of Cherokee County, Georgia.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, Plasunt F. Crowder hereby authorize

Wm. A. Wright of Cherokee County

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

Plasunt F. Crowder at Cherokee by check

Witness my hand and seal this 24th day of December 1897.

Executed in presence of

Plasunt F. Crowder with

Questions for Applicant.

STATE OF GEORGIA,

Cherokee County.

I, Plasunt F. Crowder 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:

- What is your name and where do you reside? (give State, County and post office) Plasunt F. Crowder, Reside near Greely, Cherokee Co., Ga.
- Where did you reside on January 1st, 1894, and how long have you been a resident of this State? Greely, Post Office Cherokee County Ga 40 years
- When and where were you born? 1816, Buchanan County, Virginia
- When and where and in what company and regiment did you enlist or serve? August 1860, Cherokee County Ga, in Company D and 25th Ga Regiment, enlisted
- How long did you remain in such company and regiment? four years
- For how long a period did you discharge regular military duty? four years
- When, where and under what circumstances were you discharged from service? at the Surrender of Sec Army in Virginia in 1865
- What is your present occupation? Not able to do anything
- How much can you earn (gross) per annum by your own exertions or labor? nothing
- What has been your occupation since 1865? Hammer until 1876 since then unable to do anything
- Upon which of the following grounds do you base your application for pension, viz: first "age and poverty," second "infirmary and poverty" or third "blindness and poverty"? all three over
- If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? I have been able to earn my support since 1890 - in the year of this year I fell and hurt my back and have not been able to do anything since. My wife has been out in 1875 burning a tobacco field and my left eye has been
- What property, effects or income do you possess and its gross value? none
- What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any, did you make of same? had fifty acres of land in 1880 sold and worn out the same and sold up the proceeds had the same in 1894 and had nothing in 1896
- In what County did you reside during those years and what property did you then return for taxation? in Cherokee County land to the household furniture
- How were you supported during the years 1895 and 1896? by my wife and what my neighbors gave me
- How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? 25⁰⁰ I contributed nothing
- What was your employment during 1895 and 1896? What pay did you receive in each year? I was not able to work received no pay
- Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? A wife only - who lives by our means Labor - this has no homestead
- Are you receiving any pension, if so what amount and for what disability? I am receiving no pension

Every Question MUST be Answered.

Sworn to and subscribed before me this the

24th day of Dec 1897.

Plasunt F. Crowder (Applicant.)

W. A. Wright Ordinary.

of Cherokee County.

INDIGENT PENSION

1897.

Name Plasunt F. Crowder

County Cherokee

Approved 7/11 1897.

WARRANT HANDED TO

RAW

GO. W. HARRIS, STATE PRINTER, ATLANTA.

5 11897

Cherokee No. 2080

Cherokee County
No. 2080

INDIGENT PENSION
1897.

Name Pleasant F. Crowder
County Cherokee

Approved 7/11 1897.

WARRANT HANDLED TO
WAM

5 11/10/97

Every Question
upon the third state whether you are totally blind and when and where you lost your sight? I have
able to earn my support since 1890 - in the
of this year I will send them my back and then
that able to do anything. Since the night I was
out in 1875 becoming a tobacco leaf and my left eye
13. What property, effects or income do you possess and its gross value?
None
14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any,
did you make of same? had fifty acres of land in 1886 age
and worn out, took the same and ran up the
proceeds had the same in 1894 and had nothing in 1896
15. In what County did you reside during those years and what property did you then return for taxation?
in Cherokee County land 1890 - Household furniture
16. How were you supported during the years 1895 and 1896? by my wife and
what my neighbors gave 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? 25 - I contributed nothing
18. What was your employment during 1895 and 1896? What pay did you receive in each year?
I was not able to work & received no pay
19. Have you a family? If so, who composes such family? Give their means of support? Have they
a homestead? A wife only, who lives & runs my home
Labor - she has two homestead
20. Are you receiving any pension, if so what, amount and for what disability?
I am receiving no pension
Sworn to and subscribed before me this the Pleasant F. Crowder
25th day of Dec 1897. Applicant.
J. C. Brown Ordinary.
of Cherokee County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA.

Cherokee County.

J. H. Young, of said State and County, having been presented
as a witness in support of the application of Pleasant F. Crowder for pension
under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the
following questions, deposes and answers as follows:

1. What is your name and where do you reside?
J. H. Young, Cherokee County Ga. Grady P.O.
2. Are you acquainted with Pleasant F. Crowder, the applicant, is of
how long have you known him? I have known him forty years
in Cherokee County. Resided in State about 40 yrs as long as I have known him.
3. Where does he reside, and how long has he been a resident of this State?
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you
know this? I do. I was with him all time.
5. When, where and in what company and regiment did he enlist? Enlisted Aug. 1861
in Bartow Co. Company D. 23 Regt Georgia Vol.
6. Were you a member of the same company and regiment? I was
7. How long did he perform regular military duty, and what do you know of his service as a Confed-
erate soldier, and the time and circumstances of his discharge from the service? About 4 years.
made a good soldier and discharged at surrender
in 1865.

8. What property, effects or income has the applicant? (Give your means of knowledge.)
Nothing of any value.

9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if
any did he make of same? Fifty acres of land in 1895. Old & worn out.
does it for support. not able to work.

10. What is the applicant's occupation and physical condition?
always tried to farm. Inable to work any at all.

11. Is the applicant unable to support himself by labor of any sort, if so, why?
He is entirely unable to work. very old
and almost blind.

12. How was he supported during the years 1895 and 1896? In 1895 supported from
charity. In 1896 supported by income his land came to.

13. What portion of his support for these two years was derived from his own labor or income?
None.

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension
under the Act of December 15th, 1894? He is old not able to work
and has no property and he is almost
blind.

15. What interest have you in the recovery of a pension by this applicant? none.
Sworn to and subscribed before me, this
the 15 day of Jan 1897. J. H. Young Witness.
Allen C. Brown Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA.

Cherokee County.

Personally came before me, Dr. W. L. Coleman and
Dr. J. C. Brown, both known to me as reputable physicians
of said county, who being severally sworn, say on oath that they have examined carefully
P. F. Crowder, applicant for pension under the Act of 1894, and after
such personal examination say that his precise physical condition is as follows:
He is old and very infirm
& is badly afflicted with rheumatism
and is not able to work.

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

Sworn to and subscribed before me, this
the 25th day of Dec 1896
J. C. Brown Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cherokee County.

I, Allen C. Brown, Ordinary in and for said County, hereby certify that
the applicant, Pleasant F. Crowder, 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: Dr. W. L.
Coleman & J. C. Brown and J. H. Young
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 Cherokee County show that applicant
returned for taxation in his name in 1895, Seventy eight
dollars of property, and in 1896, Ten
dollars of property.

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

Witness my hand and seal of office, this 15 day of January 1897.
Allen C. Brown Ordinary
of Cherokee County.

NOTE.

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 evidence you shall give will be the whole truth, so help you God."
Additional affidavits may be attached if blank spaces are insufficient.
The Little Property the old man returned
in 1895 has been consumed in a lifetime
J. C. Brown ordinary

8. What property, effects or income has the applicant? (Give your means of knowledge.)
Nothing of any value.

9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if any did he make of same? *Fifty acres of Land in 1895, sold & went out, sold it for support, not able to work.*

10. What is the applicant's occupation and physical condition?
always tried to farm. unable to work any at all.

11. Is the applicant unable to support himself by labor of any sort, if so, why?
He is entirely unable to work, very old and almost blind.

12. How was he supported during the years 1895 and 1896? *In 1895 supported by some charity in 1896, supported by income his land came to.*

13. What portion of his support for these two years was derived from his own labor or income?
None.

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? *He is old not able to work and has no property and he is almost blind.*

15. What interest have you in the recovery of a pension by this applicant? *none*

Sworn to and subscribed before me, this *15* day of *Jan* 1897, *J. H. Young* Witness.
Allen C. Corn Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cherokee County.

I, *Allen C. Corn*, Ordinary in and for said County, hereby certify that the applicant *Pleasant F. Crowder* 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: *Dr. W. G. Coleman & C. P.ickett and J. W. Young* 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 *Cherokee* County show that applicant returned for taxation in his name in 1895, *Seventy Eight* dollars of property, and in 1896, *Ten* dollars of property.

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

Witness my hand and seal of office, this *15* day of *January* 1897.

Allen C. Corn Ordinary
of *Cherokee* County.

NOTE.

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 evidence you shall give will be the whole truth, so help you (god)." Additional affidavits may be attached if blank spaces are insufficient.

The Little Property the old man Paine in 1895 has been concerned in a suit for A. C. Corn ordin.

POWER OF ATTORNEY.

State of Georgia,

Cherokee County.

I, *Pleasant F. Crowder* hereby authorize *W. L. Wright* of *Atlanta Ga*

to receive and receipt for the pension paid hereon and request that he remit same to *A. C. Corn* acting by *check* at *Cherokee Ga.*

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *15* day of *Jan* 1898.

Executed in presence of

A. C. Corn

STATE OF GEORGIA,

Cherokee County.

I, *W. L. Wright* hereby authorize *A. C. Corn* of *Cherokee Ga*

to receive and receipt for the pension allowed, and request that he remit same to *A. C. Corn* at *Cherokee Ga* by *mail or express*

Witness my hand and seal this *15* day of *Jan* 1898.

Executed in presence of *P. F. Crowder* (L. S.)
A. C. Corn

INDIGENT
SOLDIER'S PENSION,
1898.

Name *Pleasant F. Crowder*
County *Cherokee*

WARRANT ISSUED

1/20
1898.
RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO
M. L. W.
W. W. HARRISON, STATE PRINTER, ATLANTA.

INDIGENT
SOLDIER'S PENSION,
1899.

Name *Pleasant F. Crowder*
County *Cherokee*

WARRANT ISSUED

1/20
1899.
RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO
W. L.
W. W. HARRISON, STATE PRINTER, ATLANTA.

broader Pleasant F.
 (For Those Already Enrolled.)
 NO. 2005
 INDIGENT
 SOLDIER'S PENSION,
 1898.
 Name *Pleasant F. Broaden*
 County *Cherokee*
 WARRANT ISSUED
 1/20 1898.
 RICHARD JOHNSON,
 Commissioner of Pensions.
 WARRANT HANDED TO
 1/20 17
 GEO. W. HARRISON, STATE PRINTER, ATLANTA

broader P. F.
 (For Those Already Enrolled.)
 NO. 3285
 INDIGENT
 SOLDIER'S PENSION,
 1899.
 Name *P. F. Broaden*
 County *Cherokee*
 WARRANT ISSUED
 1/26 1899
 RICHARD JOHNSON,
 Commissioner of Pensions.
 WARRANT HANDED TO
 1/26 17
 GEO. W. HARRISON, STATE PRINTER, ATLANTA

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears *Pleasant F. Broaden*
 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 _____ 1898; that he is *about 50* years old and by occupation *has been farming* 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 *over 4 years* in Company *I*, of *25th* Regiment of *Geo. Inf.*; that his physical condition is as follows: *After seven years age & exposure not able to do any thing*

that his property consists of the following items *some small amount of household furniture*

of the value of *10 or 12* 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 *Cherokee* county been allowed a pension for the year 1897.

Sworn to and subscribed before me, this, the _____ day of *July* 1898, *P. F. Broaden* Ordinary.

State of Georgia,
Cherokee County.

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

Given under my official signature and seal, this *third* day of *July* 1898.



A. C. Bonn Ordinary *Cherokee* County.

NOTE.—The blank spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears *P. F. Broaden* 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 *December* 1858; that he is *83* years old and by occupation a *Farmer* that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served for the term of *four* in Company *A*, of *25th* Regiment of *Geo. Inf.*; that his physical condition is as follows: *That he is physically unable to do any thing*

that his property consists of the following items *a house & kitchen*

of the value of *five* 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 *Cherokee* county been allowed a pension for the year 1897.

Sworn to and subscribed before me, this, the _____ day of *January*, 1899, *A. C. Bonn* Ordinary.

State of Georgia,
Cherokee County.

I, *A. C. Bonn* Ordinary of said County, do certify that I am well acquainted with *P. F. Broaden* 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 *25th* day of *January* 1899.



A. C. Bonn Ordinary *Cherokee* County.

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

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 Charleston county been allowed a pension for the year 1897

Sworn to and subscribed before me, this, the 25th day of January, 1898, } P. F. L. Lindsey
A. C. L. Lindsey Ordinary.

State of Georgia,
Charleston County.

I, A. C. L. Lindsey Ordinary of said County, do certify that I am well acquainted with P. F. L. Lindsey 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 25th day of January, 1898.



NOTE.—The blank spaces must be filled.

A. C. L. Lindsey
Ordinary Charleston County.

that he receives no pension as 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 Charleston county been allowed a pension for the year 1897

Sworn to and subscribed before me, this, the 25th day of January, 1899, } P. F. L. Lindsey
A. C. L. Lindsey Ordinary.

State of Georgia,
Charleston County.

I, A. C. L. Lindsey Ordinary of said County, do certify that I am well acquainted with P. F. L. Lindsey 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 25th day of January, 1899.



NOTE.—The blank spaces must be filled.
NOTE.—A affidavit should not be attested before January 1st, 1899.

A. C. L. Lindsey
Ordinary Charleston County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Charleston County.

I, P. F. L. Lindsey hereby authorize W. A. Wright of Atlanta Ga to receive and receipt for the pension allowed, and request that he remit same to A. C. L. Lindsey at Charleston Ga by check

Witness my hand and seal, this 1st day of January, 1900.

P. F. L. Lindsey [L. S.]

Executed in presence of

A. C. L. Lindsey

POWER OF ATTORNEY.

STATE OF GEORGIA,
Charleston County.

I, P. F. L. Lindsey hereby authorize A. C. L. Lindsey of Charleston Ga to receive and receipt for the pension allowed and request that he remit same to me at Charleston Ga by

Witness my hand and seal, this 1st day of January, 1901.

P. F. L. Lindsey [L. S.]

Executed in presence of

J. D. R. R.

INDIGENT
SOLDIER'S PENSION,
1900.

Name P. F. L. Lindsey
County Charleston

WARRANT ISSUED
January 24 1900.

JOHN W. LINDSEY,
Comptroller of Pensions.

WARRANT HANDLED TO
Wright
Geo. W. Harrison, Post Printer, Atlanta.

Mo. Co.

Brooklyn, P. F.
Charleston Co.

(For Those Already Enrolled.)

INDIGENT
SOLDIER'S PENSION,
1901.

Name P. F. L. Lindsey
County Charleston

WARRANT ISSUED
2/12 1901.

JOHN W. LINDSEY,
Comptroller of Pensions.

WARRANT HANDLED TO
A. C. L. Lindsey
Geo. W. Harrison, Post Printer, Atlanta.

610044 P.F.
Inoke G.
CODE SEC. 1284.
(For Those Already Enrolled.)
NO. 1874
INDIGENT
SOLDIER'S PENSION,
1900.
Name P. H. W. W. W. W.
County C. H. W. W. W.
WARRANT ISSUED
January 24 1900.
JOHN. W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO
W. H. W. W. W.
Geo. W. Harrison, State Printer, Atlanta.
Mr. W. W. W.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Shannon County.

Personally appears John A. Davidson 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 _____ 1885; that he is 31 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of one year in Company 4, of 22 th Regiment of _____; that his physical condition is as follows: almost perfect and able to do any work

that his property consists of the following items small amount
of personal property

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1900. I have heretofore as a resident of Lincoln county been allowed a pension for the year 1899.

Sworn to and subscribed before me, this, the }
 6th day of June 1900. }
 J. C. C. m. Ordinary.

State of Georgia, }
Liberty County. }

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

Given under my official signature and seal, this 6th
day of June 1900.

Affix
your
seal
here.

Ordinary 12th District County.

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

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

by occupation as a private that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of one year in Company D, of 21th Regiment of Georgia; that his physical condition is as follows: almost crippled with rheumatism
weak

that his property consists of the following items small amount of household furniture

of the value of 20 Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1900. I have heretofore as a resident of Cherokee county been allowed a pension for the year 1891.

Sworn to and subscribed before me, this, his
6th day of June, 1900. } P. B. Brantley
A. C. Brown Ordinary.

State of Georgia,

Cherokee County. }

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

Given under my official signature and seal, this 6th
day of June, 1900.



A. C. Brown
Ordinary Cherokee County.

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

federate States (or of the State of Georgia) during the war between the States, and served for the term of 4 years in Company D, of 21th Regiment of Georgia; that his physical condition is as follows: Rheumatism from age not able to do any labor

that his property consists of the following items small amount of household furniture

of the value of 20 Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1900. I have heretofore as a resident of Cherokee county been allowed a pension for the year 1891.

Sworn to and subscribed before me, this, his
1st day of July, 1900. } P. B. Brantley
A. C. Brown Ordinary.

STATE OF GEORGIA,

Cherokee County. }

I, A. C. Brown Ordinary of said County, do certify that I am well acquainted with P. B. Brantley 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 1st
day of July, 1900.



A. C. Brown
Ordinary Cherokee County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County, }

I, William Crowder

hereby authorize

Mr. J. H. Hargis, of Fulton County,

to receive and receipt for the pension allowed and request that he remit same to J. B. Brown

indwelling at Cherokee by check day of April 1896.

Witness my hand and seal this

Essential in presence of

J. B. Brown ordinary.

Crowder, William
OK
Pro. 316
Cherokee Co.
INDIGENT PENSION
1895.

Name *William Crowder*

County *Cherokee*

Ground

Jan. 1896
RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

att

Geo. W. Harrison, State Printer, Atlanta.

Not a valid receipt
Rich Johnson
Sec

1896
 Jany.
 RICHARD JOHNSON,
 Secretary Executive Department.
 WARRANT HANDED TO:
 att
 Geo. W. Harrison, State Printer, Atlanta.

1896

ORNEY.
 at the point named to D. B. Brown
 by check
 1895.
 by check
 1895.
 hereby authorize

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

1. William Crowder hereby authorize

to receive and receipt for the pension allowed and request that he remit same to D. B. Brown

William Crowder at Cherokee by check

Witness my hand and seal this 7th day of April 1895.

Executed in presence of
 Wm. Crowder

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Cherokee County.

William Crowder of said State and County, desiring to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proof, and after being duly sworn true answers 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) Crowder William Crowder in Cherokee County
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? Cherokee since 1846.
3. When and where were you born? January 10th 1820 State of Tenn.
4. Did you volunteer in the Confederate Army or in the Georgia Militia? State Militia
5. When and where did you enlist? in Tennessee being in May 1864
6. In what company and regiment did you enlist? 11th Ga Regt of Cavalry Co. C
7. How long did you remain in that company and regiment? one year
8. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge or transfer?

9. For how long a period did you discharge regular military duty? one year

10. When, where and under what circumstances were you discharged from service? at surrender of the army

11. What is your present occupation? do what I can on farm not able

12. How much can you earn per annum by your own exertions or labor? some 20 or 25 dollars

13. What has been your occupation since 1865? farming

14. What sum would be necessary for your support for this pension year, and how much are you able to contribute thereto either in labor or income? some don't know how much I can

15. What is your present physical condition and how long have you been in such condition? in declining years could do any hard labor

16. Upon which of the following grounds do you base your application for pension, viz.: first, "age and poverty," second "infirmary and poverty" or third "blindness and poverty"?

17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? age & infirmity and poverty

18. What property, effects or income do you possess? none

19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same? I returned two lots of land had decided the same a way to have some I was indebted to the for money advanced by them to pay my debts

20. In what County did you reside during those years and what property did you then return for taxation? Cherokee the above land also and some I can't say here said the same

21. How were you supported during the years 1893 and 1894? I was supported by my self in 1894 I was supported by my children

22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? could not say did not contribute anything

23. What was your employment during 1893 and 1894? What pay did you receive in each year? did not work still was not able to work

24. Are you married and have you a family? If so, is your wife living and how many children have you? Give age and sex of children and their means of support? I have my wife and 4 children 6, 3 sons & 4 daughters all poor people not able to support me

William Crowder
 No. 316
 Cherokee Co.
 Indigent Pension
 1895.

INDIGENT PENSION
 1895.

Name William Crowder

County Cherokee

Ground

Jany.
 RICHARD JOHNSON,
 Secretary Executive Department.

WARRANT HANDED TO:

att

Geo. W. Harrison, State Printer, Atlanta.

brooding William
No. 316
Indigent Pension
1895.

INDIGENT PENSION

1895.

Name William Crowder
County Cherokee
Ground

1896
Guy
RICHARD JOHNSON,
Secretary Executive Department

WARRANT HANDLED TO

att

Geo. W. Harrison, Notary Public, Athens.

15. What is your present physical condition and how long have you been in such condition?
no dealings your word the only hard to be

16. Upon which of the following grounds do you base your application for pension, viz.: first, "age and poverty," second "infirmary and poverty" or third "blindness and poverty"?

17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight?
age & infirmity and poverty

18. What property, effects or income do you possess? *none*

19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same? *I retained two lots of land but decided the same a way to two sons I was indebted to for money advanced by them to pay my debts*

20. In what County did you reside during those years and what property did you then return for taxation?
Cherokee the a bare land, also and house I rent out

21. How were you supported during the years 1893 and 1894? *none said the same*

22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *could not say did not contribute anything*

23. What was your employment during 1893 and 1894? What pay did you receive in each year?
did not work, little was able to work

24. Are you married and have you a family? If so, is your wife living and how many children have you? Give age and sex of children and their means of support: *I have my wife living 6 sons & 4 daughters all over 16 years old able to support me*

25. Are you receiving a pension under any law of this State, if so what amount and for what disability?
none

Sworn to and subscribed before me this the 9th day of April 1895, *Wm. Crowder* Applicant.
A. B. Berry Ordinary
of *Cherokee* County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Cherokee County.

Wm. J. Kincaid of said State and County, having been presented as a witness in support of the application of *Wm. Crowder* for pension under the Act approved December 15th, 1894, 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? *Wm. J. Kincaid*
2. Are you acquainted with *Wm. Crowder*, the applicant, if so how long have you known him? *about 33 years*
3. Where does he reside, and how long has he been a resident of this State? *Cherokee*
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? *Confederate army A. B. Berry told him*
5. When, where and in what company and regiment did he enlist? *1864 1st Georgia Heavy Artillery Co. 11th Georgia Cavalry*
6. Were you a member of the same company and regiment? *Yes*
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? *10 or 11 months*

8. What property, effects or income has the applicant? (Give your means of knowledge.) *none of my knowledge*
9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? *could not say*
10. What is the applicant's occupation and physical condition? *could not say*
11. Is the applicant unable to support himself by labor of any sort, if so, why? *he can't work he has no action*
12. How was he supported during the years 1893 and 1894? *none and answer*
13. What portion of his support for these two years was derived from his own labor or income? *none and say*
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? *he is advanced in age and not able to work*
15. What interest have you in the recovery of a pension by this applicant? *none*

Sworn to and subscribed before me, this the 9th day of April 1895, *Wm. J. Kincaid* Applicant.
A. B. Berry Ordinary

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cherokee County.

Personally came before me *W. D. Coleman* and *C. Pickett*, both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully *William Crowder* applicant for pension under the Act of 1894, and after such personal examination, say that his precise physical condition is as follows:
They find that he is 76 years old and that he is physically unable to do manual labor sufficient to earn a living.

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

Sworn to and subscribed before me, this the 9th day of April 1895, *W. D. Coleman, M.D.* *C. Pickett, M.D.*

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cherokee County.

I, *A. B. Berry*, Ordinary in and for said County, hereby certify that the applicant *William Crowder* 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.: *W. J. Kincaid, C. Pickett & Wm. J. Kincaid* 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 were signed.

I further certify that the tax digests of *Cherokee* County show that applicant returned for taxation in his name in 1893, *\$4.00* dollars of property, and in 1894, *Five Hundred 60* dollars of property.

Witness my hand and seal of office, this 9th day of April 1895, *A. B. Berry* Ordinary of *Cherokee* County.

NOTE. 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 evidence you shall give will be the whole truth, so help you God."

No dato

Gowder, William
Cherokee County
 ACT OF 13 DEC. 1894.
 (For Those Already Enrolled)
Co. Cobb Co. (1894)
 No. *664*
 INDIGENT
 Soldier's Pension.
 1897.
 Name *William, Gowder*
 County *a. Cherokee*
 1897.
July 13
 RICHARD JOHNSON,
 Commissioner of Pensions.
 WARRANT HANDLED TO
Atty
No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears *William, Gowder* *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 *Oct* 18*46*; that he is *44* years old and by occupation *none*; 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 *12 months* in Company *C*, of *11* th Regiment of *Ar. Cavalry*; that his physical condition is as follows: *he is old & infirm & unable to do any work*
Age

that his property consists of the following items: *made no return*
Wife & 2 children

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 1897. I have heretofore as a resident of *Cherokee* county been allowed a pension for the year 189*6*.

Sworn to and subscribed before me, this, the *12th* day of *July* 1897. *Wm. Gowder*
Deponent Ordinary.

STATE OF GEORGIA,

Cherokee County.

I, *W. L. Lamm* Ordinary of said County, do certify that I am well acquainted with *William, Gowder* 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 *12th* day of *July* 1897.



W. L. Lamm
 Ordinary *Cherokee* County.

and served for the term of 12 months in Company C, of 11 th Regiment of California; that his physical condition is as follows: he is old & infirm & needs help from age

that his property consists of the following items made no return
Had no property

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1897. I have heretofore as a resident of Cherokee county been allowed a pension for the year 1896.

Sworn to and subscribed before me, this, the }
12th day of July 1897. } Wm. Crowder
A. L. Lemon Ordinary.

STATE OF GEORGIA, }
Cherokee County. }

I, A. L. Lemon Ordinary of said County, do certify that I am well acquainted with William Crowder 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 12th day of July 1897.



A. L. Lemon
Ordinary Cherokee County.

NOTE—The blanks spaces must be filled.

JAS. L. LEMON, President. ORLANDO AWTRY, Vice Pres. JESSE L. LEMON, Cashier.

ESTABLISHED IN 1864

THE S. LEMON BANKING CO.

SUCCESSORS TO S. LEMON & CO.

Doraville, Ga. SEP 20 1895 189

To whom this may concern.

This is to certify that I have known Mr. Wm. Crowder twenty-one years. He is an industrious, hardworking man, a good neighbor, and a Christian gentleman.

He always made a good living until four years ago. His health failed, also that of his wife, and having to pay heavy doctor bills, has caused him to be in reduced circumstances. Two years ago he owned a small place but turned it over to his son, who had helped

To whom this may concern.

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He always made a good living until four years ago. His health failed, also that of his wife, and having to pay heavy doctor bills, has caused him to be in reduced circumstances. Two years ago he owned a small place but turned it over to his son, who had helped

him buy for the place, in order that he might pay his doctor bills and other expenses. Now he has no home, is not able to work and has no means of support. His wife and children, and he has not able to pay for burial expenses. They are still unpaid.

Given to and Subscribed before me
this Sept 20th 1895
J J Worthwell
Notary Public for
County of

expenses. Now he has
no home, is not able to
work and has no means
of support. His wife and children
and he has not able to pay for burial expenses.
They are still unpaid. J. J. Jenson.

Sum to and sub-
scribed before me
this Sept 20th 1896
J J Jenson
Notary Public in and
for the State of Iowa