

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Clint County  
I, M. G. Morgan hereby authorize  
W. A. Windham of Albany Ga  
to receive and receipt for the pension allowed and request that he remit same to  
ordinary at Albany Ga by W. A. Windham  
Witness my hand and seal, this 5th day of Sept 1907  
M. G. Morgan (L. S.)

Executed in presence of

J. D. Davis

# QUESTIONS FOR APPLICANT.

STATE OF GEORGIA

Clint County  
I, M. G. Morgan of said State and County, desiring  
to avail himself of the Pension Act (Section 1284, Code), hereby submit his proofs, and after being duly  
sworn true answers to the following questions, depose and answers as follows:  
1. What is your name and where do you reside? (Give State, County and Postoffice.)  
M. G. Morgan Kennesaw Ga  
2. How long and since when have you been a resident of this State? Some  
70 years old resided in Georgia  
3. When and where were you born? Albany Ga 1835  
4. When and where and in what company and regiment did you enlist or serve? Company  
K-26-Ga 1862 at Waynesville Ga  
5. How long did you remain in such company and regiment? 18 months  
6. When and where was your company and regiment surrendered and discharged? Appo-  
mattox Court house Virginia  
7. Were you present with your company and regiment when it was surrendered? Not there  
8. If not present, state specifically and clearly where you were, when you left your command, for what  
cause and by whose authority? At home Albany Ga In 1863  
after port my supplies supplied for me  
my family and other people  
9. How much can you earn (gross) per annum by your own exertions or labor? Nothing  
10. What has been your occupation since 1863? Nothing  
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?" Age & poverty  
12. If upon the first ground, state how long you have been in such condition that you could not earn your  
support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the  
third, state whether you are totally blind and when and where you lost your sight. Have been  
so I could not earn own living  
ten or 12 years  
13. What property, real and personal, or income, do you possess, and its gross value? Not no 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? had none  
and a small piece of land at Waynesville Ga  
15. In what County did you reside during those years, and what property did you then return for taxation? not  
Clint County Ga  
16. How were you supported during the years 1903, 1904, 1905, 1906, 1907, 1908 and 1909? by  
friends and relations  
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? nothing  
18. What was your employment during 1903, 1904, 1905, 1906, 1907, 1908 and 1909? What pay did you  
receive in each year? had none  
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? Have 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? one time  
22. How many applications have you ever made and under what class? one under old  
shape class  
Sworn to and subscribed before me this the 5th day of Sept 1907  
J. D. Davis Ordinary  
of Clint County

Every Question MUST Be Answered.

INDIGENT PENSION

1907

Name M. G. Morgan  
County Clint  
No. 26-Ga Regt  
Approved \_\_\_\_\_ 1907

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

Ordinary will write name of Applicant, Company and  
regiment on back as indicated above.  
County Clerk, State Pension Office.  
922207

Morgan, M. G.  
Clint Ga

No. 10 Jan 1910

# QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

*Clatsop* County.

of said State and County, having been presented as a witness in support of the application of *M. J. Morgan* 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? *D. M. Riberson*  
*Clatsop County*
2. Are you acquainted with *M. J. Morgan* the applicant; if so, how long have you known him? *I am about 50 years*
3. Where does he reside, and how long and since when has he been a resident of this State? *in Clatsop County, Wash. his wife*
4. When, where and in what company and regiment did he enlist, and how do you know? *March 1862 Co. K 26th Regiment 1st Wash. Inf.*
5. Were you a member of the same company and regiment? *I was*
6. How long did he perform regular military duty? *about 18 months*
7. When and where was his command surrendered? *9th April 1865 at Appomattox Cth. Va.*
8. Were you present when it surrendered? *I was*
9. Was applicant present? *no*
10. If he was not present, where was he? *at Home*  
When did he leave his command? *late part 6.2* For what cause? *by Order*  
By what authority he left? *by Substituted* How do you know all of this? *I was present*

11. What property, effects or income has the applicant? (Give your means of knowledge.) *he has none*
12. What property, effects or income did the applicant possess in 1903, 1904, 1905, 1906, 1907, 1908 and 1909? *Land*

and what disposition, if any, did he make of same? *used it for Rubens*

13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? *had none*

14. What is the applicant's occupation and physical condition? *no good*

15. Is the applicant unable to support himself by labor of any sort; if so, why? *he is old age and physically disabled*

16. How was he supported during the years 1903, 1904, 1905, 1906, 1907, 1908 and 1909? *by friends and relatives*

17. What portion of his support for these four years was derived from his own labor or income? *none*

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code. *old age and disability*

19. Who composes family? What property have they? Children's ages and their earning capacity? *He has no family. Children are all married and gone*

20. What interest have you in the recovery of a pension by this applicant? *none, only that*

Sworn to and subscribed before me, this the *22* day of *Sept* 1907, *D. M. Riberson* Witness.

*J. T. Adams* Ordinary.

# AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

*Clatsop* County.

*Dr. G. R. Shippen* and *A. H. Culp* both known to me as reputable physicians of said County, who have personally sworn, say on oath that they have examined carefully *M. J. Morgan* applicant for pension under Section 1254, Code, and after such personal examination say that his present physical condition is as follows:

*suffering from indigestion and worked out from field work*

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

Sworn to and subscribed before me, this the *22* day of *Sept* 1907.

*J. T. Adams* Ordinary.

*Dr. Shippen M.D.*  
*A. H. Culp M.D.*

# ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

*Clatsop* County.

*J. T. Adams* Ordinary, in and for said County, hereby certify that the applicant *M. J. Morgan* resides in said County, and has been a bona fide resident of this State since the *1862* and that the witnesses, viz. *D. M. Riberson and G. R. Shippen* 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 *Clatsop* County shows that applicant returned for taxation in his name in 1901, *none* Dollars of property; in 1904, *none* Dollars of property; in 1905, *none* Dollars of property; in 1906, *none* Dollars of property; in 1907, *none* Dollars of property; in 1908, *none* Dollars of property; in 1909, *none* Dollars of property.

In my opinion the foregoing claim is *just* made in good faith.  
Witness my hand and seal of office, this *22* day of *Sept* 1907, *J. T. Adams* Ordinary, of *Clatsop* County.

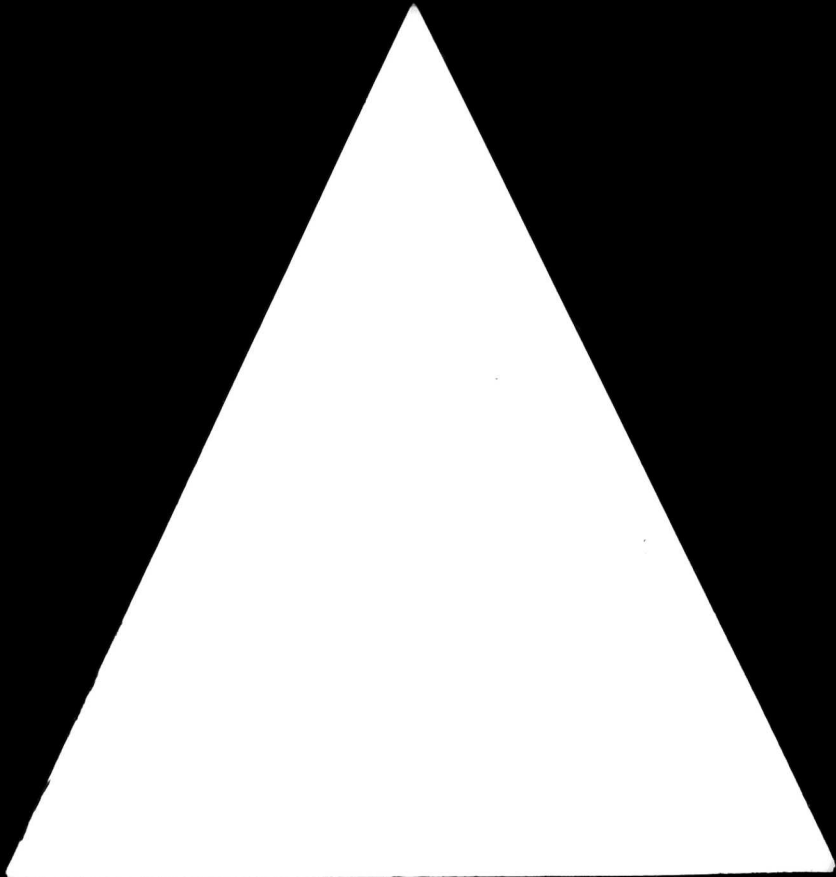
NOTE.  
1. Before any questions are answered, the Ordinary shall swear applicant, and the witnesses in the following words: "You shall true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth, as help you God."  
2. Additional affidavits may be 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.



2<sup>nd</sup> day of Sept 1907  
J. T. Deane  
Ordinary

D. M. Peterson  
Witness

3. In every case the Ordinary must verify to the satisfaction of the witness, and as to the execution of the proof as above set out.



POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County, }

James J. Morgan, hereby authorize

Wm. A. Wright, Secy. of Atlanta Ga.

to receive and receipt for the pension allowed and request that he remit same to James J. Morgan

in care of Secretary of War

Witness my hand and seal this \_\_\_\_\_ day of \_\_\_\_\_ 1897.

Executed in presence of

4000 Bonding

Wm. A. Wright

Wm. A. Wright

Pension office 5/10/1897  
 Wm. A. Wright does not answer  
 his pension - and the  
 physicians say "can not  
 support himself & wife"

Rich. J. Morgan  
 Com. of Pension

1140 - amended

INDIGENT PENSION  
 1897.

Name James J. Morgan

County Cherokee

Approved \_\_\_\_\_ 1897.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

2/22/99 3/2/97



# POWER OF ATTORNEY.

STATE OF GEORGIA,

Church County.

I, Thomas J. Morgan hereby authorize

Wm. A. Wright of Church County

to receive and receipt for the pension allowed and request that he remit same to Thomas J. Morgan

in care of Wm. A. Wright by Mail

Witness my hand and seal this 1st day of March 1897.

Executed in presence of

George Hamilton John H. Griffis Thomas J. Morgan

# Questions for Applicant.

STATE OF GEORGIA,

Church County.

11 Questions answered

I, Thomas J. Morgan of said State and County, desiring to avail himself of the Pension Act approved December 16th, 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). Thomas J. Morgan County of Church State of Ga
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? at Blackshear Ga Capt William Blackshear Co. 4th Ga Cavalry served 8 years
3. When and where were you born? 1838 Hopkins Ga
4. When and where and in what company and regiment did you enlist or serve? at Blackshear Ga Capt William Blackshear Co. 4th Ga Cavalry served 8 years
5. How long did you remain in such company and regiment? 6 months in Capt William Blackshear Co. then transferred to Capt Thomas Wiley Co. 4th Ga Cavalry
6. For how long a period did you discharge regular military duty? 8 years
7. When, where and under what circumstances were you discharged from service? at Summerville, at Home in sick pay leave until he is from Blackshear
8. What is your present occupation? farming
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"? poverty, old 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? poverty, infirmity, fifteen years wounded in the left arm and leg to such extent that I can not do any work
13. What property, effects or income do you possess and its gross value? nothing
14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any, did you make of same? nothing
15. In what County did you reside during those years and what property did you then return for taxation? County of Church returned nothing
16. How were you supported during the years 1895 and 1896? what little I could make 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? nothing
18. What was your employment during 1895 and 1896? What pay did you receive in each year? in a small farm
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? Cham wife & 2 daughters & sons and wife has small farm on which they make a little farm
20. Are you receiving any pension, if so, what amount and for what disability? now

Sworn to and subscribed before me this the

2nd day of March 1897.

George Hamilton Ordinary of Church County.

Thomas J. Morgan Applicant.

Every Question MUST be Answered

Pension Office 5/10/1897  
Mr. Morgan does not answer  
No 11 pension - since the  
physician says, can not  
support himself & wife  
Rich of Lawrence  
Came to Pension

11 years - answer

INDIGENT PENSION

1897.

Thomas J. Morgan  
County Church

Approved \_\_\_\_\_ 1897.

WARRANT HANDED TO

2/19/97

# QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Clinch County.

J. S. Morgan & J. Patten, of said State and County, having been presented as a witness in support of the application of Thomas F. Morgan 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. S. Morgan  
Waycross Ga.
2. Are you acquainted with Thomas F. Morgan, the applicant, if so how long have you known him? 29 years
3. Where does he reside, and how long has he been a resident of this State? Clinch Co Ga 29 years
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? I was in the same Co & Regiment he was in in Ala and was a Capt
5. When, where and in what company and regiment did he enlist? May 1862 11th Co Black Horse Cavalry 1st Ala Cav Regt
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? 2 1/2 years I was orderly Sgt in H Capt Nellys and aft Capt in Co Capt Johnston & won of any campaign
8. What property, effects or income has the applicant? (Give your means of knowledge.) None, I am acquainted with his personal circumstances and he has no property
9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if any did he make of same? None

10. What is the applicant's occupation and physical condition? farming  
Health not good wounded in the back and is not able to work but little

11. Is the applicant unable to support himself by labor of any sort, if so, why? He is not able to support himself by labor of any kind

12. How was he supported during the years 1895 and 1896? by what little he made on a small farm

13. What portion of his support for these two years was derived from his own labor or income? about 1/3

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? his health has since and has no help on his children & nothing to fur fur support

15. What interest have you in the recovery of a pension by this applicant? none

Sworn to and subscribed before me, this 2nd day of March 1897.

J. S. Morgan  
J. Patten Witness.  
George Goodwin Ordinary.

# AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Clinch County.

Personally came before me J. E. Lee, M. D. and L. C. Mutter, M. D., both known to me as reputable physicians of said County, who being severally sworn, say on oath that they have examined carefully

J. S. Morgan, applicant for pension under the Act of 1894, and after such personal examination say that his precise physical condition is as follows:

Wounded in the back, is very old and feeble, is not able to support himself and wife.

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 8th day of March 1897.

J. E. Lee, M. D.  
L. C. Mutter, M. D.  
George Goodwin Ordinary.

# ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Clinch County.

I, George Goodwin, Ordinary in and for said County, hereby certify that the applicant Thomas F. Morgan 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:

J. S. Morgan and J. Patten are of trustworthy character and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Clinch County show that applicant returned for taxation in his name in 1895, 0 dollars of property, and in 1896, 0 dollars of property.

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

Witness my hand and seal of office, this 8th day of March 1897.

George Goodwin Ordinary  
of Clinch County.

# NOTE.

Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answer make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God." Additional affidavits may be attached if blank spaces are insufficient.



# POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, Thos J Morgan hereby authorize  
William A Wright of Atlanta Ga  
to receive and receipt for the pension allowed, and request that he remit same to  
Thos J Morgan in care of Ordinary Homereliga  
by Express

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

Thos J Morgan [L. S.]

Executed in presence of

Bryant Astin  
George Cornelius  
Ordinary

Morgan, Thomas J  
Cherokee Co

Books and 1384.

(For Those Already Enrolled.)

NO. 2021

INDIGENT

SOLDIER'S PENSION,

1900.

Name J J Morgan  
County Cherokee

WARRANT ISSUED

January 21st 1900

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO  
Wright  
Geo. W. Harrison, Sales Printer, Atlanta.

No data

Morgan, Thomas J  
Cherokee Co

CODE SECTION 1384

(For Those Already Enrolled.)

No. 102

INDIGENT

SOLDIER'S PENSION.

1901.

Name J J Morgan  
County Cherokee

WARRANT ISSUED

Jan 14 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO  
Wright  
Geo. W. Harrison, Sales Printer, Atlanta.

7/1/1901

No data

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, J J Morgan hereby authorize W. M. Wright  
Comp Gen of Atlanta Ga  
to receive and receipt for the pension allowed and request that he remit same to  
J J Morgan at Homereliga Ga in care of  
by Ordinary mail

Witness my hand and seal, this 24 day of Dec 1900.

J J Morgan [L. S.]

Executed in presence of

George Cornelius  
Ordinary

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Clinch County.

Personally appears Thomas J. Morgan of Clinch 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 1st day of June 1862; that he is 63 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 H, of 4th Regiment of Georgia Cavalry; that his physical condition is as follows: old and infirm & injured in back, and unable to do manual labor

that his property consists of the following items I have no property in my own name

of the value of 00 Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1900. I have heretofore as a resident of Clinch county been allowed a pension for the year 1899 my application has been renewed for 1899 but having not received it

Sworn to and subscribed before me, this, the 1st day of January 1900. Thomas J. Morgan Ordinary. George Cornelius

State of Georgia,

Clinch County.

I, George Cornelius Ordinary of said County, do certify that I am well acquainted with Thomas J. Morgan 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.



George Cornelius Ordinary Clinch County.

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

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Clinch County.

Personally appears Thomas J. Morgan of Clinch 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 1st day of January 1862; that he is 64 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 H, of 4th Regiment of Georgia Cavalry; that his physical condition is as follows: disabled in the back, has asthma

that his property consists of the following items \_\_\_\_\_

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1901. I have heretofore as a resident of Clinch county been allowed a pension for the year 1900

Sworn to and subscribed before me, this the 24th day of December 1900. Thomas J. Morgan Ordinary. George Cornelius

STATE OF GEORGIA,

Clinch County.

I, George Cornelius Ordinary of said County, do certify that I am well acquainted with Thomas J. Morgan 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 24th day of December 1900.



George Cornelius Ordinary Clinch County.

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



# POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch County.

I, T. F. Morgan hereby authorize W. A. Wright of Bulloch Co. Ga to receive and receipt for the pension allowed and request that he remit same to W. L. Howell at Homer ville Ga by mail

Witness my hand and seal, this 6 day of June 1902.  
T. F. Morgan [L. S.]

Executed in presence of

W. L. Howell

CODE SECTION 124

( FOR THOSE ALREADY ENROLLED. )

No. 5131

INDIGENT

**SOLDIER'S PENSION  
1902.**

Name T. F. Morgan  
County Clinch  
Co. H Regiment 4th

WARRANT ISSUED

24 1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Pr

Gen. W. Harrison, State Prison, Atlanta.

no data

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch County.

I, Thos. F. Morgan hereby authorize W. A. Wright of Attala Ga to receive and receipt for the pension allowed, and request that he remit same to J. T. Dams ordinary at Homer ville Ga by mail

Witness my hand and seal, this 1st day of June 1907.

Thos. F. Morgan [L. S.]

Executed in presence of

J. T. Dams

CODE SECTION 124

( FOR THOSE ALREADY ENROLLED )

No. 4662

INDIGENT

**SOLDIER'S PENSION  
1907.**

Name Thos. F. Morgan  
County Clinch  
Co. H Regiment 4th

WARRANT ISSUED

1907.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Gen. W. Harrison, State Prison, Atlanta.

no data

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Olinch County.

Personally appears

Thos. J. Morgan of Olinch

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 9th day of July 1828; that he is 68 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 44 of 4th Regiment of Georgia Cavalry; that his physical condition is as follows:

crippled in back and  
suffered with rheumatism  
that his property consists of the following items:

None

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1902. I have heretofore as a resident of Olinch county been allowed a pension for the year 1 1901 and 1902

Sworn to and subscribed before me, this the

6 day of June 1902.

W. L. Howell

Ordinary.

STATE OF GEORGIA,

Olinch County.

I, W. L. Howell Ordinary of said County, do certify that I am well acquainted with Thos. J. Morgan 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 June 1902.

Ordinary Olinch County.

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

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Olinch County.

Personally appears

Thos. J. Morgan of Olinch

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 9th day of July 1828; that he is 68 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 44 of 4th Regiment of Georgia Cavalry; that his physical condition is as follows: Supremely and soundly

that his property consists of the following items:

of the value of None Dollars. I am now earning by my labor, None 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 Olinch County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the

12 day of Jan 1907.

J. T. Dams Ordinary.

State of Georgia,

Olinch County.

I, J. T. Dams Ordinary of said County,

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

Given under my official signature and seal this

12 day of Jan 1907.

Ordinary Olinch County.

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



# POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch County. }  
I, W. F. Wright hereby authorize J. F. Morgan of Clinch County, Ga.  
to receive and receipt for the pension allowed and request that he remit same to  
W. F. Howell at Homerville, Ga.  
by mail

Witness my hand and seal, this 28 day of January 1903.  
J. F. Morgan [L. S.]

Executed in presence of

W. F. Howell

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch County. }  
I, J. F. Morgan hereby authorize  
W. F. Wright of Clinch County, Ga.  
to receive and receipt for the pension allowed, and request that he remit same to  
W. F. Howell at Homerville, Ga.  
by mail

Witness my hand and seal, this 13 day of January 1904.  
J. F. Morgan [L. S.]

Executed in the presence of

W. F. Howell

Morgan, J. F.  
Clinch Co.

CODE SECTION 134.

(FOR THOSE ALREADY ENROLLED.)

No. 5654

INDIGENT

**SOLDIER'S PENSION  
1903.**

Name J. F. Morgan  
County Clinch  
Co. 4th Regiment Cornet

WARRANT ISSUED

3/24 1903

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

W  
Gen. Harrison, State Printer, Atlanta.

no date

Morgan, Thomas F.  
Clinch Co.

(FOR THOSE ALREADY ENROLLED.)

No. 5758

INDIGENT

**SOLDIER'S PENSION  
1904.**

Name Thomas F. Morgan  
County Clinch  
Co. 4th Regiment

WARRANT ISSUED

3/24 1904

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

W. F. Howell  
Gen. Harrison, State Printer, Atlanta.

no date

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Clinch County.

Personally appears T. H. Morgan of Clinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 9 day of Feb 1887; that he is 65 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 years in Company H of 4th Regiment of Georgia Cavalry Capt. Allen Strickland's Co.; that his physical condition is as follows:

Poor and infirm, lame  
as the result of the war  
that his property consists of the following items:

None

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

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

Sworn to and subscribed before me, this the 28 day of January 1903.  
W. Z. Howell Ordinary.

STATE OF GEORGIA,

Clinch County.

I, W. Z. Howell Ordinary of said County, do certify that I am well acquainted with T. H. Morgan 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 28 day of January 1903.

W. Z. Howell  
Ordinary Clinch County.



NOTE.—The blank spaces must be filled.  
NOTE.—Affidavits should not be attested before January 1st, 1904.

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Chinch County.

Personally appears Thomas H. Morgan of Chinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 9 day of Feb 1887; that he is 67 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 H of 4th Regiment of Cavalry of Georgia Capt. Allen Strickland's Co.; that his physical condition is as follows: As stated in back and hand

that his property consists of the following items: Nothing

of the value of nothing 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 Clinch County been allowed a pension for the year 1903.

Sworn to and subscribed before me, this the 13 day of Jan 1904.  
W. Z. Howell Ordinary.

STATE OF GEORGIA,

Clinch County.

I, W. Z. Howell Ordinary of said County, do certify that I am well acquainted with Thomas H. Morgan 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 13 day of January 1904.

W. Z. Howell  
Ordinary Clinch County.



NOTE.—The blank spaces must be filled.  
NOTE.—Affidavits should not be attested before January 1st, 1904.

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch COUNTY.

I, Thomas F. Morgan hereby authorize  
H. A. Wright of Atlanta - Ga  
to receive and receipt for the pension allowed, and request that he remit same to  
me at Hamersville Ga  
by mail

WITNESS my hand and seal, this 1 day of Jan 1905.

Thomas F. Morgan [L. S.]

Executed in the presence of

L. E. Dickerson

Morgan, Thomas F.  
Clinch County

CODE SECTION 1254.

(FOR THOSE ALREADY ENROLLED.)

No. 4341

INDIGENT

**SOLDIER'S PENSION**  
**1905.**

Name Thomas F. Morgan

County Clinch

Co. Regiment

WARRANT ISSUED

**MAR 1 1905.**

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

me

Geo. W. Harrison, Engraver, 208 State Printer, Atlanta.

*no date*

# POWER OF ATTORNEY.

STATE OF GEORGIA.

Clinch COUNTY.

I, Thos F Morgan hereby authorize  
H. A. Wright of Fulton Co. Ga  
to receive and receipt for the pension allowed, and request that he remit same to  
J. T. Drake ordinary at Hamersville Ga  
by mail

WITNESS my hand and seal, this 2nd day of Jan 1906.

Thos F. Morgan [L. S.]

Executed in the presence of

J. T. Drake

Morgan, Thomas F.  
Clinch County

CODE SECTION 1254.

(FOR THOSE ALREADY ENROLLED.)

No. 1634

INDIGENT

**SOLDIER'S PENSION**  
**1906.**

Name Thos. F. Morgan

County Clinch

Co. 1st Regiment 4th Ga

Corvelly

WARRANT ISSUED

**JAN 26 1906.**

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Me

Geo. W. Harrison, Engraver, 208 State Printer, Atlanta.

*no date*

FOR APPLICANTS HERETOFORE ATTORNEY PENSIONS

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Clinch County.

Personally appears

*T. H. Morgan* of *Clinch*

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 *12* day of *Feb.* 1837; that he is *67* 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 *H*, of *4*th Regiment of *Georgia Cavalry*; that his physical condition is as follows:

*Poor and infirm and unable to work*

that his property consists of the following items:

*none*

of the value of

*225*

Dollars. I am now earning,

by my labor,

*00*

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

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

Sworn to and subscribed before me, this the

*1* day of *Jan* 1905.

*W. L. Howell*

Ordinary.

STATE OF GEORGIA,

Clinch County.

I,

*W. L. Howell*

Ordinary of said County,

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

Given under my official signature and seal, this

*2* day of *Jan* 1905.

Ordinary

*Clinch* County.



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

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Clinch County.

Personally appears

*Thos. F. Morgan* of *Clinch*

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the *9* day of *July* 1811; that he is *68* 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 *H*, of *4*th Regiment of *Georgia Cavalry*; that his physical condition is as follows: *Infirmity and Poverty*

that his property consists of the following items:

*none*

of the value of

*none*

Dollars. I am now earning

by my labor,

*nothing*

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

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

Sworn to and subscribed before me, this the

*25* day of *Jan* 1906.

*Thos. F. Morgan*

Ordinary.

State of Georgia,

Clinch County.

I,

*J. T. Howell*

Ordinary of said County,

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

Given under my official signature and seal, this

*25* day of *Jan* 1906.

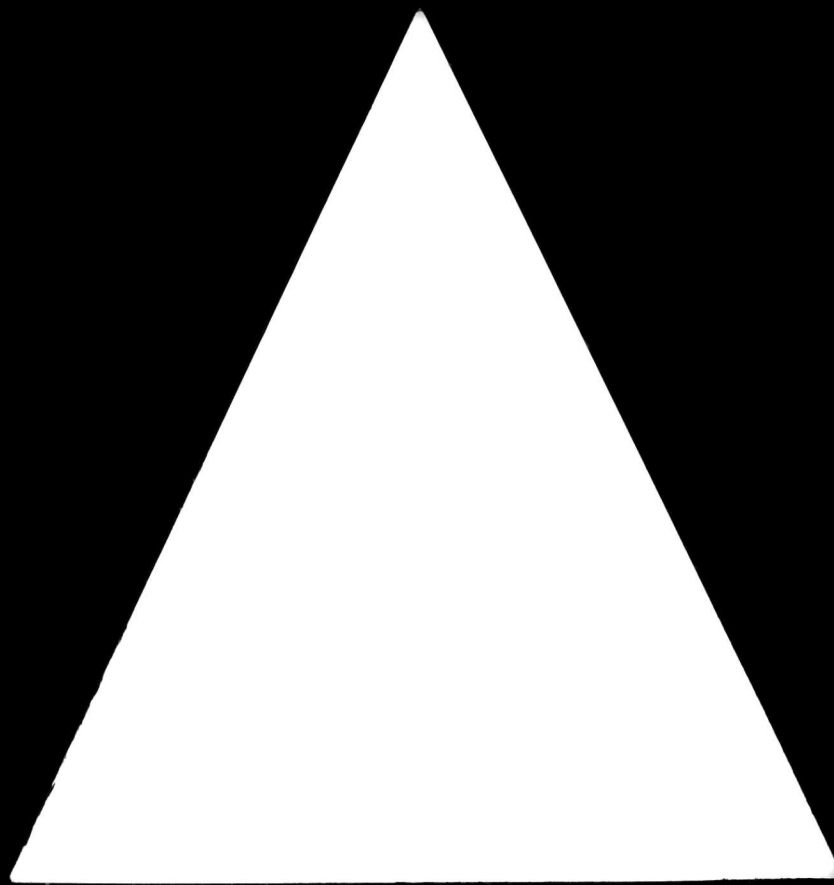
Ordinary

*Clinch* County.



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





POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County. }

I, Dr. M. Gibson

hereby authorize

James A. Wright to act for me in all matters relating to the pension allowed and request that he remit same to Dr. M. Gibson

to receive and accept for the pension allowed and request that he remit same to Dr. M. Gibson in case of George Wright my hand and seal this 1st day of March 1897.

Witness my hand and seal of

David M. Gibson

George Wright  
Ordinary

Riberson, D. M.

No. 2113

Church Co.

INDIGENT PENSION

1826 1897.

Name Dr. M. Gibson

County Church

Approved 2/1 1897.

WARRANT HANDED TO

J. R. Allen

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

2/9/97

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, D. M. Riberson hereby authorize

George A. Wright to receive and receipt for the pension allowed and request that he remit same to D. M. Riberson

at Hamersburg by Mail  
Witness my hand and seal this March day of March 1897.

Executed in presence of

R. J. Williams  
George Combs  
Ordinary

David M. Riberson

Riberson, D. M.

No. 2113  
Co. Lynch Co.

INDIGENT PENSION

12th 1897.

Name D. M. Riberson

County Cherokee

Approved 7/1 1897.

5/1/97

WARRANT RETURNED TO  
W. A. W.

3/19/97

# Questions for Applicant.

STATE OF GEORGIA,

Cherokee County.

David M. Riberson of said State and County, desiring to avail himself of the Pension Act approved December 16th, 1894, hereby submits his proof, 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? David M. Riberson, Cherokee Co. Ga.
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? Have named place been a resident 62 years
3. When and where were you born? Born 20 3/4 1831 in Camden Co. Ga.
4. When and where and in what company and regiment did you enlist or serve? In March 1862 at Maconville in Company "K" 26th Reg.
5. How long did you remain in such company and regiment? Until the surrender from the date of my interest
6. For how long a period did you discharge regular military duty? All the time
7. When, where and under what circumstances were you discharged from service? At the surrender of the fort at Appomattox Court House in 1865
8. What is your present occupation? Primarily a farm labor
9. How much can you earn (gross) per annum by your own exertions or labor? About \$250 per annum
10. What has been your occupation since 1865? Farming, leading and being job
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"? Age, infirmity & 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? I have been gaining feeble for several years and owing to partial blindness I have not been able to work but little for the last 5 or 6 years.
13. What property, effects or income do you possess and its gross value? Name whatever I own a security wearing Appomattox
14. What property, effects or income did you possess in 1864, 1895 and 1896 and what disposition, if any, did you make of same? I had none
15. In what County did you reside during those years and what property did you then return for taxation? In Cherokee Co. I returned nothing at all
16. How were you supported during the years 1895 and 1896? By doing job work
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? Cost say I contributed but little
18. What was your employment during 1895 and 1896? What pay did you receive in each year? I got no regular work or pay only job work & cost say
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? I have a family but do not live with them or they with me and they do not depend on me for support
20. Are you receiving any pension, if so, what amount and for what disability? Name whatever

Sworn to and subscribed before me this the

1st day of April 1897.

George Combs Ordinary  
of Cherokee County.

David M. Riberson  
Applicant.

Every Question MUST be Answered

# QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Chiruch County.

John C. Highsmith, of said State and County, having been presented as a witness in support of the application of David M. Rehman 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? John C. Highsmith  
and reside at High Street Chiruch Co Ga
2. Are you acquainted with David M. Rehman, the applicant, if so how long have you known him? I am and have known him for 38 year
3. Where does he reside, and how long has he been a resident of this State? he reside near  
Wingman Church Cobb County having been a resident of Ga 62
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? he served in Confederate Army, I served with  
him in same Reg
5. When, where and in what company and regiment did he enlist? enlisted March 62 at  
Magnaville Ga in Company K 26 Reg Reg
6. Were you a member of the same company and regiment? Yes Reg 8
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? was in regular  
line of duty 3 year he was generally engaged in detailed  
duty always found at his post of duty and was a good  
soldier Discharged at Appomattox Court house at the
8. What property, effects or income has the applicant? (Give your means of knowledge.)  
No property No income whatever  
I know from having lived near him for the past 16 year
9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if any did he make of same? None whatever
10. What is the applicant's occupation and physical condition? Very feeble  
working on farm and teaching a school  
when able, his physical condition is bad
11. Is the applicant unable to support himself by labor of any sort, if so, why?  
He is utterly unable to support himself  
at any labor he can do
12. How was he supported during the years 1895 and 1896?  
By working for his vitals and clothes
13. What portion of this support for these two years was derived from his own labor or income?  
part of it and the remainder by friends relatives
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 unable to perform any kind  
labor or do any work whatever, he is very feeble  
and has partial paralysis
15. What interest have you in the recovery of a pension by this applicant? None whatever

Sworn to and subscribed before me, this  
the 15th day of March 1897.

John C. Highsmith  
Witness.

George Comdine Ordinary.

# AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Chiruch County.

Personally came before me J. E. Lee M.D. and  
S. C. Mutton M.D., both known to me as reputable physicians  
of said County, who being severally sworn, say on oath that they have examined carefully  
David M. Rehman applicant for pension under the Act of 1894, and after  
such personal examination say that his precise physical condition is as follows:

Paralysis old age and infirmity

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 15th day of March 1897.

George Comdine Ordinary.

# ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Chiruch County.

I, George Comdine, Ordinary in and for said County, hereby certify  
that the applicant David M. Rehman 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.:  
J. C. Highsmith  
are of trustworthy character and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Chiruch County show that applicant  
returned for taxation in his name in 1895, 0 dollars  
of property, and in 1896, 0 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 March 1897.

George Comdine Ordinary  
of Chiruch County.

# NOTE.

Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall  
true answer make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God."  
Additional affidavits may be attached if blank spaces are insufficient.



# POWER OF ATTORNEY.

State of Georgia.

Clinch County.

I, D. M. Riberson hereby authorize Wm. A. Wright  
Comd Gen of Atlanta Ga.  
 to receive and receipt for the pension paid hereon and request that he remit same to  
D. M. Riberson by Mail  
 at in care of ordinary  
Bonmarville

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 10<sup>th</sup>  
 day of January 1898.

Executed in presence of

H. H. Anderson  
George Cornelius  
Ordinary

D. M. Riberson [L. S.]

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch County.

I, D. M. Riberson, hereby authorize  
William A. Wright Comd Gen of Atlanta  
 to receive and receipt for the pension allowed, and request that he remit same to  
Ordinary at Annville  
 by mail

Witness my hand and seal this 6<sup>th</sup> day of January 1898.

Executed in presence of

J. G. Griffis } D. M. Riberson (L. S.)  
George Cornelius  
Ordinary

Riberson D. M.  
Clinch G.  
(For Those Already Enrolled.)

NO. 2100

INDIGENT

**SOLDIER'S PENSION,  
1898.**

Name D. M. Riberson  
 County Clinch

WARRANT ISSUED

1/24 1898.

RICHARD JOHNSON,  
 Commissioner of Pensions.

WARRANT HANDLED TO

W. A. W.

GRANT W. JOHNSON, STATE PRINTER, ATLANTA.

No date

Riberson D. M.  
Clinch County

GRANT W. JOHNSON, STATE PRINTER, ATLANTA.

(For Those Already Enrolled.)

No. 1966

INDIGENT

**SOLDIER'S PENSION,  
1899.**

Name D. M. Riberson  
 County Clinch

WARRANT ISSUED

1/17 1899

RICHARD JOHNSON,  
 Commissioner of Pensions.

WARRANT HANDLED TO

W. A. W.

GRANT W. JOHNSON, STATE PRINTER, ATLANTA.

No date

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Clinch County.

Personally appears D. M. Riberson of Clinch 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 20<sup>th</sup> day of February 1885; that he is 62 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of three years in Company R, of 26<sup>th</sup> Regiment of Georgia; that his physical condition is as follows: debilitated, old age & infirmity & poverty

that his property consists of the following items

Nothing

of the value of 0 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 Clinch county been allowed a pension for the year 1897.

Sworn to and subscribed before me, this, the 10<sup>th</sup> day of January 1898, } D. M. Riberson  
George Cornelius Ordinary.

State of Georgia,  
Clinch County.

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

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



George Cornelius  
Ordinary Clinch County.

NOTE.—The blank spaces must be filled.

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Clinch County.

Personally appears D. M. Riberson of Clinch 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 20<sup>th</sup> day of February 1885; that he is 62 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 years in Company R, of 26<sup>th</sup> Regiment of Georgia; that his physical condition is as follows: debilitated, old age, feebleness and poverty

that his property consists of the following items

0

of the value of 0 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 Clinch county been allowed a pension for the year 1897.

Sworn to and subscribed before me, this, the 10<sup>th</sup> day of January 1898, }  
D. M. Riberson  
Ordinary.

State of Georgia,  
Clinch County.

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

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



George Cornelius  
Ordinary Clinch County.

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

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Celich County.

I, D M Ribron hereby authorize William F Wright of St Paul, Georgia to receive and receipt for the pension allowed, and request that he remit same to Ordinary at Homerville by mail.

Witness my hand and seal, this 8<sup>th</sup> day of January 1900.

D M Ribron [L. S.]

Executed in presence of

George Cornation  
Ordinary

CODE SEC. 1254.

(For These Already Enrolled.)

NO. 2020

INDIGENT

SOLDIER'S PENSION,  
1900.

Name D M Ribron  
County Celich

WARRANT ISSUED

January 2<sup>nd</sup> 1900.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

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

No data

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Celich County.

I, D M Ribron hereby authorize Wm F Wright of St Paul, Ga to receive and receipt for the pension allowed and request that he remit same to W. Z. Howell Ordinary at Homerville, Ga by mail.

Witness my hand and seal, this 28<sup>th</sup> day of January 1901.

D M Ribron [L. S.]

Executed in presence of

W. Z. Howell Ordinary

CODE SECTION 1254.

(For These Already Enrolled.)

No. 3941

INDIGENT

SOLDIER'S PENSION.  
1901.

Name D M Ribron  
County Celich

WARRANT ISSUED

2/3 1901.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

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

No data

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Clinch County.

Personally appears D. M. Ribron of Clinch 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 20 day of February 1875; that he is 64 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 the war in Company H, of 26th Regiment of Georgia Volunteers; that his physical condition is as follows: Infirmity Paralysis old age and blind

that his property consists of the following items:

nothing

of the value of 0 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 Clinch county been allowed a pension for the year 1894.

Sworn to and subscribed before me, this, the 8 day of January 1900.

W. L. Howell Ordinary.

State of Georgia,

Clinch County.

I, George Lomelius Ordinary of said County, do certify that I am well acquainted with D. M. Ribron 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 January 1900.



George Lomelius Ordinary Clinch County.

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

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Clinch County.

Personally appears D. M. Ribron of Clinch 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 \_\_\_\_\_ 1835; that he is 65 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of \_\_\_\_\_) during the war between the States, and served for the term of three years in Company H, of 26th Regiment of Georgia Volunteers; that his physical condition is as follows: Old and infirm just able to knock about

that his property consists of the following items:

none

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1901. I have heretofore as a resident of \_\_\_\_\_ county been allowed a pension for the year 1 \_\_\_\_\_.

Sworn to and subscribed before me, this, the 28 day of January 1901.

W. L. Howell Ordinary.

STATE OF GEORGIA,

Clinch County.

I, W. L. Howell Ordinary of said County, do certify that I am well acquainted with D. M. Ribron 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 28

day of January 1901.



W. L. Howell Ordinary Clinch County.

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



# POWER OF ATTORNEY.

STATE OF GEORGIA,

Clutch County.

I, D. M. Ribron hereby authorize Wm. A. Wright  
of Hultholm, Ga

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

W. F. Howell at Homer, Ga  
by mail

Witness my hand and seal, this 1 day of June 1902.  
D. M. Ribron [L. S.]

Executed in presence of

W. F. Howell

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Clutch County.

I, D. M. Ribron hereby authorize W. A. Wright  
of Hultholm, Ga

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

W. F. Howell at Homer, Ga  
by D. M. Ribron

Witness my hand and seal, this 26 day of January 1903.  
D. M. Ribron [L. S.]

Executed in presence of

W. F. Howell

Ribron D. M.  
Clutch Co.

(FOR THOSE ALREADY ENROLLED.)

No. 5132

INDIGENT

SOLDIER'S PENSION  
1902.

Name D. M. Ribron  
County Clutch  
Co. K Regiment 26

WARRANT ISSUED

344 1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W

Gen. W. Harrison, State Printer, Atlanta.

no data

Ribron D. M.  
Clutch Co

(FOR THOSE ALREADY ENROLLED.)

No. 5656

INDIGENT

SOLDIER'S PENSION  
1903.

Name D. M. Ribron  
County Clutch  
Co. 26th Regiment

WARRANT ISSUED

3/24 1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W

Gen. Harrison, State Printer, Atlanta.

no data

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Clinch County.

Personally appears D. M. Ribron of Clinch 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 20 day of Feb. 1878; that he is 65 years old and by occupation a Farmer that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 1 1/2 years in Company B of 26th Regiment of Georgia Volunteers; that his physical condition is as follows: has a partial prostration and is unable to do any work whatever that his property consists of the following items: has 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 1902. I have heretofore as a resident of Clinch county been allowed a pension for the year 1901.

Sworn to and subscribed before me, this the 1 day of Jan 1902.

Wm. L. Howell Ordinary. D. M. Ribron

STATE OF GEORGIA,

Clinch County.

I, W. L. Howell Ordinary of said County, do certify that I am well acquainted with D. M. Ribron 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 3 day of Jan 1902.

W. L. Howell Ordinary Clinch County.

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

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Clinch County.

Personally appears D. M. Ribron of Clinch 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 20 day of Feb. 1878; that he is 68 years old and by occupation a Farmer that he enlisted in the military service of the Confederate States (or of the State of \_\_\_\_\_) during the war between the States, and served for the term of 3 years in Company A of 26th Regiment of Georgia Volunteers; that his physical condition is as follows: old, poor and from infirmity and poverty unable to work that his property consists of the following items: none

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

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

Sworn to and subscribed before me, this the 26 day of January 1903.

W. L. Howell Ordinary. D. M. Ribron

STATE OF GEORGIA,

Clinch County.

I, W. L. Howell Ordinary of said County, do certify that I am well acquainted with D. M. Ribron 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 26 day of January 1903.

W. L. Howell Ordinary Clinch County.

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

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch COUNTY.

I, David M. Rife hereby authorize  
W. A. Wright of Butter County  
to receive and receipt for the pension allowed, and request that he remit same to  
W. L. Howell at Homer, Ga.  
by check

WITNESS my hand and seal, this 15 day of January 1904.

David M. Rife [L. S.]

Executed in the presence of

W. L. Howell

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch COUNTY.

I, D. M. Rife hereby authorize  
W. A. Wright of Butter County  
to receive and receipt for the pension allowed, and request that he remit same to  
me at Homer, Ga.  
by check or draft

WITNESS my hand and seal, this 2 day of Jan 1905.

D. M. Rife [L. S.]

Executed in the presence of

R. G. Droke

Rife, David M.  
Clinch County

CODE SECTION 1354  
(FOR THOSE ALREADY ENROLLED.)

No. 1960

INDIGENT

SOLDIER'S PENSION

1904.

Name David M. Rife  
County Clinch

Co. \_\_\_\_\_ Regiment \_\_\_\_\_

WARRANT ISSUED

FEB 24 1904

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. A. Wright  
Butter County  
check  
Geo. W. Harrison, State Printer, Atlanta.

no date

Rife, David M.  
Clinch County

CODE SECTION 1354  
(FOR THOSE ALREADY ENROLLED.)

No. 6308

INDIGENT

SOLDIER'S PENSION

1905.

Name D. M. Rife  
County Clinch

Co. \_\_\_\_\_ Regiment \_\_\_\_\_

WARRANT ISSUED

MAR 1 1905

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. A. Wright  
Butter County  
check or draft  
Geo. W. Harrison, State Printer, Atlanta.

NO DATA

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Clinch County.

Personally appears David M. Ribron of Clinch 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 20 day of Feb. 1835; that he is 89 years old and by occupation a Farmer, 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 for the term of 3 yrs in Company H of 26 th Regiment of Georgia Infantry; that his physical condition is as follows: Paralysis

that his property consists of the following items:

nothing

of the value of no 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 Clinch County been allowed a pension for the year 1903.

Sworn to and subscribed before me, this the 13 day of Jan 1904, David M. Ribron Ordinary.

STATE OF GEORGIA,

Clinch County.

I, W. F. Howell Ordinary of said County, do certify that I am well acquainted with David M. Ribron 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 13 day of January 1904.

Ordinary Clinch County.

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



# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Clinch County.

Personally appears D. M. Ribron of Clinch 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 20 day of Feb. 1835; that he is 89 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 yrs in Company H of 26 th Regiment of Georgia Infantry; that his physical condition is as follows:

Paralyzed infirm unable to work  
that his property consists of the following items: nothing

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

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

Sworn to and subscribed before me, this the 1 day of Jan 1905, W. F. Howell Ordinary.

STATE OF GEORGIA,

Clinch County.

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

Given under my official signature and seal, this 2 day of Jan 1905.

Ordinary Clinch County.

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

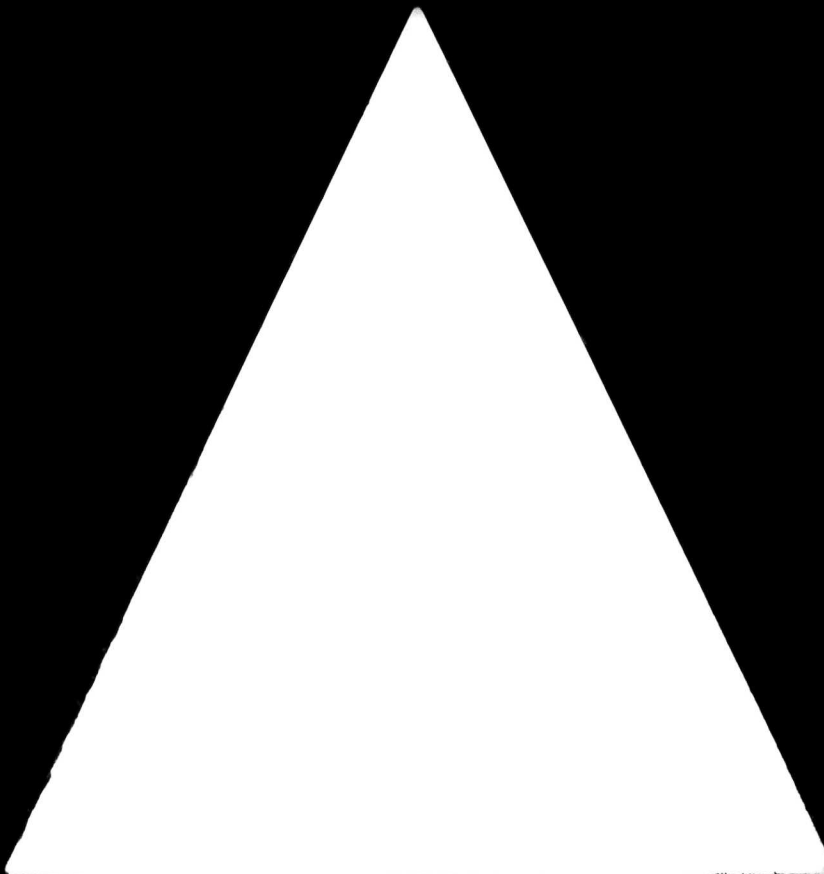




Seal  
here

Ordinary \_\_\_\_\_ County.

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



# ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

COUNTY

I, \_\_\_\_\_ Ordinary of said County, do certify that I

know Mrs. \_\_\_\_\_ the applicant for this pension, and that she is the

person she represents herself to be, and that she is a bona fide continuing resident of said County and was

on the \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_.

That I also know \_\_\_\_\_ witnesses as to marriage, and I therefore

before signing the foregoing 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 \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_.  
(SEAL) \_\_\_\_\_  
Ordinary.

County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the 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 shall give will be the truth. So help you God."  
2. All affidavits may be attached if found proper and insufficient.  
3. All affidavits must be sworn to before the Ordinary.  
4. Only widows who married prior to first January, 1861, are entitled to pension.  
5. Attached certified copies of marriage license if obtainable. If not, prove marriage by some person, or by general service.  
6. Widows of Disabled Pensioners must use the Home 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.

## 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

Name

Widow of

Company

Regiment

Approved

J. W. LINDSEY,  
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

9/2-1919

# ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

CLINCH

COUNTY.

I, W. V. Mangrove, Ordinary of said County, do certify that I know Mrs. Ellen Ribarson 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 16th day of May, 1912.

That I also know. Nathaniel Knight witness as to marriage, and I also know

that both of the foregoing were duly sworn to and 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 1st day of Sept. 1922

(SEAL.)

**Ordinary.**

CHINSE

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.

Piderson, Ellen (Mrs.)  
Cinch Co.

# 1923

## Application for Pension Due Deceased Pensioner

(UNDER ACT 1904)

(To pay expenses of last illness or funeral)

Kate C. Passord Ordinar

For Mrs. Edwin Peterson  
of Clinch County

## Old or New Class?

Died July - 26<sup>th</sup>, 1921

Amount, \$ 180.00

Approved and ordered paid.

Wm W. Clark 14 Dec 192

JOHN W. CLARK,  
Commissioner of Pensions.

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

# ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

CLINCH

COUNTY

I, W. V. Mangrove, Ordinary of said County, do certify that I know Mrs. Ellen Riberson, 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 May, 1912.

That I also know Nathaniel Knight, witness as to marriage, and that both of the foregoing were duly sworn to before signing this respective affidavit 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 1st day of Sept, 1912.

(SEAL)

W. V. Mangrove Ordinary.

CLINCH

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.

Riberson, Ellen (Mrs.)  
Clinch Co.

**1923**

## Application for Pension Due Deceased Pensioner

(UNDER ACT 1904)

(To pay expenses of last illness or funeral)

W. C. Pappard Ordinary

For Mrs. Ellen Riberson

of Clinch County

Old or New Class?

Died July - 26th, 1922

Amount, \$ 180.00

Approved and ordered paid.

John W. Clark 14 Dec 1922

JOHN W. CLARK,  
Commissioner of Pensions.

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

## Widow's Application

To be filled out by the Widow in Her Own Right When Husband Was on the Indigent Roll or Pension Under Act of July 11, 1910—As Amended by Act of 1912.

County Clinch

Name Mrs. Ellen Riberson

Widow of AT Riberson

Died July 26th

Year 1922

at the age of

64 years

at the date of

death

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7/26-1919

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# WIDOW'S AFFIDAVIT

STATE OF GEORGIA,

CLINCH COUNTY.

Personally before me comes Mrs. Ellen Riberon, of said County, who, after being duly sworn, says that she is the widow of D.M. Riberon, to whom, in the County of CLINCH, State of Ga., she was married on the 24th day of Dec. 1855, and that she remained his wife, and resided with him to the date of his death in Nov. 2nd, 1917, and that she has not since his death remarried. At the time of his death he was a resident of CLINCH County, in said State of Georgia, and he was on the 1917 Pension Roll of the State and paid a pension of \$20. in CLINCH County for 1917 per annum, on account of being a soldier in Company K, Regiment 26th Ga. (Volunteers or State Militia)

That she is now a bona fide resident citizen of said County of CLINCH, and she has so continuously resided since 1st day of Jan. 1916, 19--

Sworn to and subscribed before me, this the

1st day of Sept. 1917.

Ordinary

of CLINCH County.

(SEAL)

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

STATE OF GEORGIA, Clinch COUNTY

Personally before me come Nathaniel Knight, 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. Ellen Riberon, who made the foregoing affidavit, is the lawful widow of D.M. Riberon, who died in Clinch County in said State of Georgia, on 2nd day of Nov. 1917, and that she has not since remarried. That she became the wife of D.M. Riberon, on the 24th day of Dec. 1855, and that she and he had resided together as man and wife continuously since 24th day of Dec. 1855, and that the D.M. Riberon, was the same man who was on the pension roll of said State Georgia, from Clinch County when he died.

Sworn to and subscribed before me, this the

5th day of July 1917

Ordinary

of Georgia County.

(SEAL)

## Application for Pension Due to a Deceased Pensioner

(Under the Act of August 15, 1904)

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

GEORGIA, Clinch County.

Personally before me, the Ordinary of said County, comes J.J. Riberon, of said County, who, after being sworn, on oath says that he knew Mrs. Ellen Riberon, of said County, and that said pensioner was on the Widows Pension Roll of Clinch County at the time of death, which occurred in Clinch County, in this State, on the 26th day of July 1920, and that a Pension of Dollars was due pensioner and unpaid at the time of pensioner's death. That he left no widow or dependent children surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$102.00 per sworn statement fully and completely itemized, hereto attached.

Sworn to and subscribed before me

this 4th day of Dec. 1920

Kate C. Pafford, Ordinary.

County.

## AFFIDAVIT OF ORDINARY

GEORGIA, Clinch County.

I, Kate C. Pafford, Ordinary of said County, do certify that I personally know J.J. Riberon, who is a resident citizen of said County, and that said person is of a truthful and trustworthy character, entitled to full faith and credit.

I also knew Mrs. Ellen Riberon, while in life and that this was the same person whose name appears on the Widows Pension Roll of Clinch County, and was paid a Pension of one hundred (\$100.00) Dollars in said County for 1920, and I now believe said pensioner to be dead.

Given under my hand and official seal, this 4th day of Dec. 1920

(SEAL)

Clinch County.

### INSTRUCTIONS:

- 1st. For use in all cases where pensioner died after January 1st, had not been out of State longer than twelve months, and died without owing sufficient property to pay such expenses. The widow of a soldier, if she is living, has prior claim over these expenses and must make application on yellow blank.
- 2nd. Require those claiming accounts for expenses of last illness, and expenses of funeral, to make out their account in fully itemized form, giving each item and the value of it and each date.
- 3rd. Running accounts cannot be paid—only those connected with the last illness, just before death when pensioner grew worse to die.
- 4th. Each account must be sworn to before the Ordinary, and in the following form: (Do not use the terms, "just, true, due, unpaid," etc.)
- "The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of \_\_\_\_\_ who died without owing sufficient property to pay this bill."
- 5th. The Ordinary must see to it that each bill is properly legitimate as every respect and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.
- 6th. The completed voucher, this blank and the bill, must be sent to the Pension Office for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 7th. The Ordinary signs pay-roll for the pension and then disburses the money himself and takes receipts.
- 8th. Accept no bills for nursing until you write the Pension Office, stating the circumstances in very great detail. Pensioner's children, or children-in-law, must not charge the State for doing only what the law and common humanity demand of them.
- 9th. Return this application, and attached bills, with your final settlement to the Pension Office.
- 10th. Ordinary should see that the back of this blank, when folded, is filed up.
- 11th. Funeral expenses of deceased "new" pensioners covering all or part of both the 1920 and 1921 pensions require two separate sets of this voucher and bills—one set to be filed in the Pension Office with the pension papers of each year.



Sworn to and subscribed before me, this the

5th day of July 1925 Nathaniel X. Knight  
mark  
J. L. Knight  
of Georgia  
County

(SEAL)

1st. For use in all cases where pensioner died after January 1st, had not been out of State longer than twelve months, and died without owning sufficient property to pay such expenses. The widow of a soldier, if she is living, has prior claim over these expenses, and must make application on yellow blank.

2nd. Require those claiming accounts for expenses of last illness, and expenses of funeral, to make out their account in fully itemized form, giving each item and the value of it and each date.

3rd. Running accounts cannot be paid—only those connected with the last illness, just before death when pensioner grew worse to die.

4th. Each account must be sworn to before the Ordinary, and in the following form: (Do not use the terms "just, true, due, unpaid," etc.)

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

5th. The Ordinary must see to it that each bill is perfectly legitimate in every respect and properly sworn to, and all attached neatly to this blank after this blank has been properly completed as indicated.

6th. The completed voucher, this blank and the bills, must be sent to the Pension Office for approval and no money must be paid out until it is returned to you as your authority to make the payment.

7th. The Ordinary signs pay-roll, as Ordinary, for the pension and then disburses the money himself and takes receipts.

8th. Accept no bills for nursing until you write the Pension Office, stating the circumstances in very great detail.

9th. Pensioners' children, or children-in-law, must not charge the State for doing only what the law and common humanity demand of them.

10th. Return this application, and attached bills, with your final settlement to the Pension Office.

11th. Ordinary should see that the back of this blank when folded, is filled out.

12th. Funeral expenses of deceased "new" pensioners covering all or part of both the 1920 and 1921 pensions require two separate sets of this voucher and bills—one set to be filed in the Pension Office with the pension papers of each year.

Funeral expenses of Mrs. Ellen Riberon.

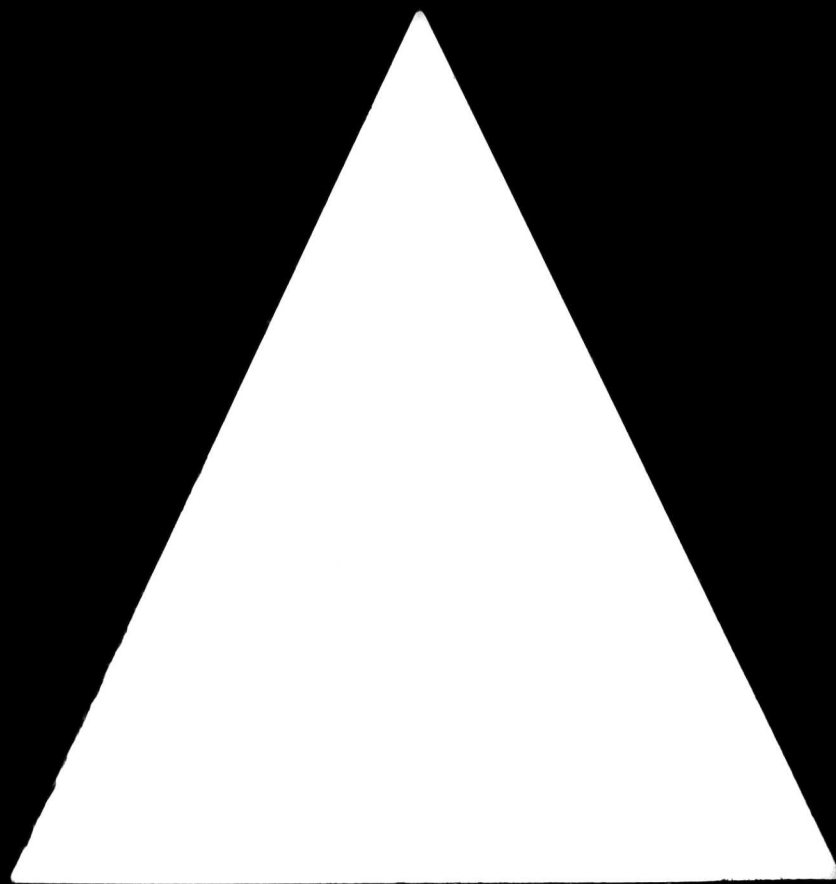
July, 26th. 1925.	Casket,	\$70.00
" " "	Shroud	20.00
Jul. 1st. to Jul. 26th. 1925.	Drugs	12.00
		<u>\$102.00</u>

I, J. J. Riberon, do solemnly swear that the above and foregoing is a true and correct copy of the expenses paid by me for the Funeral and last illness of Mrs. Ellen Riberon, who died on the 26th. day of July, 1925. and who was on the Widows pension roll of Clinch County Ga.

Sworn to before me this  
4th. day of Dec. 1925.

Kate C. Pafford,  
Ordinary Clinch Co. Ga.

J. J. Riberon



*River, W. J.*  
*8/20/02*  
*Clinch Co.*

**INDIGENT PENSION**  
**1902.**

Name *W. J. River*  
County *Clinch*  
Co. *S. C. Light Art.* Re  
Approved \_\_\_\_\_

**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, Solo Printer, Atlanta.

*9/2/1902*  
*9/2-19*  
*6/2/04*

**J. W. Lindsey,**  
Comm. Of Pensions

Office, 8/20/02.

must support his  
testimony that

is true.

away from duty.

Pensions

be those on

those who stay

show a good

staying away from

J. W. Lindsey,

Pensions.

Executed in presence of

Witness my hand and seal, this

day of *Sept* 1902.

[L. S.]

STATE OF GEORGIA,

POWER OF ATTORNEY.

*Blanch* COUNTY,

*W. J. River*

hereby authorize

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

at *Spencer* by *Spencer*

*W. J. River*  
*C. C.*



# QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Chunck COUNTY.

W. H. Chaney of said State and County, having been presented as a witness in support of the application of W. J. Rivers 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? W. H. Chaney in Chunck County Ga
2. Are you acquainted with W. J. Rivers, the applicant; if so, how long have you known him? Since 1859
3. Where does he reside, and how long and since when has he been a resident of this State? in Chunck County near him 42 years
4. When, where and in what company and regiment did he enlist, and how do you know? in Wainwright 15 of Mt 1863 Chunck St Bally and 1864 Brigade
5. Were you a member of the same company and regiment? yes
6. How long did he perform regular military duty? 11 months 15 days
7. When and where was his command surrendered? on Dec 13 1864 at Ft MacArthur
8. Were you present when it surrendered? yes
9. Was applicant present? no
10. If he was not present, where was he? at home on sick leave

When did he leave his command? Sept 1864 for what cause? sickness

By what authority he left? W. C. Calhoun's How do you know all of this? Sergeant Training Board Savannah

Because I was with him

11. What property, effects or income has the applicant? (Give your means of knowledge) don't no

12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899, 1900 and 1901, and what disposition, if any, did he make of same? don't no

13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? don't no

14. What is the applicant's occupation and physical condition? has big salaried he is old an very feeble

15. Is the applicant unable to support himself by labor of any sort, if so, why? By age an infirmity

16. How was he supported during the years 1898, 1899, 1900 and 1901? don't no

17. What portion of his support for these four years was derived from his own labor or income? don't no

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 infirm an as badly ruptured

19. What interest have you in the recovery of a pension by this applicant? none

Sworn to and subscribed before me, this 1 day of Sept 1902. W. H. Chaney Witness.

W. J. Rivers Ordinary.

# AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Chunck COUNTY.

Personally came before me Drs J. E. Pennington and A. H. Culpepper, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully W. J. Rivers, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

He is suffering from chronic cystitis and left inguinal hernia also suffering from effects of age unable to do manual labor

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

Sworn to and subscribed before me, this 1 day of Sept 1902. W. J. Rivers Ordinary.

T. E. Pennington M.D.  
A. H. Culpepper M.D.

# ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Chunck COUNTY.

I, W. J. Howell Ordinary in and for said County, hereby certify that the applicant W. J. Rivers resides in said County, and has been a bona fide resident of this State since the 1 day of February 1902, and that the witnesses, viz.: W. H. Chaney

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 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 Chunck County show that applicant returned for taxation in his name in 1898 for \$100.00 in 1899 for \$100.00 in 1900 for \$100.00 in 1901 for \$100.00 in 1902 for \$100.00 Dollars of property.

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

Witness my hand and seal of office, this 1 day of Sept 1902. W. J. Howell Ordinary.

of Chunck 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,

Clint COUNTY.

I, W. J. Rivers hereby authorize  
M. A. Wright of Atlanta Ga  
to receive and receipt for the pension allowed, and request that he remit same to  
Atlanta Ga at Hammerhead Ga  
by \_\_\_\_\_

WITNESS my hand and seal, this 2 day of Jan 1905.

W. J. Rivers [L. S.]

Executed in the presence of

(CODE SECTION 1254.  
 (FOR THOSE ALREADY ENROLLED.)

No. 45517

INDIGENT  
 SOLDIER'S PENSION  
 1905.

Name W. J. Rivers  
 County Clint  
 Co. \_\_\_\_\_  
 Regiment \_\_\_\_\_

WARRANT ISSUED  
 MAR 1 3 1905.

JOHN W. LINDSEY,  
 Commissioner of Pensions.

WARRANT HANDED TO  
W

GEO. W. HARRISON, MANAGER, FOR STATE PRINTER, ATLANTA.

NO DATA

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Clint COUNTY.

I, W. J. Rivers hereby authorize  
M. A. Wright of Atlanta Ga  
to receive and receipt for the pension allowed, and request that he remit same to  
J. T. Dume ordinary at Hammerhead Ga  
by mail

WITNESS my hand and seal, this 2 day of Jan 1905.

W. J. Rivers [L. S.]

Executed in the presence of

J. T. Dume

(CODE SECTION 1254.  
 (FOR THOSE ALREADY ENROLLED.)

No. 1136

INDIGENT  
 SOLDIER'S PENSION  
 1906.

Name W. J. Rivers  
 County Clint  
 Regiment Clint Light Battery

WARRANT ISSUED  
 JAN 26 1906

JOHN W. LINDSEY,  
 Commissioner of Pensions.

WARRANT HANDED TO  
M. A. W.

The Pensioner's Name and Pension Co. Geo. W. Harrison, Mgr.

no data

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Clinch County.

Personally appears W. J. Rivers of Clinch 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 1 day of July 1850; that he is 71 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 one year in Company 1st, of 1st Regiment of Georgia; that his physical condition is as follows: Is poor and infirm and unable to work.

that his property consists of the following items: none

of the value of none Dollars. I am now earning, by my labor, 22 Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this the 2 day of Jan 1905.

L. T. Dams Ordinary.

STATE OF GEORGIA,

Clinch County.

I, L. T. Dams Ordinary of said County, do certify that I am well acquainted with W. J. Rivers 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 2nd

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Clinch County.

Personally appears W. J. Rivers of Clinch 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 1 day of July 1852; that he is 72 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served for the term of 1 year in Company —, of —th Regiment of Clinch County; that his physical condition is as follows: Infirmity, poverty and age, not able to work.

that his property consists of the following items: none

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

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

Sworn to and subscribed before me, this the 2 day of Jan 1905.

L. T. Dams Ordinary.

State of Georgia,

Clinch County.

I, L. T. Dams Ordinary of said County, do certify that I am well acquainted with W. J. Rivers 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 2nd

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Clinch County.

Personally appears W. J. Bines of Clinch 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 1 day of July, 1850; that he is 71 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 one year in Company 10th, of 54th Regiment of Georgia; that his physical condition is as follows: Is poor and injured and unable to work.

that his property consists of the following items: none

of the value of none Dollars. I am now earning, by my labor, 20 Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this the 2 day of Jan, 1905. W. J. Bines Ordinary.

STATE OF GEORGIA,

Clinch County.

I, J. T. Dame Ordinary of said County, do certify that I am well acquainted with W. J. Bines 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 2nd day of Jan, 1905.

J. T. Dame Ordinary Clinch County.



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

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Clinch County.

Personally appears W. J. Bines of Clinch 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 1 day of July, 1852; that he is 72 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of GA) during the war between the States, and served for the term of 1 year in Company —, of —th Regiment Battle of Chickasaw Battery and other regiments; that his physical condition is as follows: Infirmity, poverty and age not able to work.

that his property consists of the following items: none

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

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

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

State of Georgia,

Clinch County.

I, J. T. Dame Ordinary of said County, do certify that I am well acquainted with W. J. Bines 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 2nd day of Jan, 1906.

J. T. Dame Ordinary Clinch County.



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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch COUNTY.

I, W. J. Rivas, hereby authorize  
W. A. Wright of Atlanta Ga

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

J. T. Davis ordinary at Commerce Ga

by mail

Witness my hand and seal, this 1st day of Jan 1907.

W. J. Rivas [L. S.]

Executed in presence of

[Signature]

Rivas, W. J.

Clinch Co.

(FOR THOSE ALREADY ENROLLED)

No. 4659

INDIGENT  
SOLDIER'S PENSION  
1907.

Name W. J. Rivas  
County Clinch  
Clinch Light Battery  
Regiment  
Seventh Georgia

WARRANT ISSUED  
1907.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

[Signature]

RECEIVED JAN 15 1907

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Chick County.

Personally appears W. J. Riner of Chick 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        1880; that he is 72 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 one year in Company Chick Light Battery of Frederick's Regiment; that his physical condition is as follows: Infirmary Pension and age.

that his property consists of the following items: None

of the value of None Dollars. I am now earning by my labor, None 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 Chick County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 12th day of Jan 1907. W. J. Riner  
J. T. Dams Ordinary.

State of Georgia,

Chick County.

I, J. T. Dams Ordinary of said County, do certify that I am well acquainted with W. J. Riner 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 Jan 1907.

J. T. Dams  
Ordinary Chick County.



Nov. - The blank space must be filled.  
Nov. - Affidavits should not be attested before January 1st, 1907.



Georgia, Clinch County;  
Per

Personally appeared before me  
an officer of said State  
duly qualified by law  
to administer oaths W. J.  
Rives who on oath says  
that his furlough was  
granted Sept 1- 1864—  
for sixty days— it was  
granted because he had  
chronic diarrhea that said  
disease and the Rail Road  
being out prevented him  
from returning to his  
Command. He was under  
Dr. W. B. Folks and Dr. L. C.  
Mottox for two years  
after the war closed  
suffering from the above  
mentioned disease

He further states  
that he is poor and  
infirm and unable to  
make a living.

W. J. Rives

Sworn to and subscribed before  
me this 26- 1903

W. L. Howell,

2d Jany

Georgia Clinch County;  
I hereby certify that the  
above party W. J. Rives

Georgia, Clinch County;  
Per

Personally appeared before  
me an officer of said  
State duly qualified  
by law to administer  
oaths J. L. Morgan who  
on oath says that  
he is now a neighbor of  
W. J. Rives and a applicant  
for pension to which this  
affidavit is attached  
and has been ever since  
before the war of secession  
that he is a Confederate  
soldier himself—

That he knows of his  
own knowledge that  
the reason W. J. Rives did  
not return to his command  
when he came home on  
a furlough in September  
1864— was because  
the Rail Road was out  
and he suffered badly  
from chronic diarrhea  
till the end of the war and  
for two years thereafter.

He was under treatment  
for this disease for two  
years after the war  
until by Dr. W. B. Folks  
and Dr. L. C. Mottox

that a plaintiff is  
entitled to full faith and  
credit to the fact that I believe  
the facts above set forth  
are true. June 26 1863

W. F. Howell,

Ordinary C.

This man M. J. Rives  
is a neighbor of this  
deponent and I know  
him to be entitled  
to full faith and credit  
and know that he is  
poor has no property  
and is unable to  
make a living.

Sworn to and subscribed  
before me this ~~26th~~ <sup>27th</sup> June 1863

W. F. Howell,

Ordinary C.

Georgia Clinch County:

I do hereby certify that I  
do know the above  
witness J. L. Morgan  
for thirty years and know  
him to be honest and  
reliable and entitled  
to full faith and credit.

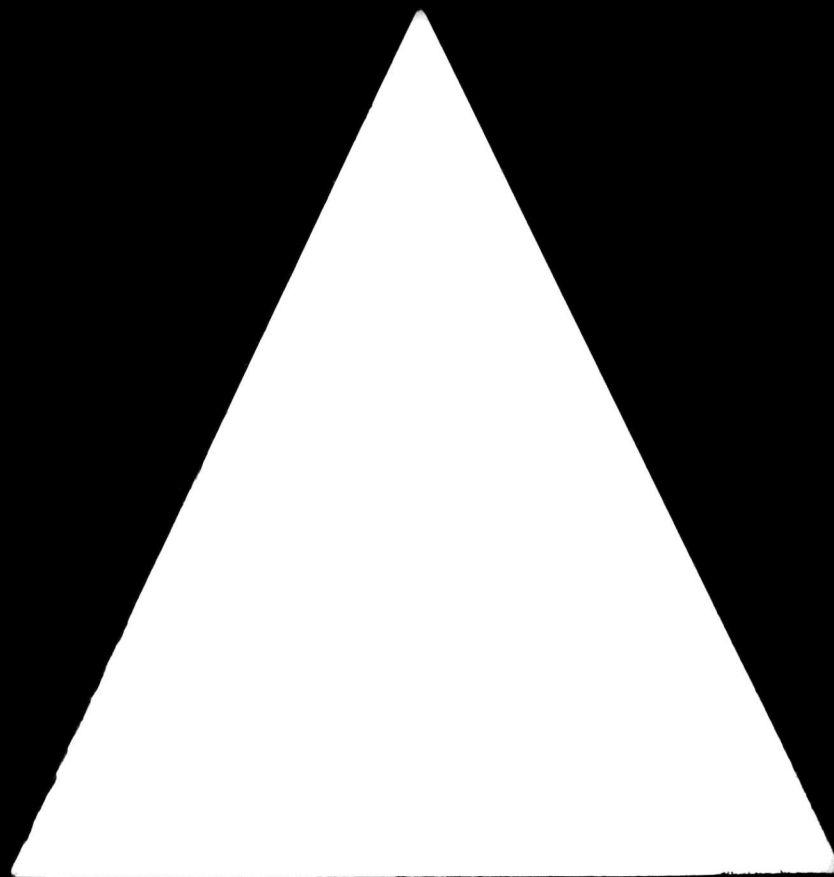
W. F. Howell,

Ordinary C.

Marshall & Bruce Co.  
STATIONERS  
CARTON TUBE

General Presentments of the  
Grand Jury April Term, Circuit  
Superior Court 1904.  
We recommend that W. J. Rice  
and Richard Crosby be placed  
on the Pension Rolls of the State  
of Georgia.

Georgia Circuit County.  
I do hereby certify that the above  
and foregoing is a true abstract  
of the minutes of Circuit Superior  
Court so far as relates to new  
names to be placed on the pen-  
sion Rolls of the State of Georgia.  
Given under my hand and  
Seal of office June 18<sup>th</sup> 1904.  
S. M. Register.  
Clerk S. C. C. C.



*Isaac Roberts*  
*Co. G- 50<sup>th</sup> La. Regt.*  
*Arrived, Mar-4-62.*  
*Captured, Stras-*  
*burg, Va., Oct-19,*  
*1864 - Released, At*  
*Lockport, Ind., Union,*  
*June -17-1865-*  
*(Tr. R.)*

*Picture ok-*

*Oct 15 1918*  
*Roberts Charity*  
*Widow of Isaac Roberts*  
*No. 175-70*

# Widow's Pension

UNDER ACT 1910.

County.....CLINCH.....

Name.....Mrs. Charity Roberts.....

Widow of.....Isaac Roberts.....

Kirkland, Ga. R. F. D. ....

*8-50<sup>th</sup> La. Regt*

*e 118*  
J. W. LINDSEY,  
Commissioner of Pensions.

Chas. F. Byrd, State Printer.

*6/15 1918*



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

STATE OF GEORGIA,

Clinch

County.

Personally before me comes Charity Roberts 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? Charity Roberts Clinch County Ga
2. How long and since when have you been a continuing resident in the State of Georgia? all my life
3. When, where and to whom were you married? Isam Roberts Clinch County Ga
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) Co G 50th Reg private
5. When and where did the Commands of your husband surrender or discharge from the army? At the general surrender
6. Was your husband personally present at the time of the surrender or discharge of this Command? He was a prisoner
7. If he was not present state clearly where he was? Strawsburg
8. Where was his Command when he left? Strawsburg
- a. For what cause did he leave his command? Captured
- b. By whose authority did he leave his Command?
- c. For how long was he granted leave of absence?
- e. What was his physical condition when he left his Command? slightly wounded
- f. What effort did he make to return to his command?
- g. In what way was he prevented from going back to Command? he was a prisoner
- h. Was he captured by the enemy at any time? yes
- i. If so, when and where captured and where held as a prisoner, and when and for what cause released? released at the surrender he was captured at Strawsburg in 1864 was in prison at Ft Lookout Md to the best of my knowledge
- j. When and where did your husband die? Kirkland R.F.D Clinch County Ga
- k. Were you residing together when he died? yes
- l. If not, how long had you resided apart?
9. What property of any description did you own, hold or control for your use and its cash value, Nov. 4, 1908. (State same by items.) I have 50 head of common stock cattle and \$250.00 in cash Household goods \$100.00
10. What property of any kind have you sold or given away since Nov. 4, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.) none
11. What property of any description of any value have you now? nothing but the above
- Give list and cash value?
12. What are your annual earnings or income and their value? nothing
13. Have you heretofore been paid a pension by the State? no
- If so, when and for what cause were you struck from the Roll?

Sworn to and subscribed before me this the

10th day of January 1918

at Strawsburg

Ordinary.

County.

Charity Roberts  
mark

Ordinary.

County.

**Widow's Pension**

UNDER ACT 1910.

County

CLINCH

Name Mrs. Charity Roberts,

Widow of Isam Roberts,

Kirkland, Ga. 11.11.18

J. W. LINDSEY,

Commissioner of Pensions.

Class F. Byrd State Printer.

Picture the

(Mr. B.)

Belmont & Co. 1918  
Co. G. 50th Regt.  
Carnate, Nov. 4-62.  
Captured, Straw-  
burg, Ga. Oct 19,  
1864. Released, Oct  
of about, Md, prison,  
June -17-1865.

At 11.11.18  
Roberts  
11.11.18

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

STATE OF GEORGIA,

Clinch

County.

Personally before me comes C.W. Curry 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? Miltoyn Ga R, FD.
2. How long and since when have you known all my life 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? Isham Roberts Dec 14 1865 How do you know? know date of marriage but was not present
5. How long and since when did you know Isham Roberts her husband? 60 years or more
6. When and where did Isham Roberts the husband of Applicant die? In Clinch County Ga Nov 12th 1917
7. Where the Applicant and her husband living together as husband and wife at the date of his death? yes
8. If not, how long did they live apart before his death?
9. When, where and in what Company and Regiment did Isham Roberts enlist? Co G, 50th Ga reg 1862 at Homerville Ga

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? About three years
12. When, and where did his Command surrender, and was discharged? 1865 at Pt Lookout Md

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? NO If not where was he? in prison when, where and for what cause did he leave Command? (Give date.) Captured #8 By whose authority did he leave his Command? By being captured and how long was he granted leave?  How do you know all this? By being in the same company and living near him all my life

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

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 5 day of June 1918 W.V. Mangrove Ordinary, of CLINCH County.

**AFFIDAVIT OF TWO FREEHOLDERS.**

STATE OF GEORGIA,

Clinch

County.

Personally before me comes Irwin Corbitt & M.J. Guest who on oath says that they are freeholders of said County and that they know Mrs Charity Roberts 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. 50 head of cows Cash \$250.00 household goods 50.00

Personal property	\$1300.00
Notes and accounts due	\$
Total	\$1300.00

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

Personal property	<u>nothing</u>	\$
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	<u>50</u> \$1000.00
Other property	\$300.00
Income and earnings	\$nothing
Total Value of all property and effects	\$1300.00

Sworn and subscribed before me this the 1st day of June 1918 Irwin Corbitt  
M.J. Guest  
of Clinch County.

**ORDINARY'S CERTIFICATE.**

STATE OF GEORGIA,

Clinch

County.

I, W.V. Mangrove Ordinary of said County do certify that, I know Mrs Charity Roberts the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was in the 4th Nov. 1908 yes

That I also know C.W. Curry the witness who swears to the service of husband, and Irwin Corbitt & M.J. Guest 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  Returned for Tax is for 1908 \$ nothing for 1910 \$ nothing

Sworn under my hand and official seal of office this 14th day of June 1918

SEAL. W.V. Mangrove Ordinary, of Clinch 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.

Sworn to and subscribed before me this the

5 day of June 1918

W. H. Mangrove

Ordinary,

of CLINCH

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.

ROBERTS, CHARITY (ma) CLINCH CO.

For Clinch County

1925

**Application for Pension  
Due Deceased Pensioner**

(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

Kate C. Pafford, Ordinary

For Mrs. Charity Roberts

Date of Death Dec. 18 1927

Amount \$100.00

Approved and ordered paid

Dec. 14, 1929

R. deT. Law, 1929

Commissioner of Pensions.

Paid

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

Georgia Clinch Co unty,

Personally appeared before me the undersigned subscribing officer an officer of said State duly qualified by Law to administer oaths, Irwin Corbett and M. J. Guest who being duly sworn deposes and says that he or they are and have been personally acquainted with Isham and Charity roberts, and know that they lived together as husband and wife for the last forty years, and was living together as such when Isham Roberts died, and that the general reputation in the community was that they were husband and wife and reared several children. That deponents live only a few miles from them.

Irwin Corbett

M. J. Guest

Sworn to and subscribed before me

this 4 day of June 1918.

A. J. Locklear

J. P.

# Application for Pension Due to a Deceased Pensioner

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

(Under Act Approved August 15, 1904)

GEORGIA, Clinch County.

Personally before me, the Ordinary of said County, comes Tharp Roberts

of said County, who, after being sworn, on oath says that he knew Mrs. Charity Roberts of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in Clinch County, in this State, on the 8th day of December 1929, and that a Pension of (\$150.00) Dollars was due pensioner and unpaid at the time of pensioner's death, and that pensioner left no dependent children surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$115.00 per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me

this 12th day of Dec. 1929

Ordinary

Clinch

County

(Seal of Ordinary)

## CERTIFICATE OF ORDINARY

GEORGIA, Clinch County.

I, Kate C. Pafford, Ordinary of said County, do certify that I personally know Tharp Roberts, who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also know Mrs. Charity Roberts while in life and that this was the same person whose name appears on the Pension Roll of Clinch County, and was paid a Pension of Three Quarterly during this year \$150.00 (same) Dollars in said County for 1929, and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher and the bills which are attached hereto.

Given under my hand and official seal, this 12th day of December, 1929

(Seal or Ordinary)

Kate C. Pafford, Ordinary

Clinch County

### INSTRUCTIONS:

- 1st. For use in all cases where pensioner died after January 1st, had not been out of State longer than twelve months, and did not leave sufficient property to pay such expenses. THE WIDOW OF A SOLDIER, IF SHE IS LIVING, HAS PRIOR CLAIM OVER THESE EXPENSES, AND MUST MAKE APPLICATION ON YELLOW BLANK.
- 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. Running accounts cannot be paid—only those connected with the last illness, just before death when pensioner grew worse to die.
- 4th. Each account must be sworn to before the Ordinary, and in the following form: (Do not use the terms: "Just, true, due, unpaid," etc.)
- "The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of Tharp Roberts who died without owing sufficient property to pay this bill."
- 5th. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached hereto to this blank after this blank has been properly completed as indicated.
- 6th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 7th. The Ordinary signs pay roll, as Ordinary, for the pension and then disburses the money himself and takes receipt.
- 8th. Accept no bills for running until you write the Pension Department, stating the circumstances in very great detail. Pensioner's children, or children-in-law, must not charge the State for doing only what the law and common humanity demand of them.
- 9th. Return this application, and attached bills, with your final settlement, to the Pension Department.
- 10th. Ordinary should see that the back of this blank, when filled, is filed out.

MRS. KATE C. PAFFORD  
ORDINARY CLINCH COUNTY  
HOMERVILLE, GA.

March, 21st. 1930.

Hon. R. de T. Lawrence,  
Commissioner of pensions,  
Atlanta, Ga.

Dear Mr. Lawrence:

I am returning papers for the funeral expenses ~~xxx~~ of Mrs. Charity Roberts, I have this day paid \$100.00 to Mr. Tharp Roberts, which receipt will show.

Yours very truly,

Kate C. Pafford  
Ordinary.

MRS. KATE C. PAFFORD  
ORDINARY CLINCH COUNTY  
HOMERVILLE, GA.

Dec. 12th. 1929.

Pension Commissioner,  
Atlanta, Ga.

Dear Sir:

Find inclosed itemized statement for funeral expenses of Mrs. Charity Roberts, deceased widow pensioner who died on Dec. 8th. Inst. these funeral expenses were paid by Tharp Roberts.

You may take Mrs. Charity Roberts' name from the last pension list I sent for the fourth quarterly payment.

Yours very truly,

Kate C. Pafford  
Ordinary.

MRS. KATE C. PAFFORD  
ORDINARY CLINCH COUNTY  
HOMERVILLE GA

I, Tharp Roberts, hereby acknowledge receipt of \$100.00  
paid to me by Kate C. Pafford, Ordinary of Clinch County

Georgia, for funeral expenses of Mrs. Charity Roberts, who  
was on the widows pension roll of Clinch County, Ga. said  
expenses were paid by me.

This March, 21st. 1930.

Tharp Roberts

Funeral expense of Mrs. Charity Roberts deceased  
widow pensioner.

I casket	\$65.00
I Shroud	10.00
Dr. H.G. Huey	12.00
Dr. Christopher,	12.00
Drug bills.	16.00
	<u>\$115.00</u>

Georgia Clinch County.

I, Tharp Roberts, do swear that I have paid the  
foregoing itemized funeral expenses of Mrs. Charity Roberts  
who died on Dec. 8th. 1929.

Tharp Roberts

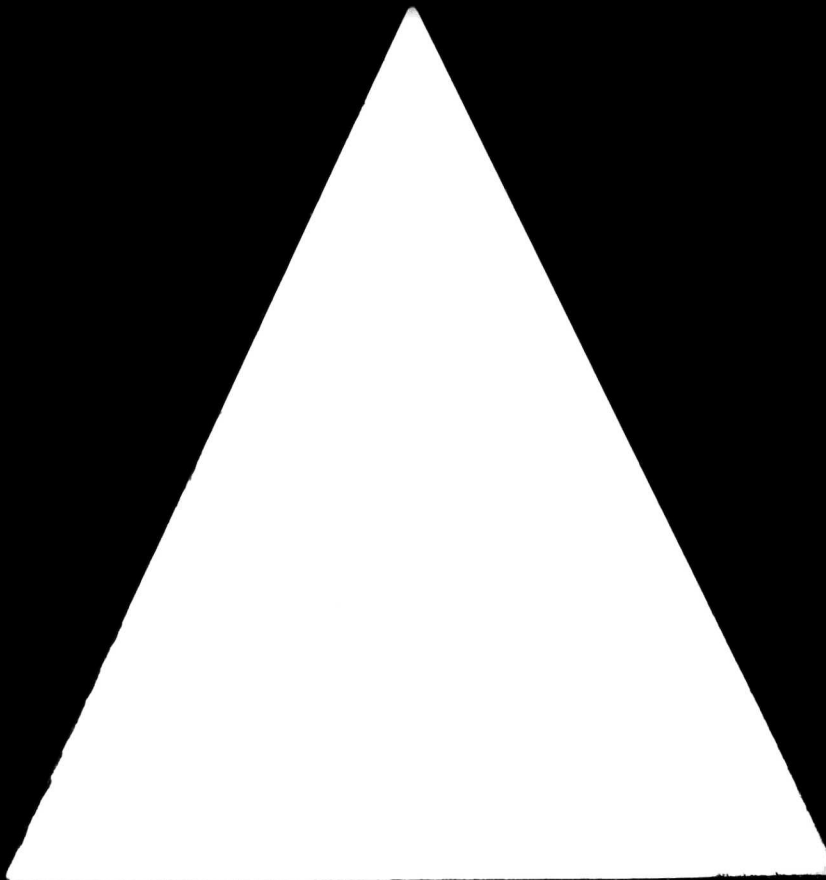
Sworn to and subscribed to  
before me this Dec. 12th. 1929.

Kate C. Pafford  
Ordinary

The receipted accounts should  
have been attached to this application  
A.



the receipt accounts shown  
have been attached to this application  
A.



POWER OF ATTORNEY.

STATE OF GEORGIA.

*Cherokee* COUNTY.

*W. A. McFarland* hereby authorize

of *Hall County, Ga.*

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

by *me* *2nd* day of *Dec* 1906.

Witness my hand and seal, this

*W. A. McFarland*

Cons. Statute 1904.

(FOR THOSE ALREADY ENROLLED.)

No. *1835*

INDIGENT  
SOLDIER'S PENSION  
1906.

Name *W. A. McFarland*

County *Cherokee*

Co. *2nd* Regiment *26th*

WARRANT ISSUED  
JAN 26 1906.

JOHN W. LINDSEY.  
Commissioner of Pensions.

WARRANT HANDED TO  
*W. A. McFarland*

THE FRANKLIN PRINTING AND PUBLISHING CO., GEO. W. HARRISON, MGR.

*no date*

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Clutch COUNTY.

I, D.M. Robinson hereby authorize  
W.D. Wright of Fulton Co. Ga

to receive and receipt for the pension allowed, and request that he remit same to  
L. T. Dame Ordway at Hamer's Hill Ga  
by mail

WITNESS my hand and seal, this 2nd day of Jan 1906.

D.M. Robinson [L. S.]

Executed in the presence of

L. T. Dame Ordway

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Clutch COUNTY.

I, D.M. Robinson hereby authorize  
W.D. Wright of Atlanta Ga

to receive and receipt for the pension allowed, and request that he remit same to  
L. T. Dame Ordway at Hamer's Hill Ga  
by mail

WITNESS my hand and seal, this 1st day of Jan 1907.

D.M. Robinson [L. S.]

Executed in presence of

L. T. Dame Ordway

Robinson D.M.  
Clutch County

Cons. Section 1254.

(FOR THOSE ALREADY ENROLLED.)

No. 1685

INDIGENT  
SOLDIER'S PENSION  
1906.

Name D.M. Robinson  
County Clutch  
Co. 47 Regiment 26

WARRANT ISSUED  
JAN 26 1906

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO  
W.D. Wright

The Pensioner's Name and Residence Co. No. 10,000,000, 1906.

no data

Robinson D.M.  
Clutch Co.

Cons. Section 1254.

(FOR THOSE ALREADY ENROLLED.)

No. 4660

INDIGENT  
SOLDIER'S PENSION  
1907.

Name D.M. Robinson  
County Clutch  
Co. 47 Regiment 26

WARRANT ISSUED  
1907.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

The Pensioner's Name and Residence Co. No. 10,000,000, 1907.

no data

FOR THOSE ALREADY ENROLLED.

FOR THOSE ALREADY ENROLLED.

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Clinch County.

Personally appears A. M. Robinson of Clinch 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 20 day of July 1874; that he is 30 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served for the term of 3 years in Company H, of 24th Regiment of Ga Inf; that his physical condition is as follows: Superiorly Healthy and age.

that his property consists of the following items: None

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

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

Sworn to and subscribed before me, this the 22d day of Jan 1906. J. T. Dume Ordinary.

State of Georgia,

Clinch County.

I, J. T. Dume Ordinary of said County, do certify that I am well acquainted with A. M. Robinson 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 22d day of Jan 1906.

Ordinary Clinch County.



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

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Clinch County.

Personally appears A. M. Robinson of Clinch 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 20 day of July 1874; that he is 30 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served for the term of 3 years in Company H, of 24th Regiment of Ga Inf; that his physical condition is as follows: Superiorly Healthy and age.

that his property consists of the following items: None

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

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

Sworn to and subscribed before me, this the 12th day of Jan 1907. J. T. Dume Ordinary.

State of Georgia,

Clinch County.

I, J. T. Dume Ordinary of said County, do certify that I am well acquainted with A. M. Robinson 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 Jan 1907.

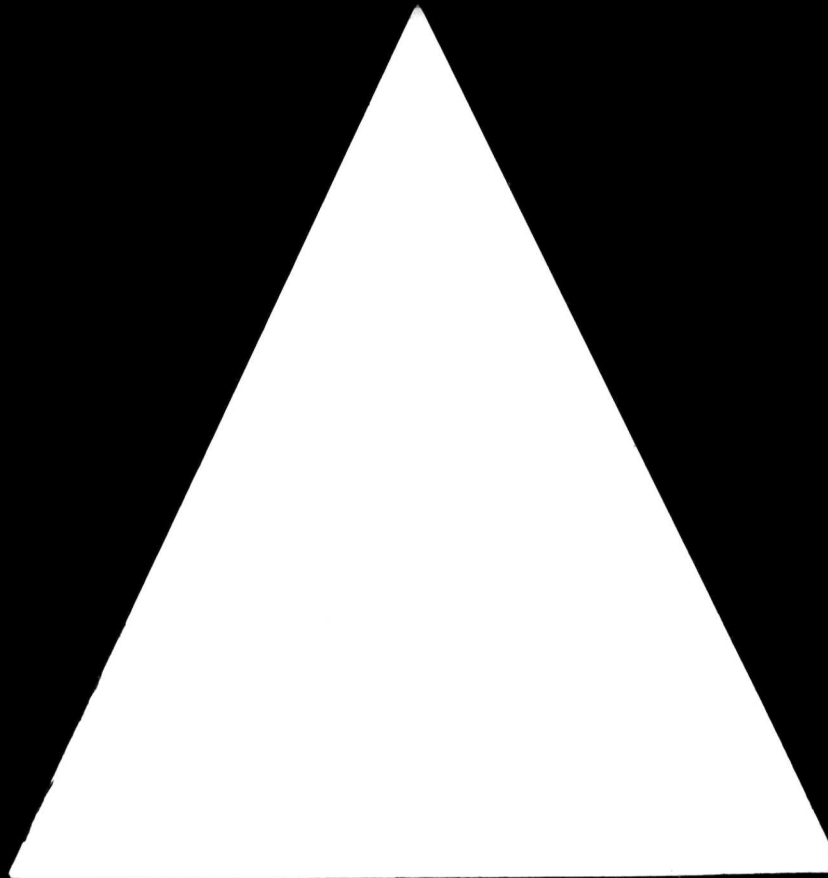
Ordinary Clinch County.



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

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

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







# POWER OF ATTORNEY.

## STATE OF GEORGIA.

*Clunck* County, }  
 Know all Men by these Presents, That I *J. J. Sauls* }  
 of *Clunck* County, State of Georgia, do hereby appoint  
*Wm. 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 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  
 23<sup>rd</sup> day of *March* 1893.

Executed in the presence of us:  
*J. J. Sauls* [L. S.]

*Wm. H. Harrison*  
*Wm. H. Harrison*

Send money to me as follows, by *Express*  
 to *Clunck* P. O.  
*Clunck* County, Georgia.  
*J. J. Sauls*

See Copy 1892

1893.	No. 651	Application for Allowance	Applicant, <i>Wm. H. Harrison</i>	Comptroller, <i>Wm. H. Harrison</i>	Date of Warrant, <i>27</i>	Entered on record, <i>27</i>	W. H. HARRISON	W. H. HARRISON
<i>Stanley H. H.</i>	<i>Clunck Co.</i>							

STATE OF GEORGIA  
 FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

STATE OF GEORGIA.

went off to the South west passing obliquely through the heart  
of the left lateral of Bonal cutting through and  
continuing and pinning down the posterior muscles.  
The upper part of spinal column which carries less  
weight than the lower part.

..... dollars, for each year

Sworn to and subscribed before me, this, the

23<sup>rd</sup> day of March 1893.

George Cornelius ordinary

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

STATE OF GEORGIA,

I, George Lockman Ordinary of said County,

do certify that I am ~~well~~ acquainted with L. B. Smith 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, as sworn to by a

I further certify that George Lomakin is

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.

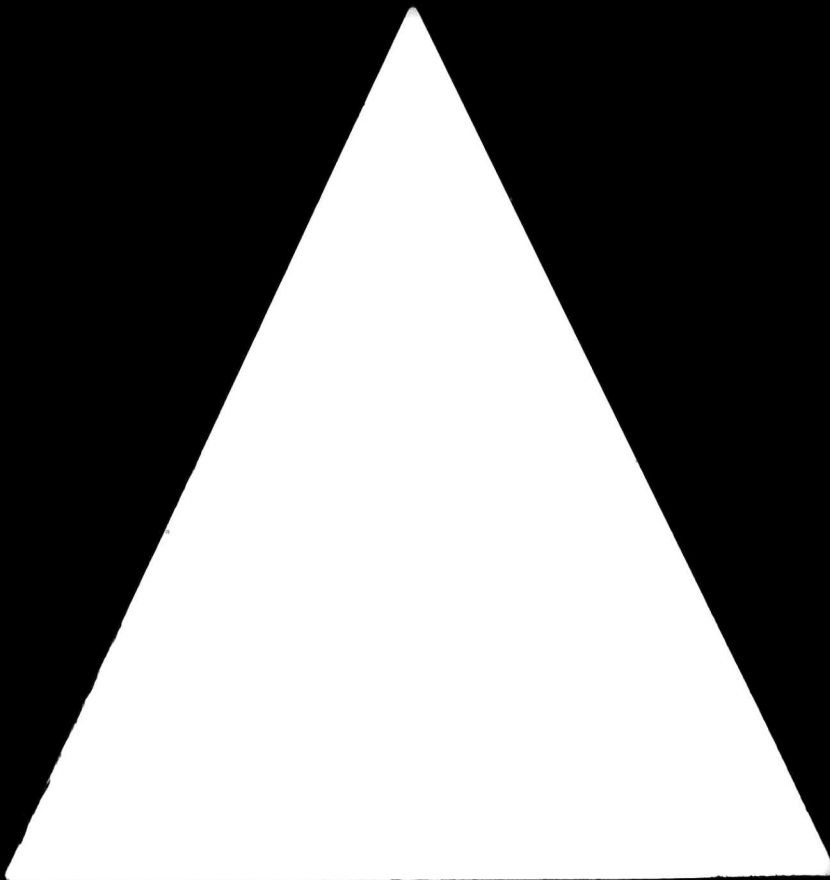
Given under my official signature and seal, this 23rd day of March 1893.

George Washington

Ordinary *Kelisek* County

~~George~~ <sup>George</sup> ~~Carroll~~ <sup>Carroll</sup> - Claims that he has been  
in station ~~since~~ <sup>since</sup> ~~at~~ <sup>at</sup> ~~the~~ <sup>the</sup> ~~office~~ <sup>office</sup> ~~and~~ <sup>and</sup> ~~one~~ <sup>one</sup> ~~in~~ <sup>in</sup>  
Coffee County but now lives in ~~Stark~~ <sup>Stark</sup> ~~County~~ <sup>County</sup>  
George Carroll, ~~and~~ <sup>and</sup> ~~Carroll~~ <sup>Carroll</sup>

~~At a meeting of the Board of Directors of the~~  
~~at a meeting of the Board of Directors of the~~  
George Corbitt's writing  
Coffee canning but most lines in black  
George Corbitt's writing



*Seagrove, Nancy*  
*Clinch County*  
~~Disapproved~~

# WIDOW'S APPLICATION

To Be Put on Roll in Her Own Right When  
Husband Was on the Pension Roll  
of Georgia.

County *Clinch*  
Name *Mrs. Nancy Seagrove*  
Widow of *W. F. Seagrove*  
Company *D*  
Regiment *9th Fla.*  
Date of Husband's Death *Dec. 1921*  
Date of Marriage *Mar. 5, 1890*  
Approved \_\_\_\_\_

*John W. Blank*  
G. H. McBRIDE  
Commissioner of Pensions

11-3-28 6

## Ordinary's Certificate

STATE OF GEORGIA

*Clinch* COUNTY.

I, *Martha C. Boyd* Ordinary of said County, do certify that I know Mrs. *W. F. Seagrove*, 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 *W. F. Seagrove*, 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 *2nd* day of *Nov.* 192*8*  
(SEAL OF ORDINARY) *John C. Seagrove* Ordinary,  
*Clinch* County

### Instructions.

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "I 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. Affidavits must be made before the Ordinary of the County of residence.
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.

*Sedgwick, Nancy*  
*Clinch County*  
*Disapproved*

**WIDOW'S APPLICATION**

To Be Put on Roll in Her Own Right When Husband Was on the Pension Roll of Georgia.

County *Clinch*  
 Name *Mrs. Nancy Sedgwick*  
 Widow of *W. F. Sedgwick*  
 Company *B*  
 Regiment *9th Fla.*  
 Date of Husband's Death *Dec. 1921*  
 Date of Marriage *Mar. 5, 1890*  
 Approved \_\_\_\_\_

*John W. Blair*  
*G. B. McNamee*  
 Commissioner of Pensions

*11-3-28*

### Ordinary's Certificate

STATE OF GEORGIA,

*Clinch* COUNTY.

I, *Mr. Kate C. Pafford* Ordinary of said County, do certify that I know Mrs. *W. F. Sedgwick*, 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. J. Smith*, 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 *2nd* day of *Nov*, 192*8*.

(SEAL OF ORDINARY)

*Kate C. Pafford* Ordinary,  
*Clinch* 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, 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.

*Sedgwick, Nancy*  
 For *Clinch* County

### Application for Expenses of Last Illness and Funeral

(UNDER ACT OF 1919)

*Kate C. Pafford*, Ordinary

For: *NANCY SEDGWICK*  
 (Name of Pensioner)

Date of Death: *March 1st*, 192*8*

Amount: *30.00*

TO THE ORDINARY: Fill out above, in full, and send this voucher to Confederate Division State Department of Public Welfare, for approval. Do not pay out the money until the approved voucher is in your hands giving you authority to do so. After this voucher has been sent back to you, with check, get a receipt from each person having a bill, and return this voucher and the receipts to Confederate Division State Department of Public Welfare.

Approved, and ordered paid,

*March 17*, 192*8*  
*William F. Henderson*  
 Director.

Confederate Division  
 State Department of Public Welfare

# 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,

Clusin COUNTY. (many)  
Personally before me comes Mrs W. F. Sedgwick of said County, who, after having been duly sworn, says that she is the widow of W. F. Sedgwick to whom, in the County of Ware State of Georgia she was married on the 5th day of March 1890, and that she remained his wife, and resided with him to the date of his death in December 1921 and that she has not since his death remarried; at the time of his death he was a resident of Clusin County, in said State of Georgia, and he was on the Confederate Pension Roll of the State and paid a pension of \$        in        County for 19        (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 for 32 years continuously

Sworn to and subscribed before me, this the 2nd day of April, 1928.  
Kate C. Pafford Ordinary } Mrs W. F. Sedgwick  
of Clusin County. (Applicant) mark

(SEAL OF THE ORDINARY.)

## Affidavit of Witness to Prove Marriage and Date of Death of Husband.

STATE OF GEORGIA,

Clusin 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. Nancy Sedgwick who made the foregoing affidavit, is the lawful widow of W. F. Sedgwick who died in Clusin County in said State of Ga on the        day of December, 1921 and that she has not since remarried; that she became the wife of W. F. Sedgwick on the 5th day of March, 1890; that she and he had resided together as husband and wife, continuously, since 5th day of March 1890, and that he was the same man who was on the pension roll of said State from Clusin County in Dec 1921 when he died.

Sworn to and subscribed before me, this the 2nd day of April, 1928.  
Kate C. Pafford Ordinary } J. J. Smith  
of Clusin County.

(SEAL OF ORDINARY)

# Application for Payment of Expenses of Last Illness and Funeral

(Under Act of 1919)  
(To be disbursed by the Ordinary)

GEORGIA, Clusin County:  
Before me, the Ordinary of said County, comes B. Frank Thomas of said County, who, after being duly sworn, on oath says that he knew Mrs Nancy Sedgwick late of said County, a Confederate pensioner, and that said person is the identical person named and described in the attached certified copy of burial certificate; and that said pensioner had no estate of ANY KIND OR VALUE sufficient to pay the expenses of last illness and funeral, which amounted to the sum of \$ 50.00, as shown by sworn statements FULLY and COMPLETELY ITEMIZED, hereto attached.  
Sworn to and subscribed before me, this the 6th day of March, 1921.  
Kate C. Pafford, Ordinary. } Frank Thomas

## CERTIFICATE OF THE ORDINARY

GEORGIA, Clusin County.  
I certify that Frank Thomas 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 Mrs Nancy Sedgwick 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 deceased 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 6th day of March, 1921.  
(Seal of Ordinary) Kate C. Pafford, 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 Confederate Pension Office, Department of Public Welfare, 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 Confederate Pension Office, Department of Public Welfare.
- 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 Confederate Pension 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 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.



State Dept. Public Welfare,  
Atlanta, Oct. 2, 1937.

E. F. Sedgwick, or Sedgwick,  
enlisted as a private in Co. B,  
9th Regt. Fla. Infantry Sept.  
14, 1868. Roll for Apr. 30,  
to Aug. 31, 1864, shows him  
absent on furlough.

Roll for Sept.-Oct. 1864, lists  
on file, shows him absent with-  
out leave since Sept. 3, 1864.

No later record has been found  
(Washington record.)

Has a pensioner.

Letter re: Sedgwick records in  
Washington record.

### Widow's Application

Under Act of 1910—As Amended by Act of  
1919, and Constitutional Amendments  
of 1920 and 1937.

County Clinch  
Name Mrs. Nancy Sedgwick  
Widow of W. F. Sedgwick  
Date of Marriage March 6th, 1898  
Date of Husband's Death Nov. 30, 1921  
Company D  
Regiment 9th Fla.  
Approved 1937 193  
E. F. Thomas Director.

AUG 6 1937

### Ordinary's Certificate

STATE OF GEORGIA,

Clinch COUNTY.

I, Kate C. Pafford, Ordinary of said County, do certify  
that I know Mrs. Nancy Sedgwick the applicant for pension; that  
she is the person she represents herself to be, and that she has been, continuously, a bona fide resident  
citizen of said State since January 1st, 1920; that I also know E. F. Thomas  
the witness who swears to the service of husband and/or the marriage; that both of them are now residents  
of said County and were duly sworn by me before signing the foregoing affidavits, and that they are  
truthful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and seal of office this 28th day of July, 1937.  
(SEAL OF ORDINARY) Kate C. Pafford, Ordinary,  
of Clinch County.

#### INSTRUCTIONS:

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. Only widows who married prior to January 1st, 1920, are entitled.
4. 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.
5. Attach certified copy of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Fill out the back of the application carefully.
7. Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.
8. Do not take an application from any widow who is already receiving a pension.

## APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

(Under Act of 1910, as Amended by Act of 1919, and Constitutional  
Amendments of 1920 and 1937.)

### QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,

Clinch COUNTY.

Personally appears before me, Mrs. Nancy Sedgwick of said State and County  
and hereby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and the  
Constitutional Amendments of 1920 and 1937, and submits testimony to support the same, and, after  
being duly sworn, true answers to make to the questions propounded, answers as follow, to wit:

#### SECTION I.

1. What is your name, and where do you reside? (Give Post Office and County).  
Mrs. Nancy Sedgwick, Homerville, Clinch County, Georgia.
2. How long and since when have you been, continuously, a bona fide resident citizen of the State  
of Georgia? All my life.  
Give date, or year, of your birth. March 10th, 1886 Age? 51.
3. (1) When, (2) where and (3) to whom were you married? W. F. Sedgwick,  
March 6th, 1898, Ware County, Georgia.
  - a. Have you married since the death of first and soldier husband? No.
  - b. When and where did your first husband die? Homerville, Clinch County, Georgia, 20/34/21
  - c. Were you residing together when he died? Yes.
  - d. If not, how long had you resided apart? XXXX
  - e. Are you now a widow? Yes.
  - f. Have you or your husband heretofore been paid a pension by the State? Yes, my husband.
  - g. If so, when and for what cause were you or your husband placed on the roll? Infirmity and Poverty.

#### SECTION II.

Answer the following questions if your husband was not a pensioner:

1. When, where and in what Company and Regiment did your husband enlist as a soldier in  
Confederate Army or Georgia Militia. (Give name of Colonel and Captain.) State whether Infan-  
try, Cavalry, Artillery, Reserves, State Guards, State Militia or State Troops.

2. When and where did the Commands of your husband surrender or discharge from the Service?
3. Was your husband personally present with his Command when it was surrendered or discharged?
4. If he was not present, state specifically and clearly where he was?
5. When did he leave the Command?
  - a. For what cause did he leave?
  - b. By whose authority did he leave?
  - c. For how long was his leave of absence granted? d. In what way?
6. What was his physical condition when he left his Command?
7. What effort did he make to return to his Command?
8. In what way was he prevented from going back to his Command?
9. Was he captured by the enemy at any time?
10. If so, when and where? In what prison was he held and when was he released?

Sworn to and subscribed before me, this  
28 day of July, 1937.  
Kate C. Pafford, Ordinary  
of Clinch County.  
(SEAL OF ORDINARY)

Mrs. Nancy Sedgwick  
Mark Applicant.

## An Affidavit

(Read carefully before making this affidavit.)

State of Georgia,

County of

Before me, the Ordinary of said County, comes Mrs. \_\_\_\_\_ who, after being duly sworn, deposes and says:

1. That she is an applicant for the Georgia pension allowed to widows of Confederate soldiers;
2. That her deceased husband was not a pensioner of the State of Georgia at the time of his death, and, therefore, his Confederate military service has not heretofore been proven in connection with an application for pension;
3. That she is unable to obtain from any person or source evidence as to the Confederate military service of her deceased soldier husband;
4. That this affidavit is being made to authorize the use, as evidence, of any official record of said Confederate military service as may be preserved either at the Capitol in Atlanta, or in the office of the Adjutant-General, Washington, D. C.

Sworn to and subscribed before me, this the

day of \_\_\_\_\_, 1937

Ordinary,

County.

## Questions for Witness as to Marriage and Service of Husband.

STATE OF GEORGIA,  
Clich

COUNTY.

B.F. Thomas

of said State and County is hereby presented as a witness in support of the application of Mrs. Nancy Sedgewick for the pension provided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendments of 1920 and 1937, in said State, who, after being 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 Post Office and County)  
B.F. Thomas, Homerville, Clinch County, Georgia.
  2. How long and since when have you known Mrs. Nancy Sedgewick applicant  
About thirty years.
  3. Where does she now reside, and since when has she been, continuously, a bona fide, resident citizen of this State? at Homerville, Georgia, yes, all her life. (as per record to W.F. Sedgewick, Clinch County Ga. 4/8/1898)
  4. When and to whom was she married? W.F. Sedgewick How do you know?
  5. How long and since when did you know W.F. Sedgewick her husband? about twenty years.
  6. When and where did the husband of applicant, die? Homerville, Clinch County, Georgia, November, 30, 1921
  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? XXXX
- Were they divorced? XXXX
- If the husband of the applicant was a pensioner, DO NOT answer the following questions.
9. When, where and in what Company and regiment did \_\_\_\_\_ enlist? (Give date and place)
  10. How did you obtain your information of this service?
  11. How long within your personal knowledge did he perform actual military service with this Company and Regiment? (Give dates.)
  12. When and where was his Command surrendered or discharged? (Give date and place.)
  13. Were you personally present with this Command when it was surrendered? If not, where were you and how came you there?
  14. Was the husband of applicant personally present with his Command at its surrender? If not where was he? and how came him there? When, where and for what cause did he leave his Command? (Give date.) By whose authority did he leave his Command? and how long was he granted leave? How do you know all that you have stated to be true? (If of your own knowledge, state clearly and specifically.)
  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?
  17. Was he 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 July, 1937  
H. J. Dafford Ordinary  
of Clinch County.  
(SEAL OF ORDINARY)

B.F. Thomas  
(Witness)

BAD COPY\*\*\*OR\*\*LIGHT PRINT

# MARRIAGE LICENSE

STATE OF  
GEORGIA



WARE  
COUNTY

TO ANY JUDGE, JUSTICE OF THE PEACE OR MINISTER OF THE GOSPEL, OR  
OTHER PERSONS AUTHORIZED TO SOLEMNIZE

You are hereby authorized to join

*W. F. Sedgwick* and *Nancy Eunice*

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 *5* day of *March* 1898

*Nathan Lott*

Ordinary

[SEAL]

## CERTIFICATE

GEORGIA, Ware County

I Certify that

*W. F. Sedgwick* and *Nancy Eunice*  
were joined in Matrimony by me this *6* day of *March* 1898

Recorded *April 4* 1898

*Nathan Lott*

Ordinary.

*B. Smeat*

*W. F. Sedgwick*

BAD COPY\*\*\*OR\*\*LIGHT PRINT

State of Georgia  
Ware County.

I, C.B.L. Matter, Ordinary of said County, do hereby certify that the attached and foregoing do contain a full true and complete copy of the marriage license and certificate of W.F. Sedgewick and Nancy Eunice, as the same appears of record and file in this office.

Given under my hand and Official Seal.  
This the 7th, day of August, 1931.

*C.B.L. Matter*  
Ordinary of Ware County, Georgia.



**PIEDMONT HOTEL**

ATLANTA, GA.

1

Depont G.

Nov 7-28

Hon Judge Clark

Atlanta Ga

Dear Judge Clark

Will please mail some

Division papers to me

in your care & ~~also~~

Wanted have called for

them but was called

back home before had

time to go to your

office - Mrs Arnold

will please return these

papers are the ones



**PIEDMONT HOTEL**

ATLANTA, GA.

2

I got an opinion  
from the attorney General  
on please put these  
papers on and let  
me hear from you

Thank you for your  
promptness

Yours truly

A. L. Hughes

HOMERVILLE, GA.  
Sept. 24, 1928.Mrs J. E. Arnold  
State Capitol  
Atlanta, Ga.

Dear Mrs. Arnold:

Relative to our conversation concerning the application of Mrs W. F. Sedgwick for a pension as widow of W. F. Sedgwick, deceased, a Confederate veteran on your pension roll at the time of his death.

We would be glad if you will take this matter up with the Attorney General and ascertain whether Mrs Sedgwick is entitled to a pension under section 1497 of the Code. If you find that she is so entitled we will proceed to make out the application as required in that section.

I wish to thank you for this service in advance and also for your courtesy in this matter when I was up there last week.

Very truly yours,  
Locklear & Huxford.

By E. C. Locklear

Personally before me came Dr H. G. Huxey who on oath says that Mrs. Nancy Sedgwick, by reason of her age and infirmity, is unable to support herself by her own exertion.

This 2nd day of November, 1928

I. W. Corbett  
N. P. C. Cha.

H. G. Huxey

Commissioner of Pensions  
Atlanta, Ga.

Dear Sir:

I have been informed that the enclosed papers will be needed at your office on Saturday Nov. 3rd and will be glad if you will hold them for Hon. A. L. Hughes of Cling County on this date.

Very truly yours,  
Locklear & Huxford  
By E. C. Locklear

Personally before me came Dr H. G. Huxey who on oath says that Mrs Nancy Sedgwick, by reason of her age and infirmity, is unable to support herself by her own exertion.

This 2nd day of November, 1928.

I. W. Corbett  
N. P. C. Cha

H. G. Huxey  
11



E. C. LOCKLEAR

LOCKLEAR & HUXFORD

FOLKS HUXFORD

PARTNERSHIP LIMITED TO CIVIL  
PRACTICE

ATTORNEYS-AT-LAW

FOLKS HUXFORD, SOLICITOR CLINCH  
COUNTY COURT

HOMERVILLE, GA.  
Nov. 2, 1928.

Commissioner of Pensions  
Atlanta, Ga.

Dear sir:

I have been informed that the enclosed papers will be needed  
at your office on Saturday Nov. 3rd and will be glad if you will hold  
them for Hon A. L. Hughes of Clinch County on this date.

Very truly yours,  
Locklear & Huxford.

By E. C. Locklear

STATE OF GEORGIA  
ATTORNEY-GENERAL'S OFFICE  
ATLANTA

GEO. M. NAPIER  
ATTORNEY-GENERAL  
RESIDENCE TEL. DEARBORN 0039  
T. R. DRESS  
ASSISTANT ATTORNEY-GENERAL  
R. O. HUIE, SECRETARY



October 6, 1928.

Hon. John W. Clark,  
Pension Commissioner,  
State Capitol.

Dear Sir:

Replying to your letter of this date, requesting an  
interpretation of the provisions of section 1497 of the Penal Code,  
I have the honor to advise that, in my opinion, the widow of a  
Confederate soldier who rendered military service provided for in  
said Section of the Code, and who, at the time of filing her applica-  
tion for pension, submits proof to show that by reason of her age,  
infirmity or blindness, coupled with poverty, is entitled to a pension,  
under the pension laws of this State.

Very respectfully,

J. R. [Signature]

Assistant Attorney-General.

State of Georgia

Pension Department  
Atlanta

R. deT. Lawrence  
COMMISSIONER OF PENSIONS

December 12, 1929.

I hereby certify that the attached papers are a  
correct copy of the Application of Mrs. Nancy Sedgwick for  
a pension as the widow of W. F. Sedgwick, of Affidavit of  
Mrs. Nancy Sedgwick and H. O. Hays and of letter of E. G.  
Locklear.

Clerk Pension Department

This 11th day of December, 1911.

Notary Public

State of Georgia

Pension Department  
Atlanta

R. deT. Lawrence  
COMMISSIONER OF PENSIONS

November 6, 1929.

Hon. L. G. Hardman,  
Governor of Georgia,  
Capitol.

Dear Sir:

At the request of Mr. A. L. Hughes, I respect-  
fully submit for your consideration the application of  
Mrs. Nancy Sedgwick for a pension as the widow of W. F.  
Sedgwick.

This application was disapproved on account of  
the marriage date of Mrs. Sedgwick which is March 5, 1890,  
but Mr. Hughes contends that under Section 1497 of the  
1926 Code, that Mrs. Sedgwick is entitled to a pension.  
Under the circumstances, I have not consented to change  
the former ruling with regard to this application.

Very respectfully,

R. deT. Lawrence  
Commissioner of Pensions

A

*Married since 1881*

Personally before came Mrs. Nancy Sedgwick who on oath says that she has no property, effects or incomes, that she is 66 years of age, that she has no occupation, her physical condition being such that she is unable to do any kind of work.

Dependent further says that she does not recollect the Company and Regiment in which her husband enlisted nor the full term of his service in the Confederate Army but that she believes all this information is of record in the office of the Commissioner of Pensions in Atlanta, Ga. and is contained in and a part of her husband's application filed in said office.

(SEAL)

This 2nd day of November, 1928.

Kate C. Pafford  
Ordinary, Clinch County, Ga.

Signed <sup>her</sup> Mrs. Nancy X Sedgwick  
Applicant

Married since 1881

Personally before came Mrs. Nancy Sedgwick who on oath says that she has no property, effects or incomes, that she is 66 years of age, that she has no occupation, her physical condition being such that she is unable to do any kind of work.

Dependent further says that she does not recollect the Company and Regiment in which her husband enlisted nor the full term of his service in the Confederate Army but that she believes all this information is of record in the office of the Commissioner of Pensions in Atlanta Ga. and is contained in and a part of her husband's application filed in said office.

This 2nd day of November, 1928.

Kate C. Pafford  
Ordinary, Clinch County, Ga.

Signed <sup>Liv</sup> Mrs. Nancy X Sedgwick  
Applicant <sup>None</sup>

STATE OF GEORGIA  
ATTORNEY-GENERAL'S OFFICE  
ATLANTA

GEO. M. NAPIER  
ATTORNEY-GENERAL  
RESIDENCE TEL. DEARBORN 0038  
T. R. GRESS  
ASSISTANT ATTORNEY-GENERAL  
R. O. HUIE, SECRETARY



November 21, 1928.

Mrs. Arnold,  
Chief Clerk, Pension Commissioner's office,  
State Capitol.

Dear Mrs. Arnold:

The file of papers which you sent me sometime since, in which Hon. A. L. Hughes, of Dupont, Ga., is interested, concerning the pension of Mrs. W. F. Sedgwick, is herewith returned.

I have discussed the matter with Mr. A. L. Hughes, and he will make an effort to have the age limit as to the marriage of widows of Confederate soldiers extended to about 1900 or 1905, he tells me.

On account of departmental construction, as well as of legislative construction expressed in the matter, I think you are right to hold that you cannot grant a pension under Section 1497 of the Code.

If no action had been taken in the way of a construction of this Code section, the conclusion might be different; but the Pension Commissioners have understood that the provisions of this Section were included in the provision that widows who were married prior to 1861 are entitled to receive a pension, and the Legislature has expressed in several Acts that that limit was in their minds.

There are many very worthy widows in the State who deserve a pension, on account of their age and infirmity, beside the fact that they were a comfort and solace to the old soldiers during the last years of their lives.

Respectfully submitted,

*Geo. M. Napier*  
Attorney-General.

Enc.

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  
Clinch COUNTY

(Marry)  
Personally before me comes Mrs. W. F. Sedgwick of said County, who, after having been duly sworn, says that she is the widow of W. F. Sedgwick to whom in the County of Ware State of Georgia she was married on the 5th day of March 1890, and that she remained his wife, and resided with him to the date of his death in December 1921 and that she has not since his death remarried; at the time of his death he was a resident of Clinch County, in said State of Georgia, and he was on the Confederate Pension Roll of the State and paid a pension of \$\_\_\_\_\_ in \_\_\_\_\_ County for 19 \_\_\_\_\_ (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 \_\_\_\_\_ day of \_\_\_\_\_ for 44 years continuously.

Sworn to and subscribed before me, this the \_\_\_\_\_  
2nd day of Nov., 1928.

Kate C. Pafford, Ordinary  
of Clinch County

Mrs. Marry F. Sedgwick  
Applicant

(SEAL OF THE ORDINARY)

AFFIDAVIT OF WITNESS TO PROVE MARRIAGE AND DATE OF DEATH OF HUSBAND.

STATE OF GEORGIA  
Clinch 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 his own personal knowledge, Mrs. Marry Sedgwick, who makes foregoing affidavit, is the lawful widow of W. F. Sedgwick who died in Clinch County in said State of Ga on the \_\_\_\_\_ day of December, 1921, and that she had not since remarried; that she became the wife of W. F. Sedgwick on the 5th day of March, 1890; that she and he had resided together as husband and wife, continuously, since 5th day of March 1890; and that he was the man who was on the pension roll of said State \_\_\_\_\_ from Clinch County in Dec 1921 when he died.

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

2nd day of November, 1928

Kate C. Pafford, Ordinary  
of Clinch County

J. J. Smith

(SEAL OF ORDINARY)

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLANTA

Mrs. Kate Pafford, Ordinary,  
Clinch County,  
Homerville, Georgia.

WHEREAS:

MRS. NANCY SEDGEWICK, WIDOW OF W. F. SEDGEWICK,

has filed in this office an application for the Georgia pension allowed to widows of Confederate veterans; and it appearing that the late husband of this applicant performed actual military service as a Confederate soldier and was honorably separated from such service; and that applicant was married to said soldier prior to January 1st, 1900, and that she was not remarried; it is, therefore,

ORDERED:

That said applicant be admitted to the pension roll of the State of Georgia for the month of January, 19 38, and thereafter; and that a copy of this order be sent to the Ordinary of said County.

This, the 27th day of December 19 37.

*L. H. "Pat" Gilman*

Director, Confederate Division  
State Department of Public  
Welfare

Disapproved

Witness Application

To be put on Roll in Mar  
Can Right When Pension  
Was on the Pension Roll  
of Georgia

County Clinch

Name Mrs. Nancy Sedgwick

Widow of W. F. Sedgwick

Company D

Regiment 9th Fla.

Date of Husband's Death  
Dec. 1921

Date of Marriage  
Mar. 5, 1890

John V. Clark  
Commissioner of Pensions

11 - 3 - 38

ORDINARY'S CERTIFICATE

STATE OF GEORGIA

Clinch County

I, Mrs. Kate G. Pafford Ordinary of said County, do certify that I know Mrs. W. F. Sedgwick, 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, 1900; that I also know J. J. Smith, 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 2nd day of Nov, 1938.

(SEAL OF ORDINARY)

Kate G. Pafford, Ordinary  
Clinch County

Burial expenses of Nancy Sedgwick, Confederate widow pensioner who died March, 1st, 1941.

March, 1-1941.

Casket	\$35.00
Dress	10.00
Services (Hearse)	5.00
	<hr/>
	\$50.00

GEORGIA, CLINCH COUNTY.

The above and foregoing account is rendered for services for Funeral expenses of Nancy Sedgwick Confederate widow pensioner of Clinch County, Georgia, who died without owning sufficient property to pay this bill.

The above and foregoing account was sworn to and subscribed before me Frank Thomas this March, 6th, 1941.

Kate C. Pafford  
Ordinary Clinch County, Georgia.

COURT OF ORDINARY  
MRS. KATE C. PAFFORD, ORDINARY  
CLINCH COUNTY  
HOMERVILLE, GEORGIA

3/8/1941.

Department of Pensions & Records,  
Atlanta, Ga.

Enclosed please find application for funeral expenses for Nancy Sedgwick, Confederate Widow pensioner class "B" of Clinch County, Georgia, who died on March, 1st, 1941. and left no estate.

Yours very truly,  
Kate C. Pafford  
Ordinary.

COURT OF ORDINARY  
MRS. KATE C. PAFFORD, ORDINARY  
CLINCH COUNTY  
HOMERVILLE, GEORGIA

I have this day received from Kate C. Pafford, Ordinary Clinch County, Georgia, \$30.00 to pay on Funeral expenses for Nancy Sedgwick, deceased widow pensioner of Clinch County, Ga.

This March, 21st, 1941.

Frank Thomas

HOMERVILLE HARDWARE & FURNITURE COMPANY  
General Hardware and Farm Implements  
Furniture and House Furnishings

PHILOCO RADIOS  
ELECTRIC AND KEROSENE BURNING  
REFRIGERATORS

FUNERAL DIRECTORS  
AND EMBALMERS

HOMERVILLE, GEORGIA

TO FRANK THOMAS

MONTH OF  
TERMS:

DATE	ITEM	CHARGES	CREDITS	BALANCE
MAR 1/41	TO ACCOUNT RENDERED CASKET DRESS H SERVICES	35.00 10.00 5.00		50.00

I, Dr. F. A. Brink, Clinch County Commissioner of Health, do certify  
that the within and foregoing is a true and correct copy of the death  
certificate of Nancy Murray Hodgwick  
which is on file in my office.

This Mar. 8, 1944

F. A. Brink  
Clinch County Comm. of Health



DEPARTMENT OF COMMERCE  
BUREAU OF THE CENSUS

CERTIFICATE OF DEATH  
GEORGIA DEPARTMENT OF PUBLIC HEALTH

Date File No.

2. Place of Death		3. Usual Residence of Deceased		4. S. File No.	
(a) County <u>Clinch</u>		(a) State <u>Ga.</u>		(b) County <u>Clinch</u>	
(b) City or Town <u>Hamersville, Ga.</u>		(c) City or Town		(d) Suburb City or Town (Write Name)	
(c) Name of Hosp. or Institution		(d) R.F.D. and Box No.		(e) R. and No. or R.F.D. and Box No.	
(d) Length of Stay Before Death		In This Community		Social Security Number	
5. Full Name <u>Rancy James Delgwick</u>					
PERSONAL AND STATISTICAL PARTICULARS					
6. Sex <u>Female</u>		7. Race <u>White</u>		8. Marital Status <u>Single</u>	
9. Age <u>94</u>		10. Months <u>unknown</u>		11. Days <u>unknown</u>	
12. Date of Birth <u>unknown 1857</u>		13. Birth Place <u>Appling Co., Ga.</u>		14. Birth Date <u>unknown</u>	
15. Usual Occupation <u>Housework</u>		16. Industry or Business		17. Name <u>unknown</u>	
18. Name <u>unknown</u>		19. Birth Date <u>unknown</u>		20. Birth Place <u>unknown</u>	
21. Informant's Own Signature <u>B. J. Thomas</u>		22. Informant's P. O. Address <u>Hamersville, Ga.</u>		23. Burial, Cremation or Removal <u>Burial</u>	
24. Date of Burial <u>3-1-'41</u>		25. Place of Burial <u>Hamersville, Ga.</u>		26. Signature of Person Paying Body <u>J. C. Chambers</u>	
27. P. O. Address of Hamersville, Ga. <u>3-1-'41</u>		28. Registrar's Own Signature <u>F. M. Bruce, M.D.</u>		29. Date of Death <u>March 1</u>	
30. Registrar's Own Signature <u>F. M. Bruce</u>		31. Date of Death <u>March 1</u>		32. Time of Death <u>1:15 P.M.</u>	
33. Registrar's Own Signature <u>F. M. Bruce</u>		34. Date of Death <u>March 1</u>		35. Time of Death <u>1:15 P.M.</u>	
36. Registrar's Own Signature <u>F. M. Bruce</u>		37. Date of Death <u>March 1</u>		38. Time of Death <u>1:15 P.M.</u>	
39. Registrar's Own Signature <u>F. M. Bruce</u>		40. Date of Death <u>March 1</u>		41. Time of Death <u>1:15 P.M.</u>	
42. Registrar's Own Signature <u>F. M. Bruce</u>		43. Date of Death <u>March 1</u>		44. Time of Death <u>1:15 P.M.</u>	
45. Registrar's Own Signature <u>F. M. Bruce</u>		46. Date of Death <u>March 1</u>		47. Time of Death <u>1:15 P.M.</u>	
48. Registrar's Own Signature <u>F. M. Bruce</u>		49. Date of Death <u>March 1</u>		50. Time of Death <u>1:15 P.M.</u>	
51. Registrar's Own Signature <u>F. M. Bruce</u>		52. Date of Death <u>March 1</u>		53. Time of Death <u>1:15 P.M.</u>	
54. Registrar's Own Signature <u>F. M. Bruce</u>		55. Date of Death <u>March 1</u>		56. Time of Death <u>1:15 P.M.</u>	
57. Registrar's Own Signature <u>F. M. Bruce</u>		58. Date of Death <u>March 1</u>		59. Time of Death <u>1:15 P.M.</u>	
60. Registrar's Own Signature <u>F. M. Bruce</u>		61. Date of Death <u>March 1</u>		62. Time of Death <u>1:15 P.M.</u>	
63. Registrar's Own Signature <u>F. M. Bruce</u>		64. Date of Death <u>March 1</u>		65. Time of Death <u>1:15 P.M.</u>	
66. Registrar's Own Signature <u>F. M. Bruce</u>		67. Date of Death <u>March 1</u>		68. Time of Death <u>1:15 P.M.</u>	
69. Registrar's Own Signature <u>F. M. Bruce</u>		70. Date of Death <u>March 1</u>		71. Time of Death <u>1:15 P.M.</u>	
72. Registrar's Own Signature <u>F. M. Bruce</u>		73. Date of Death <u>March 1</u>		74. Time of Death <u>1:15 P.M.</u>	
75. Registrar's Own Signature <u>F. M. Bruce</u>		76. Date of Death <u>March 1</u>		77. Time of Death <u>1:15 P.M.</u>	
78. Registrar's Own Signature <u>F. M. Bruce</u>		79. Date of Death <u>March 1</u>		80. Time of Death <u>1:15 P.M.</u>	
81. Registrar's Own Signature <u>F. M. Bruce</u>		82. Date of Death <u>March 1</u>		83. Time of Death <u>1:15 P.M.</u>	
84. Registrar's Own Signature <u>F. M. Bruce</u>		85. Date of Death <u>March 1</u>		86. Time of Death <u>1:15 P.M.</u>	
87. Registrar's Own Signature <u>F. M. Bruce</u>		88. Date of Death <u>March 1</u>		89. Time of Death <u>1:15 P.M.</u>	
90. Registrar's Own Signature <u>F. M. Bruce</u>		91. Date of Death <u>March 1</u>		92. Time of Death <u>1:15 P.M.</u>	
93. Registrar's Own Signature <u>F. M. Bruce</u>		94. Date of Death <u>March 1</u>		95. Time of Death <u>1:15 P.M.</u>	
96. Registrar's Own Signature <u>F. M. Bruce</u>		97. Date of Death <u>March 1</u>		98. Time of Death <u>1:15 P.M.</u>	
99. Registrar's Own Signature <u>F. M. Bruce</u>		100. Date of Death <u>March 1</u>		101. Time of Death <u>1:15 P.M.</u>	

*Clinch*  
September 26, 1928.

Hon. E. C. Locklear,  
Attorney At Law,  
Homerville, Ga.

Dear Sir:

Your letter of September 24, regarding the eligibility of a widow who was married after 1861 for a pension has been received, and I have taken up the matter with the Attorney General, as requested by you.

He says that Penal Code Section 1491 had a proviso that the pension was allowed only to such widows as were married at the time of the service of such husband in the Confederate Army, and have remained unmarried since the death of such soldier husband. Amendments have been passed to this act extending the time of marriage until eventually it was advanced to a proviso that the widow had to have been married prior to the first day of January, 1861.

Of course it is a pity that every widow of a Confederate soldier cannot be granted a pension, but the Pension Department is controlled by laws which it is compelled to follow.

I regret that Mrs. V. F. Sedgwick is not eligible for a pension under the existing laws, but when the present law as to eligibility is amended to include those widows who were married in the nineties, she should make application to be enrolled without delay.

With kind regards,

Very truly yours,

John W. Clark

Commissioner of Pensions

By \_\_\_\_\_

Copy for Hon. Geo. M. Napier,  
Attorney General  
Capitol.

*Clerk*

*See Opinion of Atty. General  
Dated Nov. 21-1928*

November 22, 1928.

Hon. Kate C. Pafford,  
Ordinary of Clinch County,  
Homerville, Ga.

My dear Judge:

The application of Mrs. Nancy Sedgwick for a pension as the widow of W. F. Sedgwick, Co. D, 8th. Fla., has not been approved for the reason that she was not married to her soldier husband prior to January 1, 1861.

Should the law be amended to include those widows who were married in 1890, Mrs. Sedgwick should then make application to be enrolled as a pensioner.

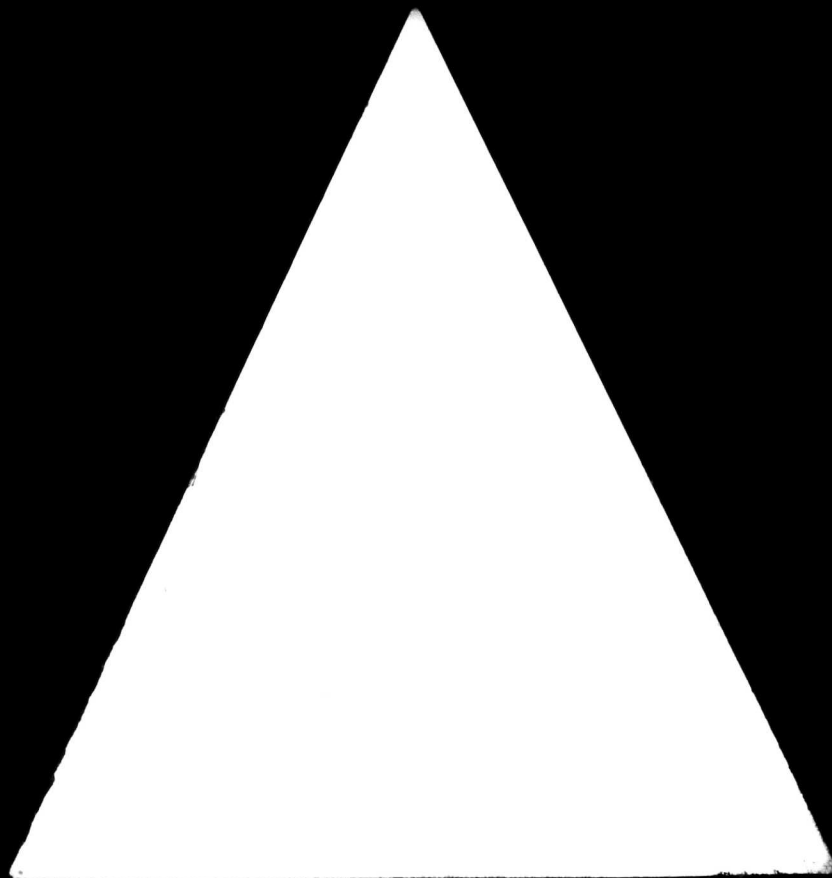
With kind regards,

Very truly yours,

John W. Clark  
Commissioner of Pensions

By: \_\_\_\_\_

*Clerk*



Hedgwick, W. F.  
Clintons County

No. OK 1906

**INDIGENT PENSION**  
**1906**

Name W. F. Sedgewick

County Clintons

Co. A 9th Fla Regt.

Approved 1906

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. Hagaman, State Printer, Atlanta, Ga.

9/24/06

Remitted to possession of

J. T. Sedgewick  
Ordinary &c

STATE OF GEORGIA,  
County of Clintons,  
I, W. F. Sedgewick,  
do hereby certify that the within and receipt for the pension allowed and request that he make same to J. T. Sedgewick  
at Hammond, La. in the month of March 1906.

Witness my hand and seal, this 28 day of March 1906.

W. F. Sedgewick [L.S.]

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch COUNTY.

I, W. F. Sedgewick hereby authorize  
W. D. Wright of Atlanta Ga

to receive and receipt for the pension allowed and request that he remit same to J. T. Dams  
at Hammer Valley Ga by mail

Witness my hand and seal, this 23 day of Aug 1906

Executed in presence of

J. T. Dams  
W. D. Wright

[L. S.]

# QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Clinch COUNTY.

William F. Sedgewick of said State and County, desiring to avail himself of the Pension Act (Section 1284, Code), hereby submits his proofs, and after being duly sworn true answers to make to the following questions, do so as follows:

1. What is your name and where do you reside? (Give State County and post-office).  
William F. Sedgewick, Hammer Valley, Clinch Co. Ga
2. How long and since when have you been a resident of this State? 61 years since Nov 26 1842
3. When and where were you born? Nov 26 1842 in William Georgia
4. When and where and in what company and regiment did you enlist or serve? December 1862 in Company No 975 Eleventh Fla Volunteers
5. How long did you remain in such company and regiment? from January 1863 until the middle of August of 1865
6. When and where was your company and regiment surrendered and discharged? at Appomattox Court House in Virginia April 9 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? at
9. How much can you earn (gross) per annum by your own exertions or labor? about three dollars per year
10. What has been your occupation since 1865? small jobs labor
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 whether you are totally blind and when and where you lost your sight? I have been infirm since 1865, human frailty about five years
13. What property, real and personal, or income, do you possess, and its gross value? none
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? none
15. In what County did you reside during those years, and what property did you then return for taxation? Hammer Valley Clinch Co. Ga. a few acres of land
16. How were you supported during the years 1899, 1900, 1901 and 1902? by support of 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? about \$20.00 I earned about \$1.00
18. What was your employment during 1898, 1899, 1901 and 1902? What pay did you receive in each year? small jobs about \$1.00 per year
19. Have you a family? If so, what number and names? yes, one son, William F. Sedgewick, Jr., born Nov 26 1873, now living in Atlanta Ga.
20. Have you ever made an application for pension? yes, in 1899, 1900, 1901 and 1902
21. How were your applications received? by the Pension Office at Atlanta Ga.
22. Have you ever been declared insane? no
23. Have you ever been declared idiotic? no
24. Have you ever been declared deaf and dumb? no
25. Have you ever been declared blind? no
26. Have you ever been declared insane, idiotic, deaf and dumb, or blind? no
27. day of Aug 1906
28. W. F. Sedgewick County.

Every Question MUST Be Answered.

Sedgewick, W. F.  
Clinch County

No. OK 1906

**INDIGENT PENSION.**

**1906**

Name W. F. Sedgewick  
County Clinch  
Co. No 9th Fla Regt 190

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.

4/2/10

# QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Clinch COUNTY.

O. P. Register and A. B. Swearingen of said State and County, having been presented as a witness in support of the application of W. F. Sedgwick for pension under section 1254, Code, 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? Clinch County Ga.
2. Are you acquainted with W. F. Sedgwick the applicant; if so, how long have you known him? about fifty years
3. Where does he reside, and how long and since when has he been a resident of this State? all his life and living in this State since coming to it
4. When, where and in what company and regiment did he enlist, and how do you know? 9th Florida Regiment Company D. at Green Cove Springs Fla.
5. Were you a member of the same company and regiment? no
6. How long did he perform regular military duty? from 1862 until 1865
7. When and where was his command surrendered? at Appomattox Court house in the State of Virginia.
8. Were you present when it surrendered? was near there (not at place)
9. Was applicant present? he was I think
10. If he was not present, where was he? just before he was present

When did he leave his command? at Appomattox For what cause? surrender

By what authority he left? Surrender of Army How do you know all of this? by hearing him with the Command before the surrender

11. What property, effects or income has the applicant? (Give your means of knowledge.) don't know of any, from annual appearance very little 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? Can't say but don't think he had but very little of any

13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? don't think he had any to convey to any one

14. What is the applicant's occupation and physical condition? a common laborer and poor condition on account of old age and shell wound etc. lost his leg June 1863

15. Is the applicant unable to support himself by labor of any sort; if so, why? yes by reason of old age and feeble condition

16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? by what he could do and help of his two little daughters

17. What portion of his support for these four years was derived from his own labor or income? we think about one half

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

19. Who composes family? What property have they? Children's age and the earning capacity? Wife and two daughters, none that are known of, small girls able to earn but very little. don't say more

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

Sworn to and subscribed before me, this the 19 day of August 1904

O. P. Register A. B. Swearingen Witness.

W. F. Sedgwick Ordinary.

# AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Clinch COUNTY.

Personally come before me Drs. C. R. Thigpen and

A. H. Culpepper, both known to me as reputable physicians

of said County, who, being severally sworn, say on oath that they have examined carefully W. F. Sedgwick

applicant for pension under Section 1254, Code, and after

such personal examination say that his present physical condition is as follows:

He find left forearm has been broken and crushed out of joint at elbow by piece of shell was near set which incapacitates him for work.

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

Sworn to and subscribed before me, this, the 28 day of Aug 1904

A. H. Culpepper M.D. C. R. Thigpen M.D. Ordinary.

# ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Clinch COUNTY.

I, J. T. Dume Ordinary, in and for said County, hereby certify

that the applicant W. F. Sedgwick resides in said County, and has

been a bona fide resident of this State since the 26 day of Nov 1892

and that the witnesses, viz.: O. P. Register A. B. Swearingen and

Drs. C. R. Thigpen A. H. Culpepper 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 Clinch County shows that applicant

returned for taxation in his name in 1901 2105 Dollars of

property, and in 1902 205 Dollars of property; in 1903

1705 Dollars of property; in 1904

1505 Dollars of property.

Witness my hand and seal of office, this 2 day of August 1904

J. T. Dume Ordinary.

Clinch County.

Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answers make to each other questions asked of you, and the answers you shall give will be the whole truth, so help you God."

Additional service may be obtained by the applicant and witnesses by the Ordinary.

In every case the Ordinary must certify to the answers of the witnesses, and as to the execution of the proof so there set out.





# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Clutch County.

Personally appears W. F. Hedgewood of Clutch 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 26 day of Nov 1842; that he is 68 years old and by occupation a Soldier, that he enlisted in the military service of the Confederate States (or of the State of Fla) during the war between the States, and served for the term of 3 yrs in Company B, of 9th Regiment of Fla; that his physical condition is as follows: Superior to duty.

that his property consists of the following items: none

of the value of none Dollars. I am now earning by my labor, none 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 Clutch County, been allowed a pension for the year 1905. this is a new business.

Sworn to and subscribed before me, this the 2 day of Jan 1906.  
L. T. Dams Ordinary.

State of Georgia,

Clutch County.

I, L. T. Dams Ordinary of said County, do certify that I am well acquainted with W. F. Hedgewood 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 Jan 1906.

Ordinary Clutch County.



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

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Clutch County.

Personally appears W. F. Hedgewood of Clutch 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 22 day of Nov 1840; that he is 68 years old and by occupation a Soldier, that he enlisted in the military service of the Confederate States (or of the State of Fla) during the war between the States, and served for the term of 4 yrs in Company B, of 9th Regiment of Fla; that his physical condition is as follows: Superior to duty.

that his property consists of the following items: none

of the value of none Dollars. I am now earning by my labor, none 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 Clutch County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 21 day of Jan 1907.  
L. T. Dams Ordinary.

State of Georgia,

Clutch County.

I, L. T. Dams Ordinary of said County, do certify that I am well acquainted with W. F. Hedgewood 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 Jan 1907.

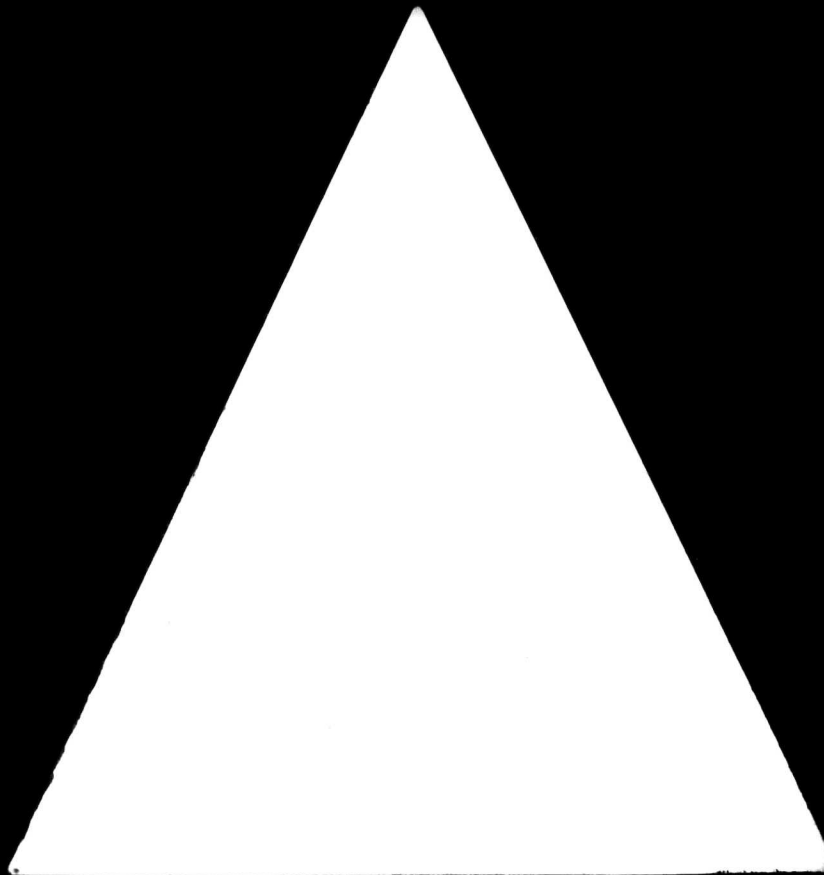
Ordinary Clutch County.



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

NOTE.—A Midavit should not be attested before January 1st, 1900.

NOTE.—A Midavit should not be attested before January 1st, 1900.



8/24/05-

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch COUNTY.

I, J. D. Sellers hereby authorize

W. A. Wright of Columbia Co., Ga.

to receive and receipt for the pension allowed and request that he remit same to J. D. Sellers

Ordinary at Homerville, Ga. by mail

Witness my hand and seal, this 11 day of July 1906

Executed in presence of

J. D. Sellers [L. S.]

INDIGENT PENSION.

1906

Name J. D. Sellers  
County Clinch  
On 7th day of July 1906

Approved 1906

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.

8/24/05

# QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Clinch COUNTY.

I, J. D. Sellers of said State and County, desiring to avail himself of the Pension Act (Section 1904, Code), 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).

J. D. Sellers, Clinch County, Georgia

2. How long and since when have you been a resident of this State? Since 1857

3. When and where were you born? About seventeen (17) years, June 18, 1837.

4. When and where and in what company and regiment did you enlist or serve? At 15, 3rd

Regiment, in Wilmington, N.C. June 1861

5. How long did you remain in such company and regiment? From June 1861

until May 1865

6. When and where was your company and regiment surrendered and discharged? At

Appomattox, Va. when Lee surrendered

7. Were you present with your company and regiment when it was surrendered? I was not

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 taken prisoner near Gettysburg, Pa. May 12th '64, by the Rebels.

9. How much can you earn (gross) per annum by your own exertions of labor? Nothing

10. What has been your occupation since 1865? Teaching principally

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"? All three. partly blind

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? I have been

failing fast for the past 4 years owing to

supposed to be blindness & deafness mostly

I suppose my failing sight is the effect of old age

13. What property, real and personal, do you possess, and its gross value? nothing in the world

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? my wife owned

a little place (8 acres) and a log house

which belong to her children it is 2 miles from depot

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

16. How were you supported during the years 1899, 1900, 1901 and 1902? by picking a

little cotton making a little patch & odd jobs

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 suppose 60 dollars my son helped me some

18. What was your employment during 1898, 1899, 1901 and 1902? What pay did you receive in each year? I was no paid pay I taught some and did odd

19. Have you a family? If so, who compose such family? Give their means of support? Have they a

homestead, or other property? Their ages and how employed? No. I am staying on

the little place above mentioned with my two

little children being aged 12 and 8 years

20. Are you receiving any pension? If so, what amount and for what disability? Not lady

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

15 day of July 1906

J. D. Sellers Applicant.

of Clinch County.

Ordinary.

of Clinch County.

of Clinch County.

of Clinch County.

of Clinch County.



# QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Echols COUNTY.

J. H. Harden

of said State and County, having been presented

as a witness in support of the application of J. D. Sellers 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. Harden I reside in Echols County Georgia
2. Are you acquainted with J. D. Sellers, the applicant; if so, how long have you known him? Since March 1861
3. Where does he reside, and how long and since when has he been a resident of this State? he resides in Echols County Georgia 18 years
4. When, where and in what company and regiment did he enlist, and how do you know? J. H. Harden he enlisted in Wilmington North Carolina
5. Were you a member of the same company and regiment? yes
6. How long did he perform regular military duty? all during the war
7. When and where was his command surrendered? at the Appomattox to H. A. in Virginia
8. Were you present when it surrendered? no
9. Was applicant present? no
10. If he was not present, where was he? he was in Prison  
When did he leave his command? May 12 - '64 For what cause? he was captured  
By what authority he left? he was taken Prisoner How do you know all of this? I was there

11. What property, effects or income has the applicant? (Give your means of knowledge.) if he has any I dont know it
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? none

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

he has had no property

14. What is the applicant's occupation and physical condition? he has no occupation

he is old and unable to work he has Rheumatism and a kidney trouble

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

16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? he earned a little teaching school in 1898 and 1899

and had earned nothing by labor since

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

19. Who composes family? What property have they? Children's age and their earning capacity?

he has him self and three children the children has 8 acres of land ages 12, 12, 8

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

Sworn to and subscribed before me, this the

21 day of June 1905

J. F. Parrish Ordinary.

J. H. Harden Witness.

# AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Clint COUNTY.

Personally came before me

A. H. Culppeper and E. R. Higgins both known to me as reputable physicians

of said County, who being severally sworn, say on oath that they have examined carefully

J. D. Sellers applicant for pension under Section 1254, Code, and after

each personal examination say that his precise physical condition is as follows:

Spinal Curvature left thigh bending high same May 12, 1863 and he now has Rheumatism in same knee and hip  
also kidney and bladder trouble continued with age makes him unable to earn  
and that we have no interest in said pension being allowed. I believe by service.

Sworn to and subscribed before me, this, the

16 day of July 1905

Ordinary.

A. H. Culppeper M. D.  
E. R. Higgins

# ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Clint COUNTY.

I, J. F. Parrish Ordinary, in and for said County, hereby certify

that the applicant J. D. Sellers resides in said County, and has

been a bona fide resident of this State since the 1 day of August 1887

and that the witnesses, viz.: A. H. Culppeper E. R. Higgins

and J. H. Harden and J. D. Sellers 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 Clint County shows that applicant

returned for taxation in his name in 1899 68 100 Dollars of

property, and in 1900 68 100 Dollars of property; in 1901

68 100 Dollars of property; in 1902

68 100 Dollars of property. also same

in 1904 & 1905 68 100

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

Witness my hand and seal of office, this 15 day of July 1905

J. F. Parrish Ordinary,

of Clint 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,

Clinch COUNTY.

I, J. D. Sellers hereby authorize  
W. A. Wright of Atlanta Ga  
to receive and receipt for the pension allowed, and request that he remit same to  
J. T. Dume ordinary at Hamerhill Ga  
by mail

WITNESS my hand and seal, this \_\_\_\_\_ day of \_\_\_\_\_ 1906.

J. D. Sellers [L. S.]

Executed in the presence of

J. T. Dume

Cons. Section 1294.

(FOR THOSE ALREADY ENROLLED.)

No. 1638

## INDIGENT SOLDIER'S PENSION 1906.

Name J. D. Sellers  
County Clinch  
Co. F Regiment 22nd

WARRANT ISSUED  
JAN 26 1906.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

W. A. Wright

The Pensioner's Name and Residence Co. Clin. W. Hamerhill, Ga.

no data

STATE OF GEORGIA,

Clinch COUNTY.

I, J. D. Sellers hereby authorize  
W. A. Wright of Atlanta Ga  
to receive and receipt for the pension allowed, and request that he remit same to  
J. T. Dume ordinary at Hamerhill Ga  
by mail

WITNESS my hand and seal, this \_\_\_\_\_ day of Jan 1907.

J. D. Sellers [L. S.]

Executed in presence of

J. T. Dume

Cons. Section 1294.

(FOR THOSE ALREADY ENROLLED)

No. 4657

## INDIGENT SOLDIER'S PENSION 1907.

Name J. D. Sellers  
County Clinch  
Co. F Regiment 22nd

WARRANT ISSUED  
1907.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

The Pensioner's Name and Residence Co. Clin. W. Hamerhill, Ga.

no data

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Clinch County.

Personally appears J. D. Sellers of Clinch 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 \_\_\_\_\_ 1887; that he is 68 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of North Carolina) during the war between the States, and served for the term of 2 years in Company 7, of 24th Regiment of Vol; that his physical condition is as follows: Very severely crippled and aged.

that his property consists of the following items: none

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

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

Sworn to and subscribed before me, this the

2nd day of Jan 1906.

J. T. Dams Ordinary.

State of Georgia,

Clinch County.

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

Given under my official signature and seal, this

day of Jan 1906.

J. T. Dams  
Ordinary Clinch County.



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

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Clinch County.

Personally appears J. D. Sellers of Clinch 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 \_\_\_\_\_ 1887; that he is 62 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of North Carolina) during the war between the States, and served for the term of 4 years in Company 7, of 24th Regiment of North Carolina Vol; that his physical condition is as follows: Infirmity from age.

that his property consists of the following items: none

of the value of none Dollars. I am now earning by my labor, none 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 Clinch County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the

1st day of Jan 1907.

J. T. Dams Ordinary.

State of Georgia,

Clinch County.

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

Given under my official signature and seal this

day of Jan 1907.

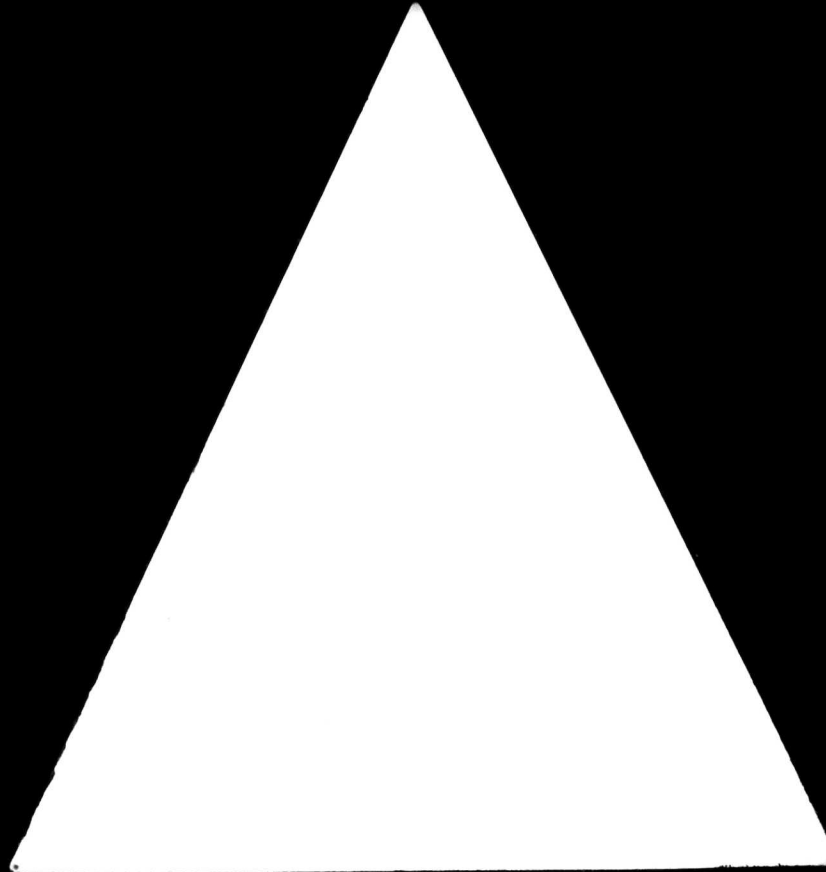
J. T. Dams  
Ordinary Clinch County.



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

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

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



Pension office 10-27-13

Applicant must swear and state to whom he owes all his property and what he gave away and its cash value. State and prove them to be true.

J. W. Lindsey Com.

### Soldier's Application.

UNDER ACT 1910.

✓  
✓  
Cruz - Blanch  
Name - Shirley Shuman  
Company - 1st Cavalry  
Regiment -  
Approved -

J. W. LINDSEY  
Commissioner of Pensions

CHARLES E. BYRD, SHERIFF, ALABAMA

11/2/13 10/28-1914

Pension office 10-27-13

App; trust must send and state to whom he sold all the  
the price wife for, then to whom he paid it for, and  
such, and what he gave away and its cash value, and  
property and then apply for pension. State and prove  
prove them to be true.

J. W. Lindsey Com

**Soldier's Application.**

UNDER ACT 1910.

*Blanch*  
Name *Blanch*  
Company *1st Alabama*  
Regiment  
Approved

J. W. LINDSEY,  
Commissioner of Pensions

CHAS. F. BYRD, State Printer, Albany.

17/1/13 10/1/14-1914







# QUESTIONS FOR WITNESS AS TO SERVICE

STATE OF GEORGIA.

Clinch County.

J. R. Dickerson of said State and County is hereby presented as a witness in support of the application of Harris Sherman 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. R. Dickerson  
in Clinch County, Georgia.
2. How long and since when have you known Harris Sherman the applicant?  
I have known him since the year 1854
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? in Clinch County, Georgia. has been a resident of this State ever since I knew him in 1854.
4. When, where and in what Company and Regiment did Harris Sherman enlist during war from 1861 to 1865? (Give date and place) enlisted in Company H, 1st Ga. Cavalry, at Sherman, Ga. at the time of the war.
5. How did you obtain your information of this Service?  
By being with him in same Regiment, 1861, in Co. I
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) About 14 months
7. When and where was his Command surrendered or discharged (give date and place).  
April 1865 at Sherman Ga
8. Were you personally present at the Surrender? yes
9. If not, where were you and how came you there? was present
10. Was the applicant personally present with his Command at surrender? yes
11. If not where was he and how came him there? was present
12. When did he leave his Command? April 1865 Where was his Command when he left it? Sherman Ga for what cause did he leave? Discharged  
By whose authority did he leave? Officer's Command and how long was he granted leave? Surrender How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) Of my own knowledge by being member of same Regiment
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? no If so, when and where?  
In what prison was he held? and when released?

Sworn to and subscribed before me, this

4th day of March 1913

J. J. Dams

Ordinary

of Clinch County.

# AFFIDAVIT OF TWO FREEHOLDERS

STATE OF GEORGIA.

Clinch County.

Personally before me, J. J. Dams, who on oath says that they are freeholders residing in said County and we know Harris Sherman 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) I don't think he has any property at all at present, or any other

1. What property, if any, has been sold or given away by the applicant or his wife since 5 Nov 1908? (State fully by items) He sold in 1902 property to the value of about 1600 of 1890 value of property
2. When and to whom was it sold or given to? to the wife of the applicant
3. What was the price paid or stated to be paid? not known
4. What relation is the party to applicant? none
5. What disposition was made of the proceeds of the sale? helping the children
6. Was the disposition of this property made in good faith and full value? yes or was it made to obtain a pension? not known

Sworn to and subscribed before me, this the

4th day of March 1913

J. J. Dams

Ordinary

J. J. Register

A. M. Tomlinson

of Clinch County.

# ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Clinch County.

I, J. J. Dams Ordinary of said County, certify that I know the applicant Harris Sherman for Pension is the person he represents himself to be and resides in said County. That I also know J. R. Dickerson the witness swearing to the service and J. J. Register and A. M. Tomlinson who are freeholders, 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 Returns of Harris Sherman show that he and wife value for tax in 1908 \$1600 for 1909 \$1600 for 1910 \$2200 for 1911 \$2200 for 1912 \$2200 for 1913 \$2200

Sworn under my hand and official seal of office this 4th day of March 1913.

J. J. Dams

Ordinary

of Clinch County.

NOTE 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 and fully make to each question asked you and the evidence you shall give shall be the truth, so help you God."  
2. Additional evidence may be attached if it is proper and pertinent.  
3. Affidavits must be made before the Ordinary and sworn by him.  
4. If evidence, here property of all in the possession, use or control of self and wife, affidavit of freeholders unnecessary.

J. T. Dame Ordinary  
of Clinch County

1. You do solemnly swear that you will true answers make to the questions asked you and the evidence you shall give shall be the whole truth as help you God.  
2. Additional affidavits may be attached to these papers as convenient.  
3. All affidavits must be made before the Ordinary and sworn to by him.  
4. It is unlawful to be present at all in the presence, use or control of said and with affidavits of investigation necessary.

State of Georgia  
Clinch County  
John W. Powell  
Depositor and Saith that  
to the best of his knowledge  
and Belief that Harris  
Simmons applicant for  
Pension that his wife  
Melvina Simmons did  
heirer from her father  
Estate the following  
Property to wit  
50 head of Stock  
Cattle 300 acres of Land  
one mule 100 head of  
Sheep \$150 Dollars in  
money and this Property  
has been given her children  
on its Exequit  
Joseph Powell  
John W. Powell

OFFICE OF  
J. T. DAME  
ORDINARY  
CLINCH COUNTY

HOMERVILLE, GA. Oct 16 1914

Hon. W. Lindsey  
Atlanta Ga  
Dear Sir:-

I am returning the  
application of Harris Simmons  
which I have had amended and  
to his property. you will see  
what property he owned belonged  
to his wife. at his death her  
children came in and the  
property was divided amongst  
them. hoping you can see  
your way clear to approve it  
and oblige.

Yours friend  
J. T. Dame

OFFICE OF  
J. T. DANE  
ORDINARY  
CLINTON COUNTY

HOMERVILLE, GA.

190

State of Georgia  
Clinton County

Personally appeared Abner Sirmans  
who on oath says, that he personally knows the  
applicant Harris Sirmans for Pension, and further  
knows that what property that he passed did  
come through his wife estate that she got  
from her father at his death. he lost his  
wife in 1912. She was sick a long time and  
had heavy doctor bills to pay and after her death  
the property was divided amongst her heirs  
which belonged to them at her death. and the  
applicant for Pension Harris Sirmans has but  
very little property if any and is living with his children  
and I personally know he is worthy of his Pension as  
he served in the War to the State in April 1865

his  
Abner Sirmans  
witness

Sworn to and subscribed before me this  
16<sup>th</sup> day of October 1918,

J. T. Dane  
Ordinary &c.

Georgia, Fulton County.

Personally appeared before me an office of said  
State, duly authorized by law to administer oaths, R. G.  
Dickerson who on oath says that he ~~has~~ is forty-five years old;  
that he was born and reared in the settlement where Harris  
Sirmans lives in Clinch County; that he knows of his own knowl-  
edge that the wife of Harris Sirmans inherited 350 acres of  
land from her father, David Johnson; that this land lay about  
ten miles from where Harris Sirmans lives; that this land was  
sold and the money invested in land near the home of said Harris  
Sirmans, ten miles away.

R. G. Dickerson

Sworn to and subscribed before me,  
this 9<sup>th</sup> day of August, 1916.

J. T. Dane  
Ordinary &c.

Georgia, Clinch County.

Personally appeared before me, an officer of said State duly qualified by law to administer oaths, Harris Sirmans, who on oath says that he was married in the year 1868; that he married a daughter of David Johnson of Clinch County, Georgia; that David Johnson died in the year about 1877; that at the time of the death of David Johnson, or soon thereafter, this deponent's wife inherited from the estate of said David Johnson the following property, to wit: 350 acres of land; 50 head of cattle; 120 head of sheep, and about \$170<sup>00</sup> cash. This property was taken possession of by this deponent and called his property; that this deponent's wife died in the year 1912, and that at the time of her death she had 7 children; that after her death, knowing that the property above described came through his said wife, this deponent divided among her children the following described property, it being theirs and in their own right in equity and good conscience through inheritance from their mother: To wit 640 acres  
land 50 head of cattle

This deponent spent the following sum  
\$200<sup>00</sup> dollars for doctors bills & funeral expenses  
that since said property has been delivered to the children of this deponent's wife, it has left this deponent property only to the value of \$800<sup>00</sup>. The property above described was a part of the property embraced in the original application for a pension of this deponent. This deponent avers that he only now has property to the value of \$800<sup>00</sup> dollars; that he is 71 years old, unable to earn anything

by his own work and that he is really in need of a pension from the State.

Harris Sirmans

Sworn to and subscribed before me,  
this 7 day of August, 1916.

Joseph Powell J.P.

Georgia, Clinch County.

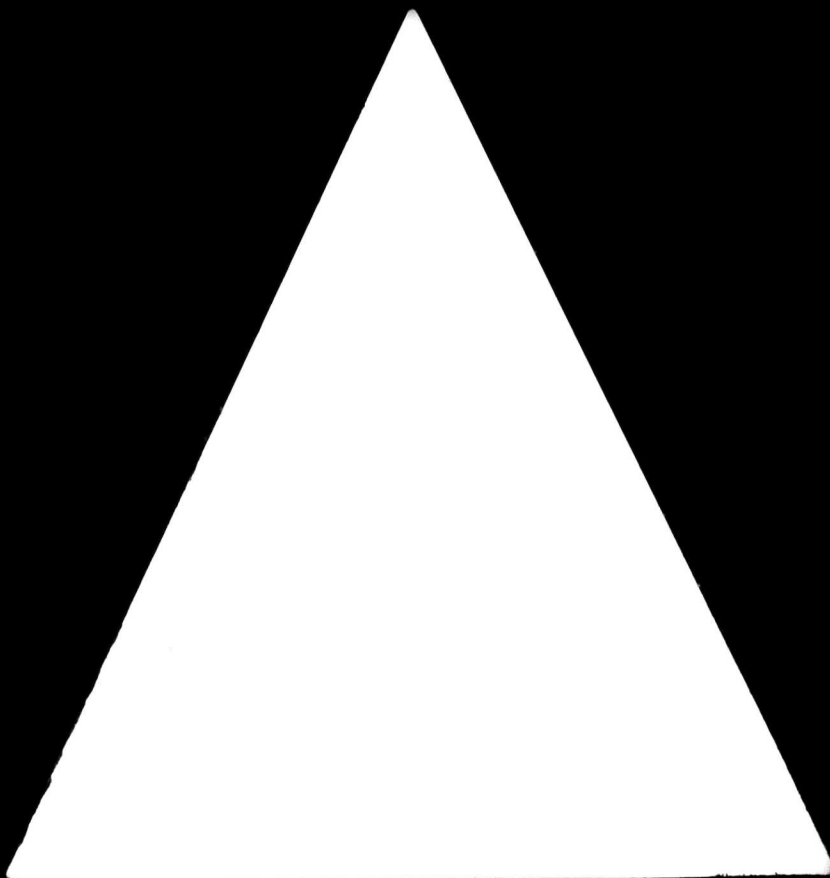
Personally appeared before me, an officer of said State duly qualified by law to administer oaths, John W. Powell, who on oath says that he is 76 years old; that he has resided near Harris Sirmans for 60 years and that he knows of his own knowledge of certain property coming to the said Harris Sirmans through his wife, who was the daughter of David Johnson; that he known that the said Harris Sirmans' wife died in the year 1912, and that since the death of the said Harris Sirmans' wife that he has delivered the property to his children that rightfully belonged to their mother, and that the said Harris Sirmans is not now in very good circumstances.

John W. Powell

Sworn to and subscribed before me,  
this 7 day of August, 1916.

Joseph Powell J.P.

Joseph Power J.P.



POWER OF ATTORNEY.

STATE OF GEORGIA,

Clay County, }

I, *Edw. A. Simmons*

hereby authorize  
*Wm. A. Harrell* of *Atlanta Ga.*

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

*only* at *Monrovia* by *mail*

Witness my hand and seal this *19<sup>th</sup>* day of *April* 1896.

Executed in presence of

*L. W. King*  
*George Denham*  
*Wm. A. Harrell*

*Edw. A. Simmons*

*6th*  
*Simmons* *S. A.*  
*No. 365*  
*Bliss Co.*

INDIGENT PENSION

1895/1896

Name *L. A. Simmons*

County *Clay*

Ground *poverty & infirmity*

*Aug 1* 1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDLED TO

*act*

Geo. W. Harrison, State Printer, Atlanta.

*E. 1959*



# POWER OF ATTORNEY.

STATE OF GEORGIA,

*Clutch* County.

*L. A. Simmans*  
*Wm A. Wright Comptroller* of

*Atlanta Ga*

hereby authorize

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

*only* at *Woomerville* by *mail*

Witness my hand and seal this *19<sup>th</sup>* day of *April* 1895.

Executed in presence of

*L. W. Kemp*  
*George Combs*  
*Truway*

*L. A. Simmans*

# QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

*Clutch* County.

*L. Symon A. Simmans* 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 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)  
*L. Symon A. Simmans Dupont Clutch Co. Georgia*
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State?  
*Dupont Ga. All of my life. 56 years*
3. When and where were you born?  
*Clutch Co. Ga.*
4. Did you volunteer in the Confederate Army or in the Georgia Militia?  
*Confederate Army.*
5. When and where did you enlist?  
*Thomas Thomasville Ga. May 1<sup>st</sup> 1862*
6. In what company and regiment did you enlist?  
*Co. A. 2<sup>nd</sup> Ga. Bat of Cavalry*
7. How long did you remain in that company and regiment?  
*About 1 year & 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.  
*My health failed me. I was in the Hospital for months, put in a substitute for my war costing \$3.00*
9. For how long a period did you discharge regular military duty?  
*About 2 years when I was in the summer of 63. health failed me entirely. I put in a substitute as before stated.*
10. When, where and under what circumstances were you discharged from service?  
*Savannah Ga. in the summer of 63. health failed me entirely. I put in a substitute as before stated.*
11. What is your present occupation?  
*No regular occupation.*
12. How much can you earn per annum by your own exertions or labor?  
*About \$40.00*
13. What has been your occupation since 1865?  
*I have done various things to try to live*
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?  
*\$150.00 or able to make about \$50.00*
15. What is your present physical condition and how long have you been in such condition?  
*I have Chronic Liver & Kidney affections Neuralgia. Catarrh which was brought on by long & continued sickness contracted during the war. Since which time I have never been a well day.*
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"?  
*Infirmary & 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?  
*For about 15 yrs - I have not been able to support myself. Suffering immensely with Chronic Liver & Kidney trouble. also Neuralgia & Catarrh.*
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?  
*None.*
20. In what County did you reside during those years and what property did you then return for taxation?  
*Clutch Co. no property of my own.*
21. How were you supported during the years 1893 and 1894?  
*Partly by myself but mostly by assistance of friends & relatives.*
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 \$0.00. or I contributed about \$0 each year.*
23. What was your employment during 1893 and 1894? What pay did you receive in each year?  
*No regular employment. Not over \$40.00 each year.*
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 am married. wife living. 2 children. invalid daughter living with me. dependant on me. son 25 yrs old. in bad health and out of employment. wife also an invalid. there is not a more helpless family in the State.*

*6th*  
*Simmons & A.*  
*No. 365*  
*Clutch Co.*

INDIGENT PENSION

1895/1896

Name *L. A. Simmans*

County *Clutch*

Ground *poverty & infirmity*

pay *1*

1896

RICHARD JOHNSON,

Secretary Executive Department

WARRANT RETURNED TO

*at*

Geo. W. Harrison, State Printer, Atlanta.

*6/9/95*

25. Are you receiving a pension under any law of this State, if so what amount, and for what disability?

I am not.

Sworn to and subscribed before me this

17<sup>th</sup> day of April 1895.

George Cornelia  
of Clinch County.

Ordinary

L. A. Sirmans  
Applicant.

### QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Coches County.

of said State and County, having been presented as a witness in support of the application of L. A. Sirmans 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?  
Robert Roberts, Cocheco County, Georgia.
2. Are you acquainted with L. A. Sirmans, the applicant, if so how long have you known him?  
Yes, Twenty years, 40.
3. Where does he reside, and how long has he been a resident of this State?  
Savannah, Georgia, since birth.
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this?  
Yes, Confederate Army.

5. When, where and in what company and regiment did he enlist?  
May 12, 1862, City of Savannah, Company A, 20<sup>th</sup> Infantry, Cavalry.

6. Were you a member of the same company and regiment?  
Yes, 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?  
He served in Co. A, 20<sup>th</sup> Inf. Cavalry, 1862-63, he served about six months, then he was discharged in the Hospital, and discharged by substitution in 1863.

8. What property, effects or income has the applicant? (Give your means of knowledge.)  
None that I know of. I am in touch with him.

9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same?  
None that I know of.

10. What is the applicant's occupation and physical condition?  
No regular occupation, but he has a headache.

11. Is the applicant unable to support himself by labor of any sort, if so, why?  
Yes, from a complication of diseases.

12. How was he supported during the years 1893 and 1894?  
Partly by himself, and partly by relatives & friends assistance.

13. What portion of his support for these two years was derived from his own labor or income?  
Almost none, mostly from friends.

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?  
as before stated he is now a complication of diseases, unable to make a support for himself.

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

Sworn to and subscribed before me, this  
15<sup>th</sup> day of April 1895.

R. Roberts  
Ordinary

Applicant.

### AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Chinch County.

Personally came before me

S. H. Rintz M.D.

and

S. A. Sirmans, both known to me as reputable physicians

of said county, who being severally sworn, say on oath that they have examined carefully

S. A. Sirmans, applicant for pension under the Act of 1894, and after such personal examination, say that his precise physical condition is as follows:

He is affected with Chronic liver disease, frequent diarrhoea with headache & causing complete prostration at times. Chronic Nephritis, or inflammation of the kidneys, chronic form, neuralgia, nasal catarrh.

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  
17<sup>th</sup> day of April 1895.

George Cornelia  
Ordinary

S. H. Rintz M.D.  
S. A. Sirmans

### ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Chinch County.

I, George Cornelia, Ordinary in and for said County, hereby certify that the applicant L. A. Sirmans 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: S. H. Rintz M.D. & R. Roberts

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 Chinch County show that applicant returned for taxation in his name in 1893, None, dollars of property, and in 1894, None, dollars of property.

Witness my hand and seal of office, this 19<sup>th</sup> day of April 1895.

George Cornelia  
Ordinary  
of Clinch 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.

Clay County. }  
 I, L. A. Simmons hereby authorize William A. Wright, Capt. Gen. of Atlanta  
 to receive and receipt for the pension paid hereon and request that he remit same to  
Ordinary by mail  
 at Komer velle.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 28  
 day of December 1897.

L. A. Simmons [L. S.]

Executed in presence of

W. E. Cornelia  
George Cornelia  
Ordinary

# POWER OF ATTORNEY.

State of Georgia.

Clay County. }  
 I, L. A. Simmons hereby authorize William A. Wright, Capt. Gen. of Atlanta Ga.  
 to receive and receipt for the pension paid hereon and request that he remit same to  
George Cornelia by mail  
 at Komer velle, Clay Co. Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 28  
 day of December 1897.

L. A. Simmons [L. S.]

Executed in presence of

W. E. Cornelia  
George Cornelia  
Ordinary

Simmons, L. A.

Clay Co.

AUG 13 DEC. 1894

(For Those Already Enrolled.)

W. E. Cornelia  
No. 222

INDIGENT

Soldier's Pension.

1897.

Name L. A. Simmons  
 County Clay

July 1 1897.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

att

W. E. JOHNSON, STATE PRINTER, ATLANTA.

No data

Simmons, L. A.  
Clay Co.

(For Those Already Enrolled.)

No. 1019

INDIGENT

SOLDIER'S PENSION,

1898.

Name L. A. Simmons  
 County Clay

WARRANT ISSUED

1/4 1898.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

W. E. J.

W. E. JOHNSON, STATE PRINTER, ATLANTA.

No data

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Clinch County.

Personally appears L. A. Sirmans of Clinch 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 1<sup>st</sup> day of July 1839, that he is 57 years old and by occupation a lawyer; 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 A, of 20<sup>th</sup> Regiment of Georgia Cavalry; that his physical condition is as follows: I have complaint, Catarrh, Hemorrhoids, chronic diarrhea, & bad cough.

that his property consists of the following items 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 Clinch county been allowed a pension for the year 1896.

Sworn to and subscribed before me, this, the 28<sup>th</sup> day of December 1897. L. A. Sirmans

George Cornelius Ordinary.

STATE OF GEORGIA,

Clinch County.

I, George Cornelius Ordinary of said County, do certify that I am well acquainted with L. A. Sirmans 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 28<sup>th</sup> day of December 1897.



George Cornelius  
Ordinary Clinch County.

NOTE.—The blank spaces must be filled.

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Clinch County.

Personally appears L. A. Sirmans of Clinch 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 1<sup>st</sup> day of July 1839; that he is 58 1/2 years old and by occupation a lawyer; 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 A, of 20<sup>th</sup> Regiment of Georgia Cavalry; that his physical condition is as follows: I have complaint, Catarrh, Hemorrhoids, kidney & urinary troubles, frequent urination, & cough.

that his property consists of the following items 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 1898. I have heretofore as a resident of Clinch county been allowed a pension for the year 1896-7.

Sworn to and subscribed before me, this, the 28<sup>th</sup> day of December 1897. L. A. Sirmans

George Cornelius Ordinary.

State of Georgia,

Clinch County.

I, George Cornelius Ordinary of said County, do certify that I am well acquainted with L. A. Sirmans 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 28<sup>th</sup> day of December 1897.



George Cornelius  
Ordinary Clinch County.

NOTE.—The blank spaces must be filled.

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch County.

I, L. A. Simmons, hereby authorize

William A. Wright of Atlanta Ga.  
to receive and receipt for the pension allowed, and request that he remit same to  
The Ordinary at Homerville  
by mail

Witness my hand and seal this 24 day of January 1899.

Executed in presence of

J. L. Russell } L. A. Simmons (L. S.)

Simmons, L. A.  
Clinch County

CODE SEC. 1324.

(For Those Already Enrolled.)

No. 1967

INDIGENT

SOLDIER'S PENSION,

1899.

Name L. A. Simmons  
County Blount

WARRANT ISSUED

1/17 1899

RICHARD JOHNSON,  
Commissioner of Pensions.

WARRANT HANDED TO

W. A. W.

Geo. W. Harrison, State Printer, Atlanta.

No data

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch County.

I, L. A. Simmons, hereby authorize

Hon. W. A. Wright of Camp General  
to receive and receipt for the pension allowed, and request that he remit same to  
Ordinary at Homerville Ga.  
by mail

Witness my hand and seal, this 35 day of January 1899.

Executed in presence of

George Harrison  
Ordinary

L. A. Simmons (L. S.)

Simmons, L. A.

Clinch Co.

CODE SEC. 1324.

(For Those Already Enrolled.)

NO. 2022

INDIGENT

SOLDIER'S PENSION,

1900.

Name L. A. Simmons  
County Blount

WARRANT ISSUED

January 25 1900

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

Wright

Geo. W. Harrison, State Printer, Atlanta.

No data