Form No. 8.

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

STATE OF GEORGIA, County of Clinch

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 24th day of January 1894.

[SEAL] George Cornelius Ordinary.

Form No. 8.

POWER OF ATTORNEY.

STATE OF GEORGIA, Clinch County.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 24th day of January 1894.

Nancy her X mark Williams [L. S.]

Executed in the presence of us:
Preston Williams
George Cornelius only

DIRECTIONS.

Send amount by Express to me at Homerville Ga, and oblige
in Care of George Cornelius only Nancy Williams

Williams, Nancy
Clinch Co.

FOR THOSE HERETOFORE PAID.

1894.

No. 759

WIDOWS' PENSION,

for year ending February 15th, 1894.

—PAID TO—

Mrs. Nancy Williams

—OF—

Clinch County.

WARRANT ISSUED 1/7 1894,

AND HANDED TO W A WRIGHT

Geo. W. Harrison, State Printer, Atlanta.

Form No. 8.

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

STATE OF GEORGIA, County of Clinch

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 21st day of January 1895.

[SEAL] George Cornelius Ordinary.

Form No. 8

POWER OF ATTORNEY.

STATE OF GEORGIA, Clinch County.

KNOW ALL MEN BY THESE PRESENTS, That I, Nancy Williams of Clinch County in said State, do hereby appoint William A. Wright com gen of Atlanta Ga my true and lawful attorney in fact, for me, and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby 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 21st day of January 1895. Nancy her X mark Williams [L. S.]

Executed in the presence of us:
Preston Williams
George Cornelius ordinary

DIRECTIONS.

Send amount by Express to me at Homerville Ga, and oblige
care of Ordinary Nancy her X mark Williams

Williams, Nancy
Clinch Co.

FOR THOSE HERETOFORE PAID.

1895. 1896

To 1896

No. 3255

WIDOW'S PENSION,

for year ending Febuary 15th, 1895.

—PAID TO—

Mrs. Nancy Williams

—OF—

Clinch County.

widow of John Williams

WARRANT ISSUED 2/1 1895.

AND HANDED TO W A WRIGHT

Geo. W. Harrison, State Printer.

Form No. 1

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Liberty

Personally comes Mrs. Mrs Nancy Williams

who being sworn, says on oath, that she is a bona fide resident of said County of Liberty State of Georgia, and that she has *resided* in said State continuously ever since 1840 That she is the Widow of John Williams who was a Soldier in Company J of the 6th Regiment of Georgia Volunteers, that he enlisted in said Regiment on or about the month of May 1864 and served in the Army up to ~~May~~ September 1864 That he lost his life on the 3rd day of September 1864 (*State here full particulars of the husband's death, when, where and from what cause.*) (

Husband Soldier husband was on detail from his command to gather up absentees and deserters. and was shot and killed by one Nathan Pinckard, while trying to arrest him on the 3rd day of September 1864

)

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1856 ; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1893, and now apply for the allowance provided by law for the year ending February 15th, 1894.

Sworn to and subscribed before me, this 29th day of January 1894.
George Cornelius Ordinary.

her
Nancy X Williams
mark
Post-office Homerville Ga

Form 1.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Clinch

Personally Comes Mrs. Nancy Williams

who being sworn, says on oath, that she is a bona fide resident of said county of Clinch State of Georgia, and that she has *resided* in said State continuously ever since the year 1850 That she is the Widow of John Williams who was a Soldier in Company J of the 6th Regiment of Georgia Volunteers, that he enlisted in said Regiment on or about the month of May 1864 and served in the Army up to Sept 1864 That he lost his life on the 3rd day of September 1864 (*State here full particulars of the husband's death, when, where and from what cause.*) (

Said Soldier was regularly detailed from his command to look up deserters and absentees. and was killed while in such Service by a deserter on the 3rd day of September 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1856, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this 21st day of June 1895.
George Cornelius Ordinary.

her
Nancy X Williams
mark
Post-office Homerville ga

Wilson, Hellen
Oct 1914
Clinch

+ No.

Widow's Application

To Be Put on Roll in Her Own Right When Husband Was on the Indigent Roll or Put on Under Act of July 11, 1910.

County Clinch

Name Helen Wilson

Widow of John M. Wilson

Company H. 29th Ga Reg.

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

10/7/1913

Wilson Hellen
Oct 1914
Clinch Co

+ No.

Widow's Application

To Be Put on Roll in Her Own Right When Husband Was on the Indigent Roll or Put on Under Act of July 11, 1910.

County Clinch

Name Helen Wilson

Widow of John M. Wilson

Company Sd 29th Ga Reg.

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

10/7/1913

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,
Clinch County.

Personally before me comes Hellen Wilson of said County, who, after being duly sworn, on oath says, that she is the widow of John M. Wilson to whom in the County of Clinch State of Ga she was married on the 8th day of Aug 1867 and that she remained his wife, and resided with him to the date of his death in Sept 13 1912 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 Indigent Pension Roll of the State and paid a pension of $60.00 in Clinch County for 1912 per annum, on account of being a soldier in Company 29th Regiment Ga (Volunteers of State Militia.)

At the death of he he was in the use and possession of the following property None of the cash value of $ None

What property of any kind and of any value have you in your use, control and possession now, and the cash value, (State fully.)

— Acres land $

— Horses and Mules — $

15 head ~~Hogs~~ Cows, etc. $ 150.00

Total Cash value of all property $

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

Sworn to and subscribed before me, this the 4th day of Oct 1913 } Hellen her x mark Wilson

J. T. Dame Ordinary,
of Clinch County.

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

STATE OF GEORGIA,
Clinch County.

Personally before me come Harris Sirmans 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. Hellen Wilson who made the foregoing affidavit, is the lawful widow of John M. Wilson who died in Clinch County in said State of Georgia on 13 day of Sept 1912 and that she has not since remarried. That she became the wife of John M. Wilson on the 8th day of Aug 1867 and that she and he had resided together as man and wife continuously since 8th day of Aug 1867 and that the J. M. Wilson was the same man who was on the pension roll of said State Ga from Clinch County when he died.

Sworn to and subscribed before me, this the 4th day of Oct ~~Sept~~ 1913 } Harris Sirmans

J. T. Dame Ordinary,
of Clinch County.

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,
.....County.

Personally before me comes.....who after being sworn on oath says, that they are freeholders of said County, and that they know.....of said County and knew her said husband.....at his death on the.....day of.....191 ..... that she and he were in the use, possession and control of the following property at his death to wit:.....

.....

of the value of $.....That she is now in the use, possession and control of the following property to wit:.....

.....

of the value of $.....

Sworn to and subscribed before me, this the
.....day of.....191 .....

.....Ordinary,

of.....County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Elbert County.

I, J. I. Dame Ordinary of said County, do certify, that, I know Mrs. Nancy Wilson 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 1913

That I also know Harris Vernon witness as to marriage and I also know .....who I know to be a resident free holder of said County that all of the foregoing were duly sworn by me before signing the respective affidavits and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

That the tax Books of Elbert County shows that she returned property to the amount of—for 1908 $—for 1909 $—for 1910 $—

Sworn under my hand and official seal of office this 6th day of Oct 1913

(SEAL.) J. I. Dame Ordinary.

Elbert County.

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

No record of marriage records all destroyed by fire in 1868.

Wilson John M.
Co. H. for 1909
Appointed

No. Clinch County

INDIGENT PENSION.

1907

Name John M. Wilson

County Clinch

Co. H. 26th Regt.

Approved _____ 190__

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Franklin Printing and Publishing Co., Geo. W. Harrison, Mgr., Atlanta, Georgia.

10/21/07

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, John M. Wilson 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. Dame Ordinary at Homerville by mail

Witness my hand and seal, this 16 day of Nov 1907

John M. Wilson [L. S.]

Executed in presence of
J. T. Dame

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, John M Wilson 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. Dame ordinary at Homerville by mail

Witness my hand and seal, this 16 day of Nov 1907

John M Wilson [L. S.]

Executed in presence of
J. T. Dame

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,
Clinch COUNTY.

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

1. What is your name and where do you reside? (Give, State, County and Postoffice.) John M Wilson Georgia Clinch C Dupont
2. How long and since when have you been a resident of this State? All of my Life
3. When and where were you born? Scriven Co 1836
4. When and where and in what company and regiment did you enlist or serve? Capt Moseley Company Ft. 26 Ga Regiment Waldorth Lowndes Co
5. How long did you remain in such company and regiment? About Four year
6. When and where was your company and regiment surrendered and discharged? Appomatox Courthouse Virginia
7. Were you present with your company and regiment when it was surrendered? Yes
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? — — —
9. How much can you earn (gross) per annum by your own exertions or labor? Nothing
10. What has been your occupation since 1865? Farming Part of my time
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? Age & Poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? Six & Seven 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 1901, 1902, 1903, 1904 and 1905, 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? Clinch County no Property
16. How were you supported during the years 1901, 1902, 1903, 1904 and 1905? By carrier a Cheap Mail Route
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? Verry little
18. What was your employment during 1901, 1902, 1903, 1904 and 1905? What pay did you receive in each year? Carrying Mail Sustainer
19. Have you a family? If so, who composes such family? Give their means of support. Have they a homestead, or other property? Their ages and how employed? Wife of Seventy years old & one Little Grand Son live in Rented House
20. Are you receiving any pension? If so, what amount and for what disability? None
21. Have you ever made an application for pension before? I have
22. How many applications have you ever made and under what class? This is the Third one and of the same class

Sworn to and subscribed before me this the 19 day of July 1906

John M. Wilson
Applicant.

H H Guest Com 11/12 Ordinary.
of Clinch County, Ga
J. T. Dame
Ordinary C.C.

Every Question MUST Be Answered

John M. Wilson
Clinch Co. Ga
Apr 1909
No. Clinch County

INDIGENT PENSION.
1907

Name John M. Wilson
County Clinch
Co. H 26th Regt.
Approved 190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Printed by Printing and Publishing Co., Geo. W. Harrison Agt., Atlanta, Georgia.

10/21/6

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Clinch COUNTY.

William C. Joyce of said State and County, having been presented as a witness in support of the application of John M Wilson 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? William C Joyce Clinch County
2. Are you acquainted with John M Wilson, the applicant: if so how long have you known him? Yes ever since 1862
3. Where does he reside, and how long and since when has he been a resident of this State? Dupont Clinch Co State of Georgia
4. When, where and in what company and regiment did he enlist, and how do you know? In year 1861 Company H. 26 Regiment state Ga.
5. Were you a member of the same company and regiment? Was Member of Regiment
6. How long did he pefrorm regular military duty? About Four years
7. When and where was his command surrendered? Appomattox Court House Virginia
8. Were you present when it surrendered? was Not
9. Was applicant present? He was
10. If he was not present, where was he? —

When did he leave his command? At Surrender For what cause? Same

By what authority he left? Disbanded How do you know all of this? By being a Member of Same Regiment

11. What property, effects or income has the applicant? (Give your means of knowledge.) None By Living near him
12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904 and 1905, 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 not
14. What is the applicant's occupation and physical condition? Carrying Mail Being Seventy two year old and carrying mail Nine Miles with a Blind Pony Horse
15. Is the applicant unable to support himself by labor of any sort; if so, why? he is By old age
16. How was he supported during the years 1901, 1902, 1903, 1904 and 1905? I dont Know
17. What portion of his support for these four years was derived from his own labor or income? I Cannot Say
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code Age & Infirmity & Poverty
19. Who composes family? What property have they? Children's ages and their earning capacity? Him Self & Wife & Gound son none
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 July 1906

William C Joyce Witness.

~~H.H. Tyless Com n.p~~ Ordinary.
For Clinch Co Ga
J. T. Dame ordinary C.C.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Clinch COUNTY.

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

Old age Suffering Periodical attacks of Sciatica and Lumbago
J. A. Moor M.D.
T. E. Pennington M.D.

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

Sworn to and subscribed before me, this the 16 day of November 1907

J. T. Dame Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch COUNTY.

I, J. T. Dame Ordinary, in and for said County, hereby certify that the applicant John M. Wilson resides in said County, and has been a bona fide resident of this State since the _____ day of _____ 1890 and that the witnesses, viz.: J. A. Moor & T. E. Pennington and William C. Joyce 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 $60.00 Dollars of property, and in 1902 $68.00 Dollars of property; in 1903 $58.00 Dollars of property; in 1904 $47.00 Dollars of property; in 1905 $103.00 Dollars of property.

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

Witness my hand and seal of office, this 16 day of November 1907

J. T. Dame Ordinary.
of Clinch 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.

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

Oconee County.

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

1. What is your name and where do you reside? (Give County and Post-office) John M. Wilson Oconee County Ga. Post Office Watkinsville Ga R.F.D. No 3

2. How long and since when have you been a continuous resident citizen of this State? Since soldier 1865 I have lived in Oconee County Ga.

3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? Yes.

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) At Athens Ga. 1861. Co. H. 2nd Ga Reg.

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) 2 years 1861 Until Captured June 1865.

6. When and where was your Company and Regiment surrendered or discharged from the Service? I Was Captured I know I was in Tennessee Va. in 1865 I Cant Say Exactly Where I was

7. Were you actually present with your Command when it was surrendered or discharged? I was a prisoner

8. If you were not actually present, state specifically and clearly where you were. I was in Prison at Camp Chase Ohio

a. Where was your Command when you left it? I was Captured I know Tennessee Va. Near Watts Bar and I was Taken to Camp Chase O.

b. When did you leave the Command? When Captured

c. For what cause did you leave? Captured

d. By whose authority did you leave? Captured by the Yankees

e. For how long was your leave granted? In what way? Captured

f. Why did you not return to your Command after leave expired? I was a prisoner

g. In what way were you prevented? Prisoner of War

h. What effort did you make to return? None

i. Were you captured during the war? I was Taken to Camp Chase O. Ohio

j. If so, when, and where? In what prison were you held and when were you released? Jan 1865 Near Tennessee I was Held Camp Chase O. and was released in June 1865

9. What property of every discription was owned, in the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value.)

10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov., 1908. To whom and for what price?

11. What property of any discription of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemised list).

12. What annual or monthly income or earnings of yourself and wife and the source derived have you?

13. Are you drawing a pension of any amount from this State or the United States? None

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? No.

Sworn to and subscribed before me, this the 6 day of Jan 1911

John M. Wilson

John Parish Ordinary.

Oconee County.

John M. Wilson Co. H. 2nd Ga Reg.

Watkinsville Ga R.F.D. No 3

Jan 1911

Confederate Soldier's Application.

UNDER ACT 1910.

County Oconee

Name John M. Wilson

Company Co. H

Regiment 2nd Ga Reg.

Approved

J. W. LINDSEY, Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

Wilson, John M.
Clinch
Co. Inf.
Capture Sept 1864
Exch May 1865

Confederate Soldier's Application.

UNDER ACT 1910.

County Clinch

Name John M Wilson

Company Co. Inf.

Regiment 29th Ga Regt

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

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

1. What is your name and where do you reside? (Give County and Post-office) John M. Wilson Clinch County Ga. Post Office Homerville Ga R.F.D. No 3
2. How long and since when have you been a continuous resident citizen of this State? Since birth
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? Yes
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) At Thomasville in 1861 Co. "C" 29th Ga Inf.
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) Since 1861 Until Captured in 1864
6. When and where was your Company and Regiment surrendered or discharged from the Service? I was Captured near Knoxville Tenn in 1864 I was in Camp at Chattanooga Ohio from
7. Were you actually present with your Command when it was surrendered or discharged? I was a Prisoner
8. If you were not actually present, state specifically and clearly where you were. I was Captured near Knoxville Tenn and was in Camp at Chattanooga Ohio
9. Where was your Command when you left it? I was Captured near Knoxville Tenn. I was in Camp at Chattanooga Ohio
   a. When did you leave the Command? I was Captured
   b. For what cause did you leave? Captured
   c. By whose authority did you leave? Captured by the Enemy
   d. For how long was your leave granted? In what way? Captured.
   e. Why did you not return to your Command after leave expired? I was in Prison at Chattanooga Ohio
   f. In what way were you prevented? Was a Prisoner of War
   g. What effort did you make to return? None
   h. Were you captured during the war? Yes Near Knoxville Tenn
   i. If so, when, and where? In what prison were you held and when were you released? In 1864 Near Knoxville Tenn and was in Camp at Chattanooga Ohio and released in June 1865
10. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4 Nov. 1908? (Make list by items and value.) None
11. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov., 1908. To whom and for what price? None
12. What property of any discription of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemised list). None
13. What annual or monthly income or earnings of yourself and wife and the source derived have you? None
14. Are you drawing a pension of any amount from this State or the United States? None
15. Have you ever applied for the Georgia Pension and has it refused? and for what cause it was not allowed? Yes

Sworn to and subscribed before me, this the 6 day of January 1911

J. M. Brown Ordinary,
of Clinch County.

John M. Wilson
Mark

BAD COPY***OR**LIGHT PRINT

BAD COPY***OR**LIGHT PRINT

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,
Clinch County.

Colonel W. Corbett of said State and County is hereby presented as a witness in support of the application of John M. Wilson 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? Colonel W. Corbett Coffee County Ga. Douglas Post Office
2. How long and since when have you known John M. Wilson the applicant? I have known him all his life
3. Where does he now reside, and since when has he been a bonafide, continuing resident in this State and how do you know? Resides in Clinch Co. Ga. in state all his life
4. When, where and in what Company and Regiment did John M. Wilson enlist during war from 1861 to 1865? (Give date and place). Enlisted at Slaughter Ga. Co. H. 29th Ga 1861
5. How did you obtain your information of this Service? By being with him
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) during the entire war 1861 to 1865
7. When and where was his Command surrendered or discharged (give date and place) A part of his Command Captured 1865 and the other part scattered
8. Were you personally present at the Surrender? I was not was cut off from the army.
9. If not, where were you and how came you there? I was cut off and not able to get all my men together
10. Was the applicant personally present with his Command at surrender? he was Captured
11. If not where was he and how came him there? he was captured and taken by the Enemy to the Ohio prison
12. When did he leave his Command? Captured the first part of 1865 Where was his Command when he left it? Captured near Franklin Tenn. for what cause did he leave? Captured by the Enemy By whose authority did he leave Captured and how long was he granted leave? — How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) I was Lutenant of Same Co. and Regiment.
13. In what way was he prevented from returning to his Command? By being in prison How do you know? Because I was Lutenant and know this to be true.
14. What effort did he make to return to his Command and how do you know? he was being held by the enemy.
15. Was applicant captured as a prisoner yes If so, when and where? 1865 near Franklin Tenn. or near it In what prison was he held? there at Camp Chase Ohio and when released? I think in June 1865.

Sworn to and subscribed before me, this the 6th day of August 1910 } Colonel W. Corbett

J. T. Dame Ordinary.
of Clinch County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.
County.

Personally before me comes ..... who on oath says that they are free holders residing in said County and we know ..... 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.) .....

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov. 1908? (State it fully by items.) .....
2. When and to whom was it sold or given to? .....
3. What was the price paid or stated to be paid? .....
4. What relation is the party to applicant? .....
5. What disposition was made of the proceeds of the sale? .....
6. Was the disposition of this property made in good faith and full value? or was it made to obtain a pension? .....

Sworn to and subscribed before me, this the ..... day of ..... 191..

..... Ordinary.
of ..... County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch County.

I, J. T. Dame Ordinary of said County, certify that I know the applicant J. M. Wilson for Pension is the person he represents himself to be and resides in said County. That I also know Colonel W. Corbett the witness swearing to the service and ..... who are free holders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Results of Clinch County shows that J. M. Wilson and wife value for tax is in 1908 $ none for 1909 $ none for 1910 $ none

Sworn under my hand and official seal of office this 6th day of August 1910.

J. T. Dame Ordinary.
of Clinch County.

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words "You do solemnly swear that you will true answers make to each question asked you and the evidence you shall give shall be the whole truth; so help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary and certified by him.
4. If applicant has no property at all in his possession, use or control of self and wife, affidavits of Free holders unnecessary.

Paulding/96
Adams, D. R.
Cobb County
ACT OF 15 DEC., 1894.
(For Those Already Enrolled.)

No. 973

INDIGENT

Soldier's Pension.

1897.

Name D. R. Adams
County Cobb

1/16 1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
J. M. Stone

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, D. R. Adams hereby authorize J. M. Stone of Marietta Ga. to receive and receipt for the pension paid hereon and request that he remit same to me by him at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 9th day of Jany. 1897.

D. R. his x mark Adams [L. S.]

Executed in presence of
L. M. Fleming

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, D R Adams hereby authorize J M Stone of Marietta Ga

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

at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 9th day of Jany. 1897.

D R his X Adams mrk [L. S.]

Executed in presence of
G M Fleming

Pending 96

(For Those Already Enrolled.) ACT OF 15 DEC., 1894.

No. 9713

INDIGENT
Soldier's Pension.

1897.

Name D R Adams
County Cobb

1/4

1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
Mr Stone

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

No date

POWER OF ATTORNEY.

State of Georgia,
Cobb County.

I, D R Adams hereby authorize J M Stone of Cobb Co Ga

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

at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 11th day of Jany 1898.

D R his X Adams mrk [L. S.]

Executed in presence of
G M Fleming

Pending 96

(For Those Already Enrolled.) ACT OF 15 DEC., 1894.

No. 11157

INDIGENT
SOLDIER'S PENSION,
1898.

Name D R Adams
County Cobb

WARRANT ISSUED
Feb 1

1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
Mr Stone

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

No date

Enlisted in Co. O. Phillips Legion Trans. to

Applicant resided in Paulding County in 1896

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears D. R. Adams of Cobb 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 1833; 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) during the war between the States, and served for the term of 3 Years in Company A, of 40th Regiment of Ga. Vols.; that his physical condition is as follows: I am so infirm, broken down and diseased that I am unable to work very little.

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 1897. I have heretofore as a resident of Paulding county been allowed a pension for the year 1896

Sworn to and subscribed before me, this, the 9th day of Jany. 1897.

D. R. his x mark Adams

J. M. Stone Ordinary. Moons P. O. Cobb Co.

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 9th day of Jany 1897.

Affix your seal here.

J. M. Stone

Ordinary Cobb County.

NOTE—The blanks spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears D. R. Adams of Cobb 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 October 1833; 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 3 Yrs in Company O, of Phillips Ga. Legion Trans to Co. A 40th Regt. Ga. Vols.; that his physical condition is as follows: one of disease and infirmity he is unable to support himself at any kind of labor

that his property consists of the following items

Nothing

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 Cobb county been allowed a pension for the year 1897

Sworn to and subscribed before me, this, the 11th day of Jany 1898.

D. R. his x mark Adams

J. M. Stone Ordinary. Bonner Springs P.O.

State of Georgia,
Cobb County.

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

Given under my official signature and seal, this 11th day of Jany 1898.

Affix your seal here.

J. M. Stone

Ordinary Cobb County.

NOTE.—The blank spaces must be filled.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, D. R. Adams hereby authorize J. M. Stone of Marietta to receive and receipt for the pension allowed, and request that he remit same to me by him

Witness my hand and seal this 10 day of Jany 1899.

Executed in presence of D. R. his x mark Adams (L. S.)

Adams, D. R.
Cobb Co.
CODE SEC. 1254.
(For These Already Enrolled.)

No. 1132

INDIGENT
SOLDIER'S PENSION,
1899.

Name D. R. Adams
County Cobb

WARRANT ISSUED
1/14 1899

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
J. M. Stone by T. J. Hamby
Geo. W. Harrison, State Printer, Atlanta.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, D. R. Adams hereby authorize J. M. Stone of Marietta Ga to receive and receipt for the pension allowed, and request that he remit same to me by him

Witness my hand and seal, this day of 1900.

D. R. his x mark Adams [L. S.]

Executed in presence of
T. J. Hamby

Reg. to Adams, D. R.
Marietta Ga.
Cobb Co.
CODE SEC. 1254.
(For These Already Enrolled.)

NO. 787

INDIGENT
SOLDIER'S PENSION,
1900.

Name D. R. Adams
County Cobb

WARRANT ISSUED
January 11 1900.

JOHN. W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
J. M. Stone
Geo. W. Harrison, State Printer, Atlanta.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears D R Adams of Cobb 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 14 day of October 1833; 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 3 yrs in Company D, of Phillips Legion Ga. Vols Trans to Co A 40th Regt Ga Vols, that his physical condition is as follows: On account of age infirmity and poverty he is unable to make support

that his property consists of the following items

Nothing

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 1899. I have heretofore as a resident of Cobb county been allowed a pension for the year 189 8

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

his
D R x Adams
mark

J M Stone Ordinary. Upshaw P. O.

State of Georgia,
Cobb County.

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

Given under my official signature and seal, this 10 day of Jany. 1899.

Affix your seal here.

J M Stone
Ordinary Cobb County.

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

Notify

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears D. R. Adams of Cobb 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 14th day of October 1833; that he is 66 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 3 years in Company D, of Phillips Legion Ga. Vols. Trans to Co A 40th Regt Ga Vols that his physical condition is as follows: On account of infirmity age and poverty he is unable to support himself

that his property consists of the following items

Nothing

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1900. I have heretofore as a resident of Cobb county been allowed a pension for the year 1899

Sworn to and subscribed before me, this, the 15th day of January 1900.

his
D. R. x Adams
mark

J M Stone Ordinary.

State of Georgia,
Cobb County.

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

Given under my official signature and seal, this 15th day of January. 1900.

Affix your seal here.

J M Stone
Ordinary Cobb County.

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

Ordinary Cobb County.

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

Notify

Ordinary County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, D R Adams hereby authorize John Autry of Marietta to receive and receipt for the pension allowed and request that he remit same to at Marietta by hand

Witness my hand and seal, this 14th day of January 1901.

D. R. Adams [L. S.]

Executed in presence of
Jas M Tann

Adams, D.R.
Cobb Co.

CODE SECTION 1891
(For Those Already Enrolled.)

No. 194

INDIGENT
SOLDIER'S PENSION.
1901.

Name D R Adams
County Cobb

WARRANT ISSUED
Jany 15 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Autry

Geo. W. Harrison, State Printer, Atlanta.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, D R Adams hereby authorize John Autry of Marietta to receive and receipt for the pension allowed and request that he remit same to at Marietta by hand

Witness my hand and seal, this 14th day of January 1901.

D. R. Adams [L. S.]

Executed in presence of
Jas M Tann

Adams, D. A.
Cobb Co.

CODE SECTION 1901.
(For Those Already Enrolled.)

No. 194

INDIGENT
SOLDIER'S PENSION.
1901.

Name D R Adams
County Cobb

WARRANT ISSUED
Jany 15 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Autry

Geo. W. Harrison, State Printer, Atlanta.

No data

For Applicants Heretofore Allowed Pensions.

Trans to Co A 46th Regt Ga Vols

STATE OF GEORGIA,
Cobb County.

Personally appears D R Adams of Cobb 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 14th day of October 1833; 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) during the war between the States, and served for the term of 3 Years in Company O, of Phillips Regiment of Legion Ga Vols; that his physical condition is as follows: On accounts of age Infirmity poverty &c he is unable to make support for himself

that his property consists of the following items

Nothing

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 Cobb county been allowed a pension for the year 1900 D. R. Adams

Sworn to and subscribed before me, this the 14 day of January 1901.

John Awtry Ordinary.

STATE OF GEORGIA,
Cobb County.

I, John Awtry Ordinary of said County, do certify that I am well acqainted with D R Adams the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

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

Affix your seal here

John Awtry
Ordinary Cobb County.

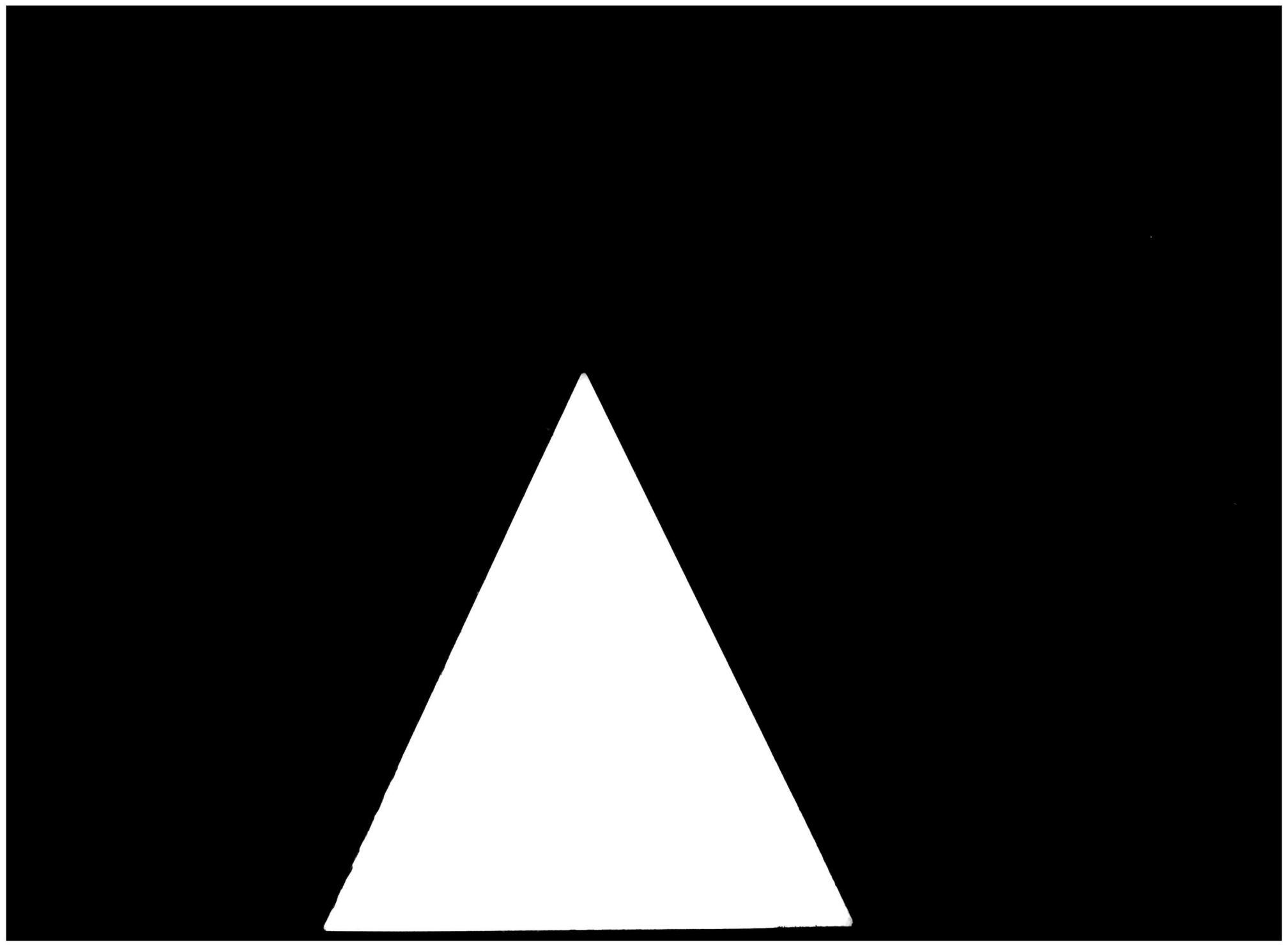
NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1901.

OFFICE OF
E. W. Y. ALLGOOD,
Ordinary of Paulding County.

Dallas, Ga., Dec 5 189 6

I Ewy Allgood Ordinary in and for said County of Paulding hereby certify that D. R. Adams. draw a pension under act 1890 as an indigent Confederate Soldier
Given under my hand and seal of office
Ewy Allgood
Ordinary

Ordinary
Jno M Stone
Dear Sir
This old pensioner and his papers are O.K.
Dallas Ga W L Conway M.D.
Dec 5th 1896



Pension Office, Sept. 13, 1917.
Must amend and state: "Was batallion cavalry or infantry; was it of Confederate Army or State troops or militia? Where did your command do duty and what kind of duty and what class of men composed the command? Give names in full of officers, and prove statements to be true.

J. W. Lindsey,
Commissioner of Pensions.

OK for 1918

No. .....

Confederate Soldier's Application.

W. UNDER ACT 1910.

County Colch

Name R. A. Adams

Company B

Regiment Dyals Battalion Intry

Approved .....

J. W. LINDSEY,
Commissioner of Pensions.

CHAS. P. BYRD, State Printer, Atlanta.

1-19-17
3/8-1918

Pension Office, Sept. 13, 1917.
Must amend and state: "Was batallion cavalry or infantry; was it of ConfedeSate Army or State troops or militia? Where did your command do duty and what kind of duty and what class of men composed the command? Give names in full of officers, and prove statements to be true.

J. W. Lindsey,
Commissioner of Pensions.

Confederate
Soldier's Application
No.
UNDER ACT 1910.
County Cobb
Name R. A. Adams
Company 43
Regiment Lyon's Battalion Cav
Approved
J. W. LINDSEY,
Commissioner of Pensions.
CHAS. P. BYRD, State Printer, Atlanta.

Sept 1864
Co B
Lyon's Battalion Cav
1-19-17

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,
Cobb County.
R A Adams of said State and County, hereby applies for the pension provided by Act of 1910, to Confederate Soldiers, and submits his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to wit:

1. What is your name and where do you reside? (Give County and Post-office) Russell Cobb County
2. How long and since when have you been a continuous resident citizen of this State? All my life 70 years
3. Did you enlist in the Army of the Confederate States or of the Organised Militia of this State from 1861 to 1865? Yes
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) Sept 1864 Co B Lyons Battalion Cav
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) Until April 1865. 7 months, on April 1865
6. When and where was your Company and Regiment surrendered or discharged from the Service? April 1865 - Athens Ga.
7. Were you actually present with your Command when it was surrendered or discharged? Yes
8. If you were not actually present, state specifically and clearly where you were I was present
   a. Where was your Command when you left it? Athens Ga.
   b. When did you leave the Command? April 1865
   c. For what cause did you leave? Was over
   d. By whose authority did you leave? —
   e. For how long was your leave granted? In what way? —
   f. Why did you not return to your Command after leave expired? —
   g. In what way were you prevented? —
   h. What effort did you make to return? —
   i. Were you captured during the war? —
   j. If so, when, and where? In what prison were you held and when were you released?
9. What property of every description was owned, in the use, possession and control of yourself and its cash value on the 4 Nov. 1908? (Make list by items and value.) Nothing
10. What property of any kind have you disposed of and for what purpose since 4 Nov. 1908. To whom and for what price? Nothing
11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and its cash value? (Make itemised list). Nothing
12. What annual or monthly income or earnings of yourself and the source derived have you? None
13. Are you drawing a pension of any amount from this State or the United States?
14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? No

Sworn to and subscribed before me, this the 6 day of Jan 1916 — R A Adams

J M Gann Ordinary
of Cobb County.

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,
Gwinnett, County.

J. N. Tullis, of said State and County is hereby presented as a witness in support of the application of R. A. Adams, 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.N.Tullis, Gwinnett County, Ga Post office Lawrenceville, Route # 5

2. How long and since when have you known R.A.Adams, the applicant? Since 1862

3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? Cobb County, and has resided in this state to my knowledge since 1862

4. When, where and in what Company and Regiment did R.A.Adams enlist during war from 1861 to 1865? (Give date and place). Sept. 1864 at Old feild church Gwinnet County, with company "B" Dyers Batt.

5. How did you obtain your information of this Service? Was member of same company and was with him.

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) From Sept.1864 until surender Apr.1865

7. When and where was his Command surrendered or discharged (give date and place) April 1865 at Athens 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? Surender Apr.1865 Where was his Command when he left it? Surrender Athens for what cause did he leave? Surender. By whose authority did he leave and how long was he granted leave? How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically)

13. In what way was he prevented from returning to his Command? How do you know?

14. What effort did he make to return to his Command and how do you know?

15. Was applicant captured as a prisoner No If so, when and where? In what prison was he held? and when released

Sworn to and subscribed before me, this the 9th day of Nov. 1916

J. N. Tullis

G. G. Robinson, Ordinary,

of Gwinnett County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.
County.

Personally before me comes who on oath says that they are freeholders residing in said County and we know the applicant for pension and we know the property that is now in the use, possession and control of himself and of its cash value to wit: (Make List by items and value.)

1. What property, if any, has been sold or given away by the applicant since Nov. 4, 1908? (State it fully by items.)

2. When and to whom was it sold or given to?
3. What was the price paid or stated to be paid?
4. What relation is the party to applicant?
5. What disposition was made of the proceeds of the sale?
6. Was the disposition of this property made in good faith and full values? or was it made to obtain a pension?

Sworn to and subscribed before me, this the day of 191

Ordinary,

of County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb County.

I, J. M. Garner Ordinary of said County, certify that I know the applicant for Pension is the person he represents himself to be and resides in said County. That I also know the witness swearing to the service and 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 shows that value for tax is in 1908 $60.00 for 1909 $ for 1910 $ for 1911 $ for 1912 $ for 1913 $85.00 for 1914 $95.00 for 1915 $25.00

Sworn under my hand and official seal of office this 11 day of Nov. 1916

J. M. Garner, Ordinary,

of Cobb County.

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words "You do solemnly swear that you will true answers make to each question asked you and the evidence you shall give shall be the whole truth, so help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary and certified by him.
4. If applicant has no property at all in his possession, use or control of self affidavits of freeholders unnecessary.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County.

Personally appears J P Mainor 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 Jan 1902 ~~18~~; 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 G, of 29 th Regiment of Georgia Cavalry; that his physical condition is as follows: he has Rheumatism

that his property consists of the following items: no [illegible]

of the value of [illegible] 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 1 J. P. Mainor

Sworn to and subscribed before me, this the 5 day of Jan 1904.
W T Howell Ordinary.

STATE OF GEORGIA,
Clinch County.

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

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

W T Howell
Ordinary Clinch County.

Affix your Seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County.

Personally appears John P Mainor 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 Jan 1901; that he is 69 years old and by occupation a Farming, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 3½ in Company G, of 29 th Regiment of Georgia Vols; that his physical condition is as follows: Age and poverty

that his property consists of the following items:

Nothing

of the value of [illegible] Dollars. I am now earning, by my labor, [illegible] 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. J. P. Mainor
J. T. Dame Ordinary.

STATE OF GEORGIA,
Clinch County.

I, J. T. Dame Ordinary of said County, do certify that I am well acquainted with John P. Mainor 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.

J. T. Dame
Ordinary Clinch County.

Affix your Seal here

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

State of Ga
County of Clinch

Pearsonally appears before me E S Meeks S L Mainor and Mary J. Fender Who on oath say they were personally acquainted with J P Mainor at the close of the Confederate War and the reason he did not return to the war when his furlow was out he was sick and was under the Dr for Nearly a year after the war closed and he is Now Not able to do any work on account of his afflictions subscribed and sworn to before me This 22 of July 1903

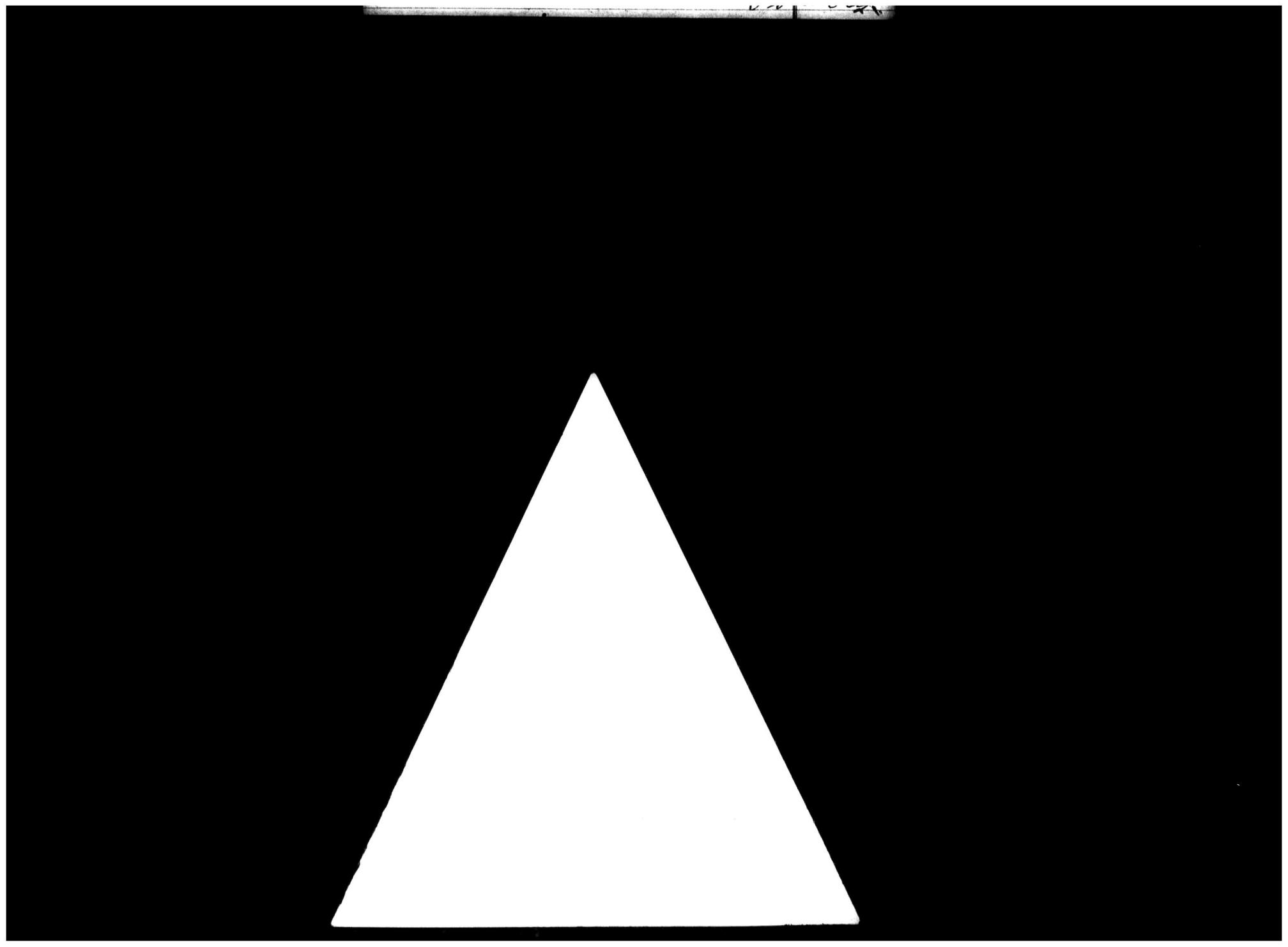
C J Mainor
Notra Public
Clinch co Ga

S. L. Mainor
E S Meeks
Mary J Fender
M L Corbitt

Homeville, Ga, Aug. 10-1903-

I hereby certify that the above party is bodie although unable to make a living. The foregoing witnesses are entitled to Credit and C. J. Mainor is a Notary Public for Clinch County.

W. T. Howell,
Ordinary.



Mathis Ezekiel

No. Clinch G

1899

INDIGENT PENSION

1899.

Name Ezekiel Mathis

County Clinch

Sgt Co F 4th Regt.

Approved (Clinch's) 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

6 1952

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

1/4 7900

POWER OF ATTORNEY.

STATE OF GEORGIA,
_____ COUNTY.

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

Witness my hand and seal this _____ day of _____ 1899.

Executed in presence of _____ (L. S.)

POWER OF ATTORNEY.

STATE OF GEORGIA,
COUNTY.

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

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

Executed in presence of ..... (L. S.)

Mathias Ezekiel
No. Clinch
1899

INDIGENT PENSION

1899.

Name Ezekiel Mathis
County Clinch
Sgt Co. G. 4th Ryt. Ga. Cavalry (Clinch's)
Approved ..... 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
E. C. Lyon
1/4 7900

Questions for Applicant.

STATE OF GEORGIA,
Clinch County,
Ezekiel Mathis of said State and County, desiring to avail himself of the Pension Act (Section 1254, Code), hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (give State, County and post office.) Ezekiel Mathis in Clinch County Ga. Dupont Ga.
2. How long and since when have you been a resident of this State? 1st 55 years, 2nd 55 years or since 1844
3. When and where were you born? [redacted] 1st 18th 1844 2nd in Clinch Co. Ga.
4. When and where and in what company and regiment did you enlist or serve? Enlisted on Nov 20th 1862 in company G 29th regiment of Ga. Vol. Co. G. 4th Ryt. Ga. Cavalry (Clinch's)
5. How long did you remain in such company and regiment? three years
6. For how long a period did you discharge regular military duty? three years
7. When, where and under what circumstances were you discharged from service? 1st April 7th 1865, I was set at liberty at surrender of General R. E. Lee at appamattox C. H. Va.
8. What is your present occupation? Trying to farm but not able
9. How much can you earn (gross) per annum by your own exertions or labor? Almost nothing
10. What has been your occupation since 1865? Trying to farm
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"? 2nd 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? 2nd Brown gitters of the lungs or disease of lungs and infirmity Ever since the war between States
13. What property, effects or income do you possess, and its gross value? none at all
14. What property, effects or income did you possess in 1894, 1895, 1896, 1897 and 1898, and what disposition, if any, did you make of same? In 1895 one horse worth about $15.00 and died in spring. And the following years no property at all
15. In what County did you reside during those years, and what property did you then return for taxation? I have lived in Clinch County Ga. all these years
16. How were you supported during the years 1897 and 1898? by my friends and relatives & not by my labor
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? I suppose 50 or 60 dollars, very little can not say
18. What was your employment during 1897 and 1898? What pay did you receive in each year? trying to farm. did not work for hire, was not able.
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? 1st yes. wife & 6 children, 4 of them are free & no help to me. Got 2 children with me, one is 7 years old, and one about 9 years old and deformed
20. Are you receiving any pension? If so, what amount, and for what disability? Receiving none or no pension at all

Sworn to and subscribed before me this the 11th day of November 1899.

Ezekiel Mathis
Applicant.

George Cornelius Ordinary,
of Clinch County.

Every Question MUST be Answered.

I, _____, hereby authorize

_____ of _____

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

_____ at _____ by _____

Witness my hand and seal this _____ day of _____ 1899.

Executed in presence of

_____ (L. S.)

_____

Every Question MUST be Answered.

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.) Eyethel Mathis mother in Clinch county ga. Dupont ga

2. How long and since when have you been a resident of this State? 55 years, and 55 years a Since 1844

3. When and where were you born? [redacted] 18th 1844 and in clinch Co ga

4. When and where and in what company and regiment did you enlist or serve? Enlisted, or near 1862. in company G 29th regiment ga Vol U.S.A. Rifle Co. Cavalry (Clinch's)

5. How long did you remain in such company and regiment? three years

6. For how long a period did you discharge regular military duty? three years

7. When, where and under what circumstances were you discharged from service? 1st April 7th 1865 I was left at liberty at Surrender of General R. E. Lee at appomattox C.H. Va

8. What is your present occupation? Trying to farm but not able

9. How much can you earn (gross) per annum by your own exertions or labor? almost nothing

10. What has been your occupation since 1865? Trying to farm

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"? 2nd 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? 2nd Bronchitis of the lungs or disease of Lungs and Infirmity Ever since I was taken sick

13. What property, effects or income do you possess, and its gross value? none at all

14. What property, effects or income did you possess in 1894, 1895, 1896, 1897 and 1898, and what disposition, if any, did you make of same? In 1895 my home was burnt and died in Spring. And the following years no property at all

15. In what County did you reside during those years, and what property did you then return for taxation? I have lived in Clinch county ga all these years

16. How were you supported during the years 1897 and 1898? by my friends and relatives not by my labor

17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? I suppose 50 or 60 dollars Very little cash per day

18. What was your employment during 1897 and 1898? What pay did you receive in each year? trying to farm. did not work for hire, was not able.

19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? Yes wife & 6 children 4 of them are free & no help to me. Got 2 children with me, the 17 years old, and one about 9 years old and deponent

20. Are you receiving any pension? If so, what amount, and for what disability? Receiving none no pension at all

Sworn to and subscribed before me this the 11th day of November 1899.

George Lowndes Ordinary,

of Clinch County.

Eyethel Mathis
Applicant.

Mathis Ezekiel
Co. No. Quitman Ga
Co. Clerk
Expires

INDIGENT PENSION

1899.

Name Eyethel Mathis

County Clinch

Approved [illegible]

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

1/14 1900

BAD COPY OR LIGHT PRINT

BAD COPY FROM LIGHT PRINT

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Telinch COUNTY.

I John W Powell, of said State and County, having been presented as a witness in support of the application of Ezekiel Mathis 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? John W Powell in Clinch County Georgia
2. Are you acquainted with Ezekiel Mathis, the applicant; if so how long have you known him? 35 years
3. Where does he reside, and how long and since when has he been a resident of this State? Clinch Co, resident 35 years
4. When, where, and in what company and regiment did he enlist, and how do you know? Enlisted in C.S.A. 2 Ga Regiment
5. Were you a member of the same company and regiment? I was
6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? Served 3 years Surrendered with Lee at Appomattox C.H. Court House I know he was a good Soldier John W Powell
7. What property, effects or income has the applicant? (Give your means of knowledge.)
8. What property, effects or income did the applicant possess in 1896, 1897 and 1898, and what disposition, if any, did he make of same? None
9. Has he conveyed away any of his property in the last three years, if so, what was it, and to whom? No
10. What is the applicant's occupation and physical condition? Trying to farm some
11. Is the applicant unable to support himself by labor of any sort, if so, why? Owing on account of his physical disability.
12. How was he supported during the years 1897 and 1898? by Relatives and friends
13. What portion of his support for these two years was derived from his own labor or income? I would say very Little if any
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? Bad Health
15. What interest have you in the recovery of a pension by this applicant? None

Sworn to and subscribed before me, this the 15th day of November 1899.
George Lomnicie Ordinary.

W. H. Miley Witness.
M M Wells

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
COUNTY.

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

said Examination find he has chronic Bronchitis caused By Pneumonia contracted in the war he never has frequent attacts Resembling asthama causing hard Breathing Renders him infirme & unable to performe hard Labor & what he Does Do Does it under ill comminded

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 16th day of November 1899.
George Lomnicie Ordinary.

W. J. Stapleton M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch COUNTY.

I, George Lomnicie, Ordinary in and for said County, hereby certify that the applicant Ezekiel Mathis resides in said County and has been a bona fide resident of this State since the [illegible] day of January 1862 and that the witnesses, viz: John [illegible] and W. H. Miley 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 1897 0.0 Dollars of property, and in 1898 000 Dollars of property.

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

Witness my hand and seal of office, this 17th day of Nov 1899.
George Lomnicie Ordinary.
of Clinch County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, E. Mathis hereby authorize Wm. A. Wright of Fulton Co. Ga.
to receive and receipt for the pension allowed and request that he remit same to
W. L. Howell Attorney at Homerville Ga.
by mail

Witness my hand and seal, this 8 day of March 1901.
E. Mathis [L. S.]

Executed in presence of
W. L. Howell

Mathis, Ezekiel
Clinch Co.

CODE SECTION 1254.
(For Those Already Enrolled.)
No. 4492

INDIGENT
SOLDIER'S PENSION.
1901.

Name Ezekiel Mathis
County Clinch Co

WARRANT ISSUED
3 20 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Wm Hall

Geo. W. Harrison, State Printer, Atlanta.

Mathis
Clinch County
No date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, Ezekiel Mathis hereby authorize Wm. A. Wright of Fulton Co. Ga.
to receive and receipt for the pension allowed and request that he remit same to
W. L. Howell at Homerville Ga.
by mail

Witness my hand and seal, this 1 day of June 1902.
Ezekiel Mathis [L. S.]

Executed in presence of
W. L. Howell
Witness

Mathis, Ezekiel
Clinch County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)
No. 5131

INDIGENT
SOLDIER'S PENSION
1902.

Name Ezekiel Mathis
County Clinch
Co. A Regiment 29.

WARRANT ISSUED
May 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
[illegible]

Geo. W. Harrison, State Printer, Atlanta.

No date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears E. Matthis 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 13 day of August 1845; that he is 55 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 G, of 29 th Regiment of Georgia Volunteers; that his physical condition is as follows: Has Bronchitis of Lungs infirm and unable to work

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 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 8 day of March 1901.

E. Matthis

W. T. Howell Ordinary.

STATE OF GEORGIA,
Clinch County.

I, W. T. Howell Ordinary of said County, do certify that I am well acqainted with E. Matthis 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 March 1901.

W. T. Howell

Ordinary Clinch County.

Affix your seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County.

Personally appears Ezekiel Matthis of Clinch County, State of Geoogia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 13 day of Aug 1844 that he is 57 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 G, of 29th Regiment of Georgia Volunteers; that his physical condition is as follows: Has bronchitis of the lungs—is unable to work and earn a living

that his property consists of the following items

Has 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 Clinch county been allowed a pension for the year 1901—

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

Wm. T. Howell Ordinary. Ezekiel Matthis

STATE OF GEORGIA,
Clinch County.

I, Wm. T. Howell Ordinary of said County, do certify that I am well acquainted with Ezekiel Matthis 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 1 day of Jan. 1902.

Wm. T. Howell

Ordinary Clinch County.

Affix your seal here

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, E. Mathis hereby authorize W. A. Wright of Fulton, Co., Ga.

to receive and receipt for the pension allowed and request that he remit same to W. T. Howell at Homerville Ga

by Mail

Witness my hand and seal, this 1 day of January 1903.

E. Mathis [L. S.]

Executed in presence of

W. T. Howell.
Ordinary

Mathis, Ezekiel
Clinch Co.
CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 5655

INDIGENT
SOLDIER'S PENSION
1903.

Name Jethro Mathis
County Clinch
Co. 29 Regiment Ga

WARRANT ISSUED
2/24 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
W

Geo. W. Harrison, State Printer, Atlanta.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, Ezekiel Mathis hereby authorize Wm. A. Wright Copr General

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 ..... day of ..... 1904.

Ezekiel Mathis [L. S.]

Executed in the presence of

W. T. Howell Ga.

Mathis Ezekiel
Clinch Co.
CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 5758
5763

INDIGENT
SOLDIER'S PENSION
1904.

Name Ezekiel Mathis
County Clinch
Co. Regiment

WARRANT ISSUED
FEB 24 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Ordy

Geo. W. Harrison, State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County.

Personally appears E. Mathis 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 13 day of August 1844; that he is 58 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 G, of 29th Regiment of Georgia Volunteers ; that his physical condition is as follows : Disabled with Catarrh Deafness and too old and Poor to make a Crop

that his property consists of the following items: None

of the value of None 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

E. Mathis

Sworn to and subscribed before me, this the 1 day of January 1903.
W. J. Howell Ordinary.

STATE OF GEORGIA,
Clinch County.

I, W. J. Howell Ordinary of said County, do certify that I am well acquainted with E. Mathis 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 1 day of January 1903.
W. J. Howell
Ordinary Clinch County.

Affix your Seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County.

Personally appears Ezekiel Mathis 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 13 day of August 1844; that he is 60 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 2 yrs 6 months in Company G, of 29 th Regiment of Georgia Volutiers ; that his physical condition is as follows : Bronchitis of the Lungs

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 1904. I have heretofore as a resident of Clinch County been allowed a pension for the year 1901-2-3

Sworn to and subscribed before me, this the 4 day of January 1904.
W. J. Howell Ordinary.

Ezekiel Mathis

STATE OF GEORGIA,
Clinch County.

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

Given under my official signature and seal, this 4 day of Jan 1904.
W. J. Howell
Ordinary Clinch County.

Affix your Seal here

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, E. Mathis hereby authorize W. A. Wright of Fulton County to receive and receipt for the pension allowed, and request that he remit same to [illegible] at Dupont by Check or Draft

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

E. Mathis [L. S.]

Executed in the presence of
R. L. Dickerson

Mathis, Ezekiel
Clinch County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. [illegible]

INDIGENT
SOLDIER'S PENSION
1905.

Name E. Mathis
County Clinch
Co. Regiment

WARRANT ISSUED
MAR 1 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
[illegible]

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

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, Ezekiel Mathis hereby authorize W. A. Wright of Fulton Co Ga to receive and receipt for the pension allowed, and request that he remit same to Ordinary at Hamersville Ga by Mail

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

Ezekiel Mathis [L. S.]

Executed in the presence of
[illegible]

Mathis, Ezekiel
Clinch County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 1833

INDIGENT
SOLDIER'S PENSION
1906.

Name Ezekiel Mathis
County Clinch
Co. Regiment 20th Ga

WARRANT ISSUED
JAN 26 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
W. A. W.

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

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County.

Personally appears E. Mottlis 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 13 day of Aug 1844; that he is 60 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 G, of 29 th Regiment of Georgia Volunteers; 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 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 2 day of Jan 1905. E Mathis

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 E. Mottlis 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.

W. L. Howell

Affix your Seal here

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 Ezekiel Mathis 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 13th day of Aug 1844; that he is 61 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 6 month in Company G, of 29 th Regiment of Ga Val; that his physical condition is as follows: Infirm 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 2nd day of Jan 1906. Ezekiel Mathis

J. T. Dame Ordinary.

State of Georgia,
Clinch County.

I, J. T. Dame Ordinary of said County, do certify that I am well acquainted with Ezekiel Mathis 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

Affix your seal here

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, E. Mathis, hereby authorize W. A. Wright of Atlanta Ga to receive and receipt for the pension allowed, and request that he remit same to S. T. Dame at Homerville Ga by Mail

WITNESS my hand and seal, this 15th day of June 1907.

E. Mathis [L. S.]

Executed in presence of
S. T. Dame

Mathis Ezekiel
Clinch Co.,

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED)

No. 4661

INDIGENT
SOLDIER'S PENSION
1907.

Name E. Mathis
County Clinch
Co. G Regiment 22nd Ga

WARRANT ISSUED
1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
Clinch County.

Personally appears E. Mathis 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 13 day of August 1844; 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 6 mo in Company G, of 29 th Regiment of Georgia Va; that his physical condition is as follows: Age & Poverty

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 12th day of Jan 1907. E Mathis

J. T. Dame Ordinary.

State of Georgia,
Clinch County.

I, J. T. Dame Ordinary of said County, do certify that I am well acquainted with E Mathis 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.

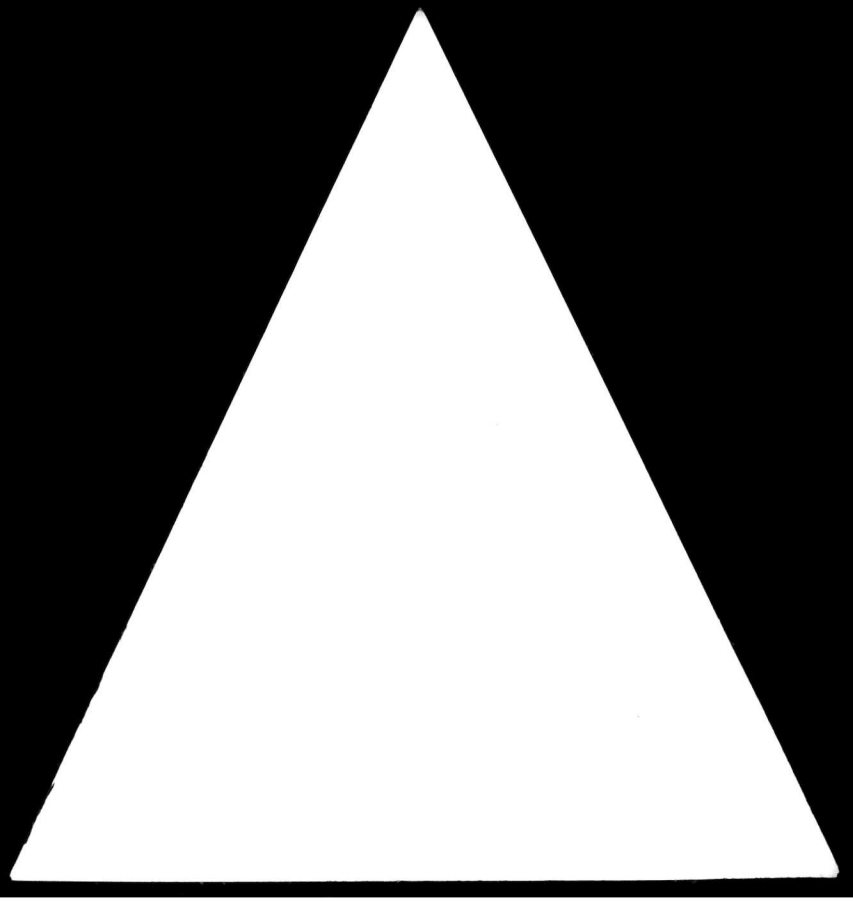
Given under my official signature and seal this 12th day of Jan 1907.

J. T. Dame
Ordinary Clinch County.

Affix your seal here

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

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



POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA,

Clinch County.

Know all Men by these Presents, That I, Martha Matthis of Clinch County County, in said State, do hereby appoint William A Wright Com Gen of Atlanta Ga my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 17th day of April 1891

Martha her x mark Matthis [L. S.]

Executed in the presence of us:

Willie Cornelius
George Cornelius Jr

DIRECTIONS.

If allowed, send amount by Express to me at Homerville Ga, and oblige,

in care of F. B. Simmons

Martha her x mark Matthis

Returned for fuller proof
W.H.R.
Feb

Martha Matthis
Clinch County
1891.
No. 1770

Widows' Pension

—PAID TO—

Mrs Martha Matthis

—OF—

Clinch County.

$200.00.

Warrant Issued

1891

AND HANDED TO

Geo. W. Harrison, State Printer Atlanta.

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA,)
Clinch County.)

Know all Men by these Presents, That I, Martha Matthis of Clinch County, in said State, do hereby appoint William L Wright Com Gen of Atlanta Ga my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 10th day of April 1891.

Martha X Matthis [L. S.]
mark

Executed in the presence of us:

Pierce Chamblee
Nettie Chamblee

DIRECTIONS.

If allowed, send amount by Express to me at Homerville Ga, and oblige,

Yours for
Mrs Martha Matthis
mark

In care of J. B. Simms.

Attorney for
Julia Brooks
Wright
Ark

Martha Matthis
Clinch County
1891.

No. 1770

Widows' Pension
PAID TO
Mrs Martha Matthis
OF
Clinch COUNTY.

$100.00

Warrant Issued
1891
AND HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA,
County of Clinch

In person came before me, the undersigned Ordinary in and for the County of Clinch

Mrs. Martha Matthis, who being sworn according to law, says under oath that she is the widow of John Matthis, who was a soldier in the service of the Confederate States, and served as a member of Company I, of the 50 Regiment of Georgia Volunteers; that he enlisted in said service on or about the 10th day of May 1862, and was in the Confederate Army up to 2nd day of December 1864 ~~That while in the Army, he was on the~~ day of 186 , (See Note No. 1)

and that she has not heard from him since that time, and he may never returned and that she has reason to believe that he was either killed or died while in service as she heard from him up to the time mentioned and has never heard from him since

Deponent further swears that she was the wife of said deceased soldier during his term of service in the Army, and that she has never married since his death; that she became his wife on the 13 th day of February 1850, and that she has resided in Georgia continuously since the 26th day of August 1832; that Georgia is her home, and was such on the 23d day of December, 1890, and since said date she has not lived in any other State or locality. Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February 15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this the 10th day of April 1891.

Martha X Matthis
mark

H. Lee Dorsey
Ordinary.

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

Form No. 2.

Affidavit for Three Witnesses.

STATE OF GEORGIA,

County of Berrien } In person came before me, the undersigned Ordinary in and for said County, witnesses L. P. Goodwin, John M Futch and B. E. Connell (each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge, Mrs. Martha Matthis, of the County of Clinch, State of Georgia, is the widow of John Matthis, who was a soldier in Company. 2 of the 5th Regiment of Georgia Volunteers. That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the 10th day of May 1862. That while in said service, or by reason of said service in the Army, he lost his life as follows: Witness Say that they last sight of the said John Matthis in the Army, but know that he never returned. And that they have reasons for believing that he was either killed or died of sickness while in said Service.

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

Sworn to and subscribed before me, this, the 13 day of April 1891.

F M Smith
Ordinary. B.C. Ga.

L. P. Goodwin
J. M. Futch
B. E. Connell

Form No. 3.

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

STATE OF GEORGIA,

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 17th day of April 1891.

{SEAL}

George Cornelius
Ordinary.

Form No. 4.

NOTES.

The pension is only payable to certain classes of widows.

Those whose husbands were killed in service.

Those whose husbands died *in the army* of wounds or disease contracted in the service.

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

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

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

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

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

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

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

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

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

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

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

By order of the Governor.

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

Form No. 2.

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

STATE OF GEORGIA, County of Clinch

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 23rd day of January 1894.

(SEAL) George Comelius Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, Clinch County.

KNOW ALL MEN BY THESE PRESENTS, That I, Mrs Martha Mathis of Clinch County in said State, do hereby appoint Wm A. Wright com gen of Atlanta Georgia my true and lawful attorney in fact, for me, and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 23rd day of January 1894.

Martha Mathis [L. S.]

Executed in the presence of us:

Sallie Comelius

George Comelius Ord

DIRECTIONS.

Send amount by Express, to me at Homerville Ga, and oblige

In care of George Comelius Ordinary Mrs Martha Mathis

Mathis, Martha
Clinch Co.
FOR THOSE HERETOFORE PAID.

1894.

No. 737

WIDOWS' PENSION,

For year ending February 15th, 1894.

PAID TO

Mrs Martha Mathis

OF

Clinch COUNTY.

WARRANT ISSUED

1894.

AND HANDED TO

W A WRIGHT

Geo. W. Ramsey, State Printer, Atlanta.

Form No. 1

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally comes Mrs.
County of Clinch Martha Mathis

who being sworn, says on oath, that she is a bona fide resident of said County of Clinch State of Georgia, and that she has *resided* in said State continuously ever since 1832 That she is the Widow of John Mathis who was a Soldier in Company I of the 50th Regiment of Georgia Volunteers, that he enlisted in said Regiment on or about the month of May 1864 and served in the Army up to December 1864 That he lost his life on the 10th day of December 1864 (*State here full particulars of the husband's death, when, where and from what cause.*) (That he died in Camp Winder hospital at Richmond Va on the 10th day of December 1864 of Sickness

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1849; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1893, and now apply for the allowance provided by law for the year ending February 15th, 1894.

Sworn to and subscribed before me, this 23rd day of January 1894. } Martha Mathis
George Cornelius Ordinary. } Post-office, Sirmon Ga

Form No. 8.

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

STATE OF GEORGIA, County of Clinch

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 21st day of January 1893.

{SEAL} George Cornelius Ordinary.

Form No. 8.

POWER OF ATTORNEY.

STATE OF GEORGIA, Clinch County.

KNOW ALL MEN BY THESE PRESENTS, That I, Martha Mathis of Clinch County, in said State, do hereby appoint William A Wright Comp Ga of Atlanta Ga my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby 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 21st day of January 1893

Martha Mathis [L. S.]

Executed in the presence of us:

George Cornelius
W. H. Miley

DIRECTIONS.

Send amount by Express to me at Homerville Ga, and oblige Martha Mathis Ga
in care of George Cornelius Ord

Mathis, Martha
Clinch Co
FOR THOSE HERETOFORE PAID.

1893.

No. 430

Widows' Pension,

for year ending February 15th, 1893.

—PAID TO—

Mrs. Martha Mathis

—OF—

Clinch County.

Warrant Issued

9th 1893

AND HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

Form No. 8.

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

STATE OF GEORGIA, County of

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 8th day of January 1895.

{SEAL} George Cornelius Ordinary.

Form No. 8

POWER OF ATTORNEY.

STATE OF GEORGIA, Clinch County.

KNOW ALL MEN BY THESE PRESENTS, That I, Martha Mathis of Clinch County in said State, do hereby appoint William A Wright Com Ga of Atlanta Ga my true and lawful attorney in fact, for me, and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby 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 8th day of January 1895. Martha Mathis [L. S.]

Executed in the presence of us:

Martha Cornelius
George Cornelius Ordinary

DIRECTIONS.

Send amount by Express to me at Homerville Ga and oblige Martha Mathis
or in care of George Cornelius Ord

Mathis, Martha
Clinch Co
FOR THOSE HERETOFORE PAID.

1895.

No. 3253

WIDOW'S PENSION,

for year ending February 15th, 1895.

—PAID TO—

Mrs. Martha Mathis

—OF—

Clinch County.

widow of John Mathis

WARRANT ISSUED

2/9 1895.

AND HANDED TO

Geo. W. Harrison, State Printer.

Form No. 1.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Clinch } Personally comes Mrs. Martha Mathis

who being sworn, says on oath, that she is a bona fide resident of said County of Clinch State of Georgia, and that she has *resided* in said State continuously ever since 1832 That she is the Widow of John Mathis who was a Soldier in Company I of the 50th Regiment of Georgia Volunteers, that he enlisted in said Regiment on or about the month of May 1862 and served in the Army up to December 1864 That he lost his life on the day of 18 (*State here full particulars of the husband's death, when, where and from what cause.*) (he died of pneumonia in camp Winders hospital Richmond Va on the 10th day December 1864)

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1847; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1892, and now apply for the allowance provided by law for the year ending February 15th, 1893.

Sworn to and subscribed before me, this 21st day of January 1893. George Cornelius Ordinary. } Martha Mathis Post-office Homerville Ga

Form 1.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Clinch } Personally Comes Mrs. Mrs Martha Mathis

who being sworn, says on oath, that she is a bona fide resident of said county of Clinch State of Georgia, and that she has *resided* in said State continuously ~~ever since~~ for the last 50 years That she is the Widow of John Mathis who was a Soldier in Company I of the 50th Regiment of Georgia Volunteers, that he enlisted in said Regiment on or about the month of May 1864 and served in the Army up to December 10th 1864 That he lost his life on the 10th day of December 1864 (*State here full particulars of the husband's death, when, where and from what cause.*) (and that the said Soldier husband was taken sick while with his command and sent to hospital at Richmond Va and died of pneumonia on the 10th day of December 1864)

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1849, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this 8th day of January 1895. George Cornelius Ordinary. } Martha Mathis Post-office Sirmans Ga

Form No. 2.

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

STATE OF GEORGIA, County of Clinch

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the 15th day of January 1896.

{SEAL} George Cornelius Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, Clinch County.

I, Martha Mathis hereby authorize Wm A Wright com of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to Me at Homerville Ga in care of George Cornelius ordinary

In Witness Whereof, I have hereunto set my hand and seal, this 15 day of January 1896.

Martha Mathis [L.S.]

Executed in the presence of

J. R. E. Cornelius
George Cornelius
Ordinary

Form No. 2.

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

STATE OF GEORGIA, County of Clinch

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the 4th day of January 1897.

{SEAL} George Cornelius Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, Clinch County.

I, Martha Mathis hereby authorize Wm A Wright of Atlanta Ga receive and receipt for the pension paid hereon and request that he remit same to Ordinary at Homerville Ga

In Witness Whereof, I have hereunto set my hand and seal, this 4th day of Jan 1897.

Martha Mathis [L. S.]

Executed in the presence of

A. J. Kight

Mathis, Martha
Clinch County
FOR THOSE HERETOFORE PAID.

1896.

No. 3470

WIDOW'S PENSION,

for year ending February 15th, 1896.

PAID TO

Mrs. Martha Mathis

OF

Clinch County.

widow of John Mathis

WARRANT ISSUED

21 1896.

AND HANDED TO

Alg

Geo. W. Harrison, State Printer.

Mathis, Martha
Clinch County
FOR THOSE HERETOFORE PAID.

1897.

No. 1284

WIDOW'S PENSION,

for year ending February 15th, 1897.

PAID TO

Mrs. Martha Mathis

OF

Clinch County.

widow of John Mathis

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

21 1897,

AND HANDED TO

Alg

Geo. W. Harrison, State Printer, Atlanta.

Form 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Clinch } Personally Comes Mrs. Martha Mathes

who being sworn, says on oath, that she is a bona fide resident of said county of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since the year 1840 That she is the Widow of John Mathes who was a Soldier in Company I of the 50 Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of May 1864 and served in the Army up to December 1864 That he lost his life on the 10th day of December 1864 (*State here full particulars of the husband's death, when, where and from what cause.*) (

that while with his command was taken sick and sent to the Hospital at Richmond Virginia and died on the 10th day of December 1864 in said Hospital

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1849, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Clinch County for the year ending February 15th, 1895, and now apply for the pension provided by law for the year ending February 15th, 1896.

Sworn to and subscribed before me, this 15th day of Jan 1896. George Cornelius Ordinary. } Martha Mathes Post-office Sirmans Ga

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Clinch } Personally Comes Mrs. Martha Mathes

who being sworn, says on oath, that she is a bona fide resident of said county of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since the year 1860 That she is the Widow of John Mathes who was a Soldier in Company I of the 50th Regiment of Georgia Volunteers, that enlisted in said regiment on or about the month of May 1862 and served in the Army up to December 1864 That he lost his life on the 10th day of Dec 1864 (*State here full particulars of the husband's death, when, where and from what cause.*)

that said Soldier husband was taken sick while with his command and sent to hospital at Richmond and died in hospital the 10th day of Dec 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1849, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Clinch County for the year ending February 15th, 1896, and now apply for the pension provided by law for the year ending February 15th, 1897.

Sworn to and subscribed before me, this 4th day of January 1897. George Cornelius Ordinary. } Martha Matthes Post-office Sirmans Ga

POWER OF ATTORNEY.

State of Georgia, Clinch County.

I, Martha Mathis hereby authorize Wm A. Wright Comp Gen of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to Martha Mathis, in care of Ordinary at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 18th day of January 1898.

Martha Matthis [L. S.]

Executed in the presence of

Geo. Cornelius

George Cornelius Ordinary

Mathis Martha
Clinch County

For Those Heretofore Paid.

1898.

NO. 2683

WIDOW'S PENSION,

For year ending February 15th, 1898.

PAID TO

Mrs Martha Mathis

OF

Clinch County,

Widow of John Mathis

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

2/2 1898.

AND HANDED TO

Wm

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

POWER OF ATTORNEY.

State of Georgia, Clinch County.

I, Martha Mathis hereby authorize Wm A Wright Comp Gen of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to Ordinary at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 25th day of January 1899.

Martha Mathis [L. S.]

Executed in presence of

William Joyce

George Cornelius (Ord)

Mathis Martha
Clinch County

For Those Heretofore Paid.

1899.

NO. 2583

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAID TO

Mrs Martha Mathis

OF

Clinch County

Widow of John Mathis

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

2/1 1899.

AND HANDED TO

W A W

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Clinch } Personally Comes Mrs. Martha Mathis

who, being sworn, says on oath, that she is a bona fide resident of said county of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since the year 1832. That she is the Widow of John Mathis who was a Soldier in Company I of the fifty th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of May 1864 and served in the Army up to December 1864. That he lost his life on the 10th day of December 1864 (State here full particulars of the husband's death, when, where and from what cause.) Said Soldier husband was taken sick while with his command, and sent to the hospital at Richmond Virginia, with pneumonia there on the 10th day of December 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1849.

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

Sworn to and subscribed before me, this 18th day of January 1898. George Cornelius Ordinary. } Martha Mathis Post-Office Sirmans Ga

State of Georgia, Clinch County. } I George Cornelius Ordinary of said County, certify that I am well acquainted with Mrs. Martha Mathis who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 2nd day of March 1862

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

George Cornelius
Ordinary of Clinch County.

Official Seal.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Clinch } Personally Comes Mrs. Martha Mathis

who, being sworn, says on oath, that she is a bona fide resident of said county of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since January 1st 1865 That she is the Widow of John Mathis who was a soldier in Company I of the 50th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of May 1864 and served in the Army up to December 10th 1864 That he lost his life on the 10th day of December 1864 (State here full particulars of the husband's death, when, where and from what cause.) Said Soldier was taken sick while with his command in Maryland and sent to hospital at Richmond Va and died in camp under hospital Richmond Va on 10th day of Dec 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1849.

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

Sworn to and subscribed before me, this 25th day of Jan 1899. George Cornelius Ordinary. } Martha Mathis Post-Office Sirmans Ga

State of Georgia, Clinch County. } I George Cornelius Ordinary of said County, certify that I am well acquainted with Mrs. Martha Mathis who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 1st day of January 1860

Given under my official signature and seal this the 25th day of January 1899.

George Cornelius
Ordinary of Clinch County.

Official Seal.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, Martha Mathis hereby authorize John A Wright
Comr. Gen. of Atlanta Ga
to receive and receipt for the pension paid hereon and request that he remit same to
Martha Mathis in care of ordinary at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 22nd
day of January 1900.

Martha Mathis [L. S.]

Executed in presence of
George Lowndes
Ordinary

Mathis, Martha
Clinch, County
To Those Heretofore Paid.

1900.

No. 3703

WIDOW'S PENSION,

For year ending February 15th, 1900.

PAID TO
Mrs. Martha Mathis
OF
Clinch County,
Widow of John Mathis

JNO. W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
March 20 1900,
AND HANDED TO
Agent

ca. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, Martha Mathis hereby authorize John A Wright
Comr. Gen. of Atlanta Ga
to receive and receipt for the pension paid hereon and request that he remit same to
Martha Mathis in care of ordinary at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 20
day of March 1900.

Martha Mathis [L. S.]

Executed in presence of
William Payne
George Lowndes
Ordinary

To Those Heretofore Paid.

1900.

No.

WIDOW'S PENSION,

For year ending February 15th, 1900.

PAID TO
Mrs. Martha Mathis
OF
Clinch County,
Widow of John Mathis

JNO. W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
1900,
AND HANDED TO

ca. W. Harrison, State Printer, Atlanta.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Clinch

Personally Comes Mrs. Martha Mathis

who, being sworn, says on oath, that she is a bona fide resident of said county of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since Augest 1865. That she is the Widow of Peter Mathis who was a soldier in Company I of the 5th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of May 1864 and served in the Army up to December 1864 That he lost his life on the 1st day of December 1864 (*State here particulars of the husband's death, when, where and from what cause*) Died December 10 1864 Not while in Line of Duty while Command the Tenn State of Maryland was taken sick at the Hospital at Richmond Va and died there on the 10th day of December 1864 from Measles

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1849.

I have been allowed a pension as a resident of Clinch County for the year ending February 15th, 1897, and now apply for the pension provided by law for the year ending February 15th, 1900.

Sworn to and subscribed before me, this 22nd day of January 1900.
George Bowen Ordinary.

Martha Mathis
Post Office Stevens &c

State of Georgia,
Clinch County.

I _____ Ordinary of said County, certify that I am well acquainted with Mrs. Martha Mathis, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 2nd day of March 1865.

Given under my official signature and seal, this the 22nd day of January 1900.

{Official Seal.}

George Bowen
Ordinary of Clinch County.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Clinch

Personally Comes Mrs. Martha Mathis

who, being sworn, says on oath, that she is a bona fide resident of said county of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since March 2nd 1865. That she is the Widow of John Mathis who was a soldier in Company I of the 5th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of May 1864 and served in the Army up to Dec 1864 That he lost his life on the 10 day of December 1864 (*State here particulars of the husband's death, when, where and from what cause*) Said Soldier Husband was taken sick while in line of duty with his command and to Military Hospital at Camp under Hospital Richmond Virginia and died there on or about 10th day of December 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1849.

I have been allowed a pension as a resident of Clinch County for the year ending February 15th, 1897, and now apply for the pension provided by law for the year ending February 15th, 1900.

Sworn to and subscribed before me, this 20 day of March 1900.
George Bowen Ordinary.

Martha Mathis
Post Office Stevens

State of Georgia,
Clinch County.

I George Bowen Ordinary of said County, certify that I am well acquainted with Mrs. Martha Mathis, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 2nd day of March 1865.

Given under my official signature and seal, this the 20th day of March 1900.

{Official Seal.}

George Bowen
Ordinary of Clinch County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, Martha Mathis hereby authorize
Wm A Wright of Atlanta Ga
to receive and receipt for the pension paid hereon and request that he remit same to
Martha Mathis at Homerville Ga
Care Postmaster

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 24th
day of Dec 1901.

Martha Mathis [L. S.]

Executed in presence of

Mathis, Martha
Clinch Co

To Those Heretofore Paid.

1901.

No. 44

WIDOW'S PENSION,

For year ending February 15th, 1901.

PAID TO
Mrs. Martha Mathis
OF
Clinch County.
Widow of John Mathis

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED Jan 14th 1901,
AND HANDED TO
Wright

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

1/2/1901

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, martha mathis dw, hereby authorize
W A Right of Lowndes County Ga
to receive and receipt for the pension paid hereon, and request that he remit same to
the W. T. Howell at Homerville Ga

In Witness Whereof, I have hereunto set my hand and seal, this 7
day of Jan 1902.

Martha Mathis [L. S.]

Executed in presence of

W T Howell Attorney
CC

Mathis, Martha
Clinch, County

To Those Heretofore Paid

1902.

No. 2752

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO
Mrs. Martha Mathis
OF
Clinch County,
Widow of
Co. Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED Feb 4 1902
AND HANDED TO
Wright

GEO. W. HARRISON, STATE PRINTER, ATLANTA, GA.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Clinch } **Personally Comes Mrs.** Martha Mathis

who, being sworn, says on oath, that she is a bona fide resident of said County of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since the year 1892. That she is the Widow of James Mathis who was a soldier in Company J of the 50th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of May 1862 and served in the Army up to Dec 10th 1862. That he lost his life on the 10th day of December 1862. (*State here particulars of the husband's death, when, where and from what cause*) Left home sick of debt with his command was left in Dublin, and sent to Richmond in a Corps Hospital, and in Richmond on the 10th day of Dec. 1862

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1849

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

Sworn to and subscribed before me, this 24th day of Dec 1901. } Martha Mathis

George Connell Ordinary. } Post Office Stevenson Ga

Ordinary

State of Georgia, County. } I, George Connell Ordinary of said County, certify that I am well acquainted with Mrs. Martha Mathis, who made the above affidavit and am satisfied that the facts therein stated are true, and that she has continuously resided in this State since the 25th day of March 1860

Given under my official signature and seal, this the 24th day of December 1901.

{ Official Seal. }

George Connell

Ordinary of Clinch County.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Clinch } **Personally comes Mrs.** Martha Mathis

who, being sworn, says on oath, that she is a bona fide resident of said County of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since the date of 1882. That she is the Widow of John Mathis who was a soldier in Company I of the Fifty Sixth Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of May 1864, and served in the Army up to 10 of Dec 1864. That he lost his life on the 10 day of Dec 1864. (*State here particulars of the husband's death, when, where and from what cause*) John Mathis left home sick on the march when marching orders for Richmond Virginia was called for Corps Invalids died at Richmond on the 10 of Dec 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1849.

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

Sworn to and subscribed before me, this 1 day of Jan 1902. } Martha Mathis

W J Howell, Ordinary. } Post-Office Stevenson Ga

State of Georgia, Clinch County. } I, W J Howell Ordinary of said County, certify that I am well acquainted with Mrs. Martha Mathis, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents hereself to be, and that she has continuously resided in this State since the date of day of 1880

Given under my official signature and seal, this the 1 day of Jan 1902.

{ Official Seal. }

W J Howell

Ordinary of Clinch County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, martha mathis, hereby authorize W A Right of Foolton County Ga to receive and receipt for the pension paid hereon, and request that he remit same to to Mell By check at Homerville Ga

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

Martha mathis [L. S.]

Executed in presence of
H L Lankford Jr
W T Howell

Mathis, Martha
Clinch, County
To Those Heretofore Paid.
1903.
No. 2424
WIDOW'S PENSION,
For year ending Dec. 31, 1903.
PAID TO
Mrs. Martha Mathis
OF
County, County,
Widow of John Mathis
Co. Regiment
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
3/24 1903.
AND HANDED TO
Jr

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, marth Mathis hereby authorize W A Right of fulton County to receive and receipt for the pension paid hereon, and request that he remit same to Mell By check at Sirmon Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 26 day of Jan 1904.

Martha Mathis [L. S.]

Executed in presence of
W T Howell Ordinary

Mathis, Martha
Clinch County
TO THOSE HERETOFORE PAID.
1904.
No. 2396.
WIDOW'S PENSION
FOR
YEAR ENDING DECEMBER 31, 1904.
PAID TO
Mrs. Martha Mathis
Clinch County,
Widow of John
Co. Regiment
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
FEB 24 1904,
AND HANDED TO
Jr

Geo. W. Harrison, State Printer, Atlanta.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Clinch } Personally comes Mrs. Martha Mathis

who, being sworn says on oath, that she is a bona fide resident of said County of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since August 20 1832. That she is the Widow of John Mathis who was a soldier in Company I of the fifthieth 50 Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of May 1864, and served in the Army up to December 10 1865. That he lost his life on the tenth day of December 1865 (State here particulars of the husband's death, when, where and from what cause.) ~~the~~ Captain Smith of Company I rote to me that he Died of Pneumonia in Camp Winder Hospital Richmon Va

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1849

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

Sworn to and subscribed before me, this 7 day of Jan 1903. W T Howell, Ordinary. } Martha Mathis Post-Office Sirmons Ga

State of Georgia, Clinch County. } I, W T Howell Ordinary of said County, certify that I am well acquainted with Mrs. Martha Mathis, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the date of day of 1861

Given under my official signature and seal, this the 7 day of Jan 1903.

{ Official Seal. } W T Howell Ordinary of Clinch County.

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

Form No. 1.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of Clinch } Personally comes Mrs. Mr Martha Mathis

who, being sworn says on oath, that she is a bona fide resident of said County of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since The Date of 1832. That she is the Widow of John Mathis who was a soldier in Company I of the 50 th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of May 1863, and served in the Army up to 10 Day of Sep 1863. That he lost his life on the 10 day of Dec 1863 (State here particulars of the husband's death, when, where and from what cause.) John Mathis Died in Camp Winder Hospital in Virginia with Pneumonia

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1849

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

Sworn to and subscribed before me, this 29 day of Jan 1904. W T Howell Ordinary. } Martha Mathis Post Office Sirmons Ga

State of Georgia, Clinch County. } I, W T Howell Ordinary of said County, certify that I am well acquainted with Mrs. Martha Mathis, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 1860

Given under my official signature and seal, this the 29 day of Jan 1904.

{ Official Seal } W T Howell Ordinary of Clinch County

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, Martha Mathis, hereby authorize W A Right of Fulton County to receive and receipt for the pension paid hereon, and request that he remit same to Mill by Check at Simmons Ga

In Witness Whereof, I have hereunto set my hand and seal, this 2 day of Jan 1905.

Martha Mathis [L. S.]

Executed in presence of
A. W. Gowrand

Mathis, Martha
Clinch County
To Those Heretofore Paid.
1905.
No. 2506
WIDOW'S PENSION,
For year ending Dec. 31, 1905.
PAID TO
Mrs. Martha Mathis
OF
Colum County,
Widow of
Co. Regiment
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
MAR 1 1905.
AND HANDED TO
Dr

The Foreman Printing and Publishing Co., Atlanta, Ga. W. Hammond, Manager, for State Printer.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, Martha Mathis, hereby authorize W. A. Wright of Fulton Co. Ga to receive and receipt for the pension paid hereon, and request that he remit same to J. T. Dame Ordinary at Homerville Ga

In Witness Whereof, I have hereunto set my hand and seal, this 2nd day of Jan 1906,

Martha Mathis [L. S.]

Executed in presence of
J. T. Dame

Mathis, Martha
Clinch Co
To Those Heretofore Paid.
1906.
No. 647
WIDOW'S PENSION
For year ending Dec. 31, 1906.
PAID TO
Mrs. Martha Mathis
OF
Clinch County,
Widow of Jas Mathis
Co. I Regiment 50th Ga
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
JAN 26 1906,
AND HANDED TO
W. C. W.

The Foreman Printing and Publishing Co., Ga. W. Hammond, Man.

Form No. 1

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of _____ } Personally comes Mrs. martha mathis

who, being sworn says on oath, that she is a bona fide resident of said County of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since 1832. That she is the Widow of John mathis who was a soldier in Company I of the fifthieth Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of may 1864, and served in the Army up to December 1864. That he lost his life on the 10 day of December 1864. (State here particulars of the husband's death, when, where and from what cause.) John mathis Died in Canye winder Hospital in Virginia with Pneumonia in the year of 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1849

I have been paid a pension as a resident of Clinch County for the year ending December 31, 1904, and now apply for the pension provided by law for the year ending December 31, 1905.

Sworn to and subscribed before me, this 2 day of Jan 1905. W T Howell, Ordinary. } Martha Mathis Post-Office Sirmons

State of Georgia, Clinch County. } I, W T Howell Ordinary of said County, certify that I am well acquainted with Mrs. martha mathis, Who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the Date day of _____ 1860

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

{ Official Seal. } W T Howell Ordinary of Clinch County.

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

Form No. 1

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Clinch } Personally comes Mrs. Martha Mathis

who, being sworn, says on oath that she is a bona fide resident of said County of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since 1832. That she is the Widow of Jno Mathis who was a soldier in Company I of the 50th Ga Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of May 10th 1862 and served in the Army up to never return home 186__ That he lost his life on the died in day of Hospital 18__ (State here particulars of the husband's death, when, where and from what cause.) never returned Home died in Hospital.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1848

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

Sworn to and subscribed before me this 2 day of Jan 1906. J. T. Dame, Ordinary. } Martha Mathis Post Office Hamersville Ga

State of Georgia, Clinch County. } I, J. T. Dame Ordinary of said County, certify that I am well acquainted with Mrs. Martha Mathis, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the all her day of life 18__ I have known her all my life.

Given under my official signature and seal, this the 2 day of Jan 1906.

{ Official Seal } J. T. Dame Ordinary of Clinch County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, Martha Mathis hereby authorize W. A. Wright of Atlanta Ga to receive and receipt for the pension paid hereon, and request that he remit same to J. T. Dame ordinary at Homerville Ga

In Witness Whereof, I have hereunto set my hand and seal, this 1st day of Jan 1907.

Martha Mathis [L. S.]

Executed in presence of
J. T. Dame

Mathis Martha
Clinch County
To Those Heretofore Paid
1907.
No. 1280

WIDOW'S PENSION

For Year ending Dec. 31, 1907.
PAID TO
Mrs. Martha Mathis
OF
Clinch County,
Widow of Jno Mathis
Co. I Regiment 50th Ga

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
2/6 1907,
AND HANDED TO
N

Geo W. Harrison, Sam Trainer, Minute.

Form No. 1

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Clinch } PERSONALLY COMES MRS. Martha Mathis

who, being sworn says on oath, that she is a bona fide resident of said County of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since 1832. That she is the Widow of John Mathis who was a soldier in Company I of the 50th Regiment of Georgia Volounteers, that he enlisted in said regiment on or about the month of 5/10 1862, and served in the Army up to supposed dead 186 . That he lost his life on the he has no day of returned 18 . (*State here particulars of the husband's death, when, where and from what cause.*)

Supposed dead never returned.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1848

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

Sworn to and subscribed before me this 1 day of Jan 1907.
J. T. Dame Ordinary.

Martha her x mark Mathis
Post Office Sirmans Ga

State of Georgia, Clinch County. } I, J. T. Dame Ordinary of said County, certify that I am well acquainted with Mrs. Martha Mathis, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the + day of Jan 1832

Given under my official signature and seal, this the 1 day of Jan, 1907.

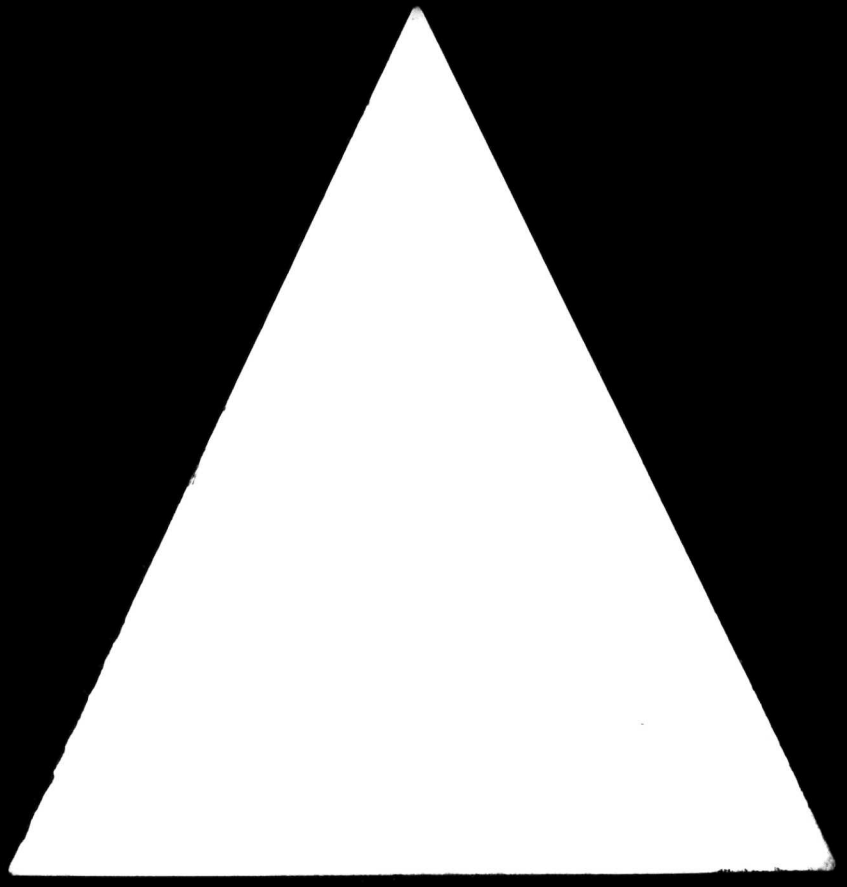
{ Official Seal }

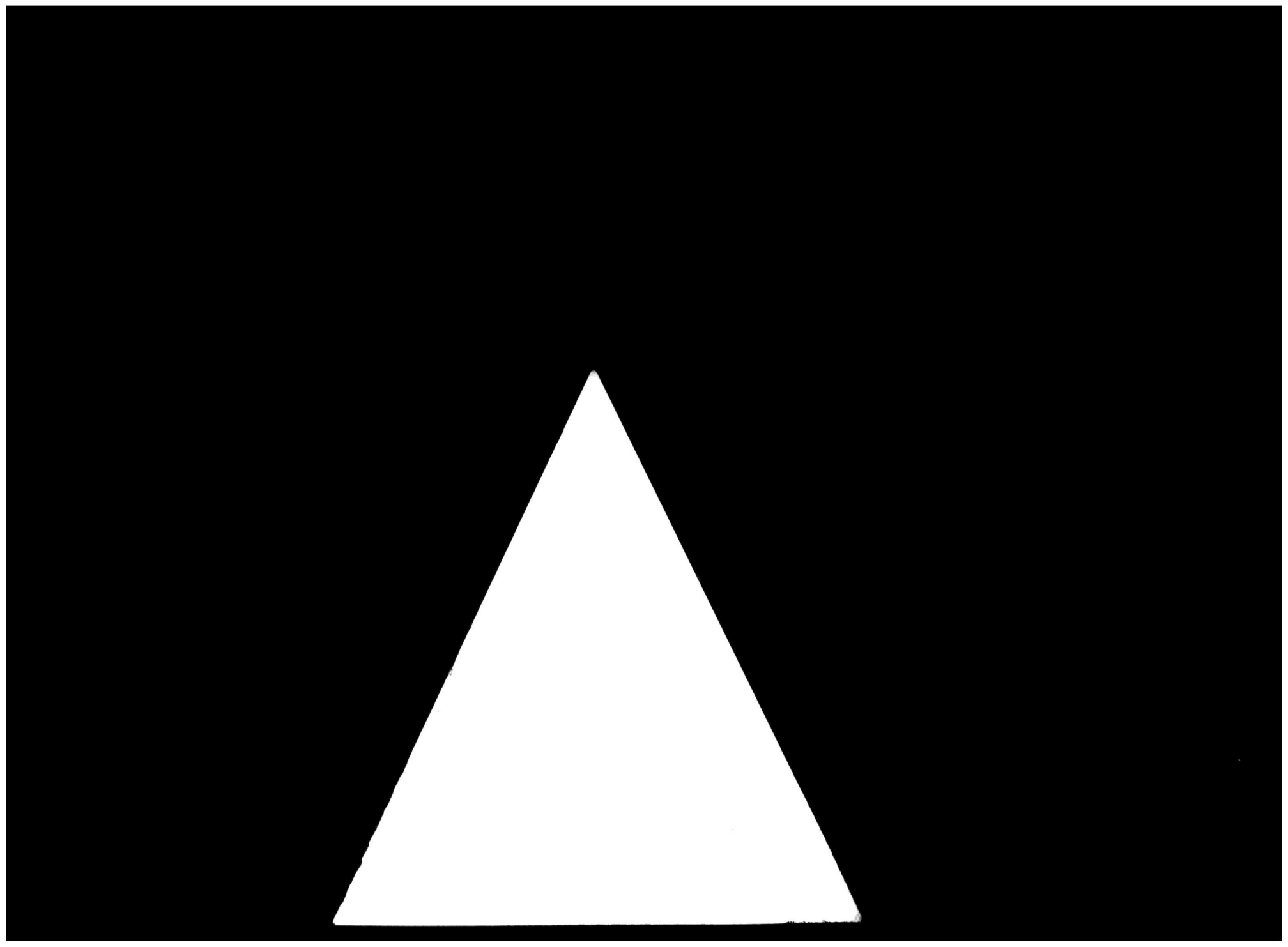
J. T. Dame
Ordinary of Clinch County.

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

Ordinary of Clinch County.

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





1928

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. Sarah B. Mathis

Widow of Ezekiel Mathis

Company "G"

Regiment 29th. Ga.

Date of Husband's Death Feb.14th.1928

Date of Marriage Jan. 29th. 18 70

Approved John W. Clark 19 Feby. 28

JOHN W. CLARK,
Commissioner of Pensions.

2-18-28

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

Clinch COUNTY.

I, Kate C. Pafford Ordinary of said County, do certify that I know Mrs. Sarah B. Mathis, 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 A.O. Register, 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 16th day of Feb., 1928.

(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, 1881, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Mathis Sarah B. (1)
1928

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. Sarah B. Mathis
Widow of Ezekiel Mathis
Company "G"
Regiment 29th. Ga.
Date of Husband's Death Feb. 14th 1928
Date of Marriage Jan. 29th. 18 70
Approved Lotus W. Leland
19 Feby. 28

JOHN W. CLARK,
Commissioner of Pensions.

2-18-28 G

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

Clinch COUNTY.

I, Kate C. Pafford Ordinary of said County, do certify that I know Mrs. Sarah B. Mathis, 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 A.O. Register, 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 16th day of Feb., 1928.

(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, 1881, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Mathis Sarah B.

For Clinch County

1928

Application for Pension Due Deceased Pensioner

(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

Kate C. Pafford Ordinary

For Mrs. Sarah B. Mathis

Date of Death March 1st 1928

Amount $ 150.00

Approved and ordered paid

John W. Clark 1928

2-4-28 [redacted]
Commissioner of Pensions.

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

MAILED TO APPLICANT

APPLICATION FOR PENSION BY A WIDOW

Whose Deceased Husband Was on the Pension Roll of Georgia.

STATE OF GEORGIA,

Clinch COUNTY.

Personally before me comes Mrs. Sarah Bennett Mathis of said County, who, after having been duly sworn, says that she is the widow of Ezeikel Mathis to whom, in the County of Clinch State of Georgia she was married on the 29th day of Jan. 18 70, and that she remained his wife, and resided with him to the date of his death in Feb. 14th. 1928 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 Soldiers Pension Roll of the State and paid a pension of $ 200.00 in Clinch County for 19 27 (per annum), on account of being a soldier in Company "G" Regiment 29th. Ga. (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 ~~her~~ for seventy years. ~~his~~

Sworn to and subscribed before me, this the

16th day of February 1928.

Kate C. Pafford, Ordinary

of Clinch County.

Mrs. Sarah B. Mathis (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 A.O. Register Clerk S.C.C.C. 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. Sarah B. Mathis, who made the foregoing affidavit, is the lawful widow of Ezeikel Mathis who died in Clinch County in said State of Georgia on the 14th day of Feb., 1928, and that she has not since remarried; that she became the wife of Ezeikel Mathis on the 29th. day of Jan. 18 70 according to records; that she and he had resided together as husband and wife, continuously, ~~since~~ for sixty years, to my personal knowledge and acquaintance ~~29th day of Jan. 18~~, and that she was the same man who was on the pension roll of said State Georgia from Clinch County Georgia when he died.

Sworn to and subscribed before me, this the

16th day of Feb. 1928.

Kate C. Pafford, Ordinary

of Clinch County.

A.O. Register Clerk S.C.C.C.

(SEAL OF ORDINARY)

Application for Pension Due to a Deceased Pensioner

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

(Under Act Approved August 15, 1906)

GEORGIA, Clinch County.

Personally before me, the Ordinary of said County, comes D. P. Mathis of said County, who, after being sworn, on oath says that he knew Sarah B. Mathis widow 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 1st day of March 1929, and that a Pension of ($) Dollars was due pensioner and unpaid at the time of pensioner's death, and that pensioner left no widow or dependent children surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of $150.00 per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me this 4th day of March 1929.

Kate C. Pafford, Ordinary

Clinch County

(Seal of Ordinary)

D P Mathis

CERTIFICATE OF ORDINARY

GEORGIA, Clinch County.

I, Kate C. Pafford, Ordinary of said County, do certify that I personally know D. P. Mathis, who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew Mrs Sarah B Mathis widow 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 $200.00 ($) Dollars in said County for 1928, 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 4th day of March 1929.

(Seal or Ordinary)

Kate C. Pafford, Ordinary

Clinch, County

INSTRUCTIONS:

1st. For use in all cases where pensioner died after January 1st, but 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 _____, 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 the 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 receipts.

8th. Attorneys at law for securing said pay write the Pension Department stating the circumstances in very great detail. Pensioner's children, or next-of-kin, must not be charged for their help only what is fair and common humanity demand of them.

9th. Return this application, and attached bills, with your final statements, to the Pension Department.

10th. Ordinary should see that the back of this blank, when folded, is filled out.

MRS. KATE C. PAFFORD
ORDINARY CLINCH COUNTY
Homerville, Georgia

Feb. I4th. I928.

Hon. John W. Clark,
Commissioner of pensions,
Atlanta, Ga.

Dear Sir;
I sent in Pension roll for first quarterly payment I928, with Ezekiel Mathis's name on it. He died on Feb. I4th. I928.and his widow is sending in her claim for his pension in her own name.

If you haven't already sent out the checks I hope you can arrange to get her pension out t this quarterly payment.

Yours very truly,
Kate C. Pafford

MRS. KATE C. PAFFORD
ORDINARY CLINCH COUNTY
HOMERVILLE GA

Georgia Clinch County:

I, D.P. Mathis, have this day received of Kate C. Pafford, Ordinary of Clinch County, Ga. $I00.00, for funeral expanses of Sarah B. Mathis,deceased widow pensioner.

This June, 24th. I929. D P Mathis

MRS. KATE C. PAFFORD
ORDINARY CLINCH COUNTY
Homerville, Georgia

Georgia Clinch County.
I do solemnly swear that the attached receipt from Homerville Hard. & Furniture for 1 casket was paid by me for mrs. Sarah B Mathis deceased.
this march 4th 1929
D.P. Mathis

Sworn to and subscribed before me this march 4th 1929
Kate C. Pafford
Ordinary Clinch Co. Ga.

State of Georgia

Clinch County.

By W.W. Griffin ,Ordinary for the County of Clinch and State aforesaid.

To any Minister of the Gospel,Judge, Justice of the inferior Court,or Justice of the Peace,for said State;

You are hereby authorized to join in the Holy State of Matrimony Ezeikel Mathis Of _____ and Sarah Bennett of _____ according to the Constitution and Laws of the State, for which this shall be your license.

Given under my hand Seal of Office this 29th. day of January in th Year of our Lord 1870.

W.W. Griffin

This Certifies,that Ezeikel Mathis and Sarah Bennett were duly joined in Marriage on the 29th. day of January A.D. 1870 by Erie Edwards, J.P.

Georgia Clinch County.

I,Kate C. Pafford, Ordinary of Clinch County, do hereby certify that the within is a true and correct copy of the marriage license of Ezeikel Mathis and Sarah Bennett as appears of record in my Office in Book "C" page 60.

This Feb. 16th. 1928.

Kate C. Pafford
Ordinary & Exoff. Clerk thereof.

Homerville, Ga. Mar 4 1929
D. P. Mathis
Dupont Ga
In Account With

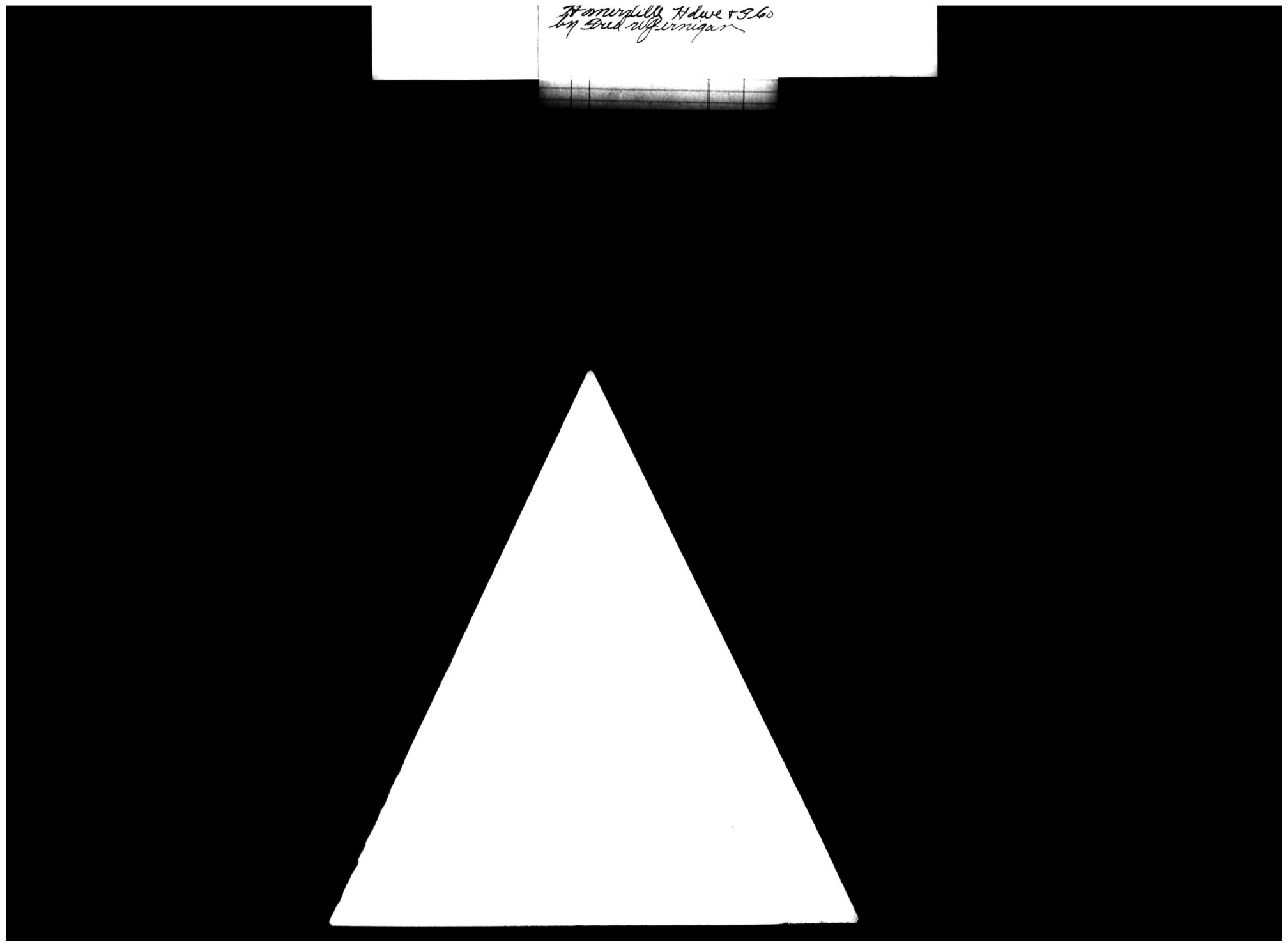
Homerville Hardware & Furniture Co.

HARDWARE AND FURNITURE
FARMING IMPLEMENTS AND BUILDING MATERIAL
MORTICIANS - FUNERAL DIRECTORS

Account Rendered

Mar 1 To Casket 150 00

Paid 3-4-29
Homerville Hdwe + P.Co
by Fred Wfernigan



Homerville Hdwe + 960
by Fred Wfernigan

NOTES.

In order to avoid unnecessary delays to applicants, and to enable all parties interested to understand the laws granting allowances to disabled soldiers, as well as the rules adopted by the Governor touching the payments provided, the following suggestions are submitted.

1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physicians, and followed by a plain statement of facts showing the *extent of the disability*. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.

2. The law makes no allowance for an arm or a leg, unless the arm or leg has been rendered *substantially and essentially useless*.

3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of life, etc." There is no qualification to the clause of the Act in reference to the arm or leg, but the limb must for all purposes be "substantially and essentially useless."

4. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."

5. If papers are returned for correction, and amendments are *added* to any of the affidavits, the amendments must be made *under oath* before an officer, and the proofs must show that the amendments have been duly sworn to.

6. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.

The Ordinaries of the several counties are specially requested to call the attention of the physicians and applicants to these points.

Mattox, L. C.
Clinch Co.
1,5 Tonne

No. 2260

APPLICATION FOR ALLOWANCE

FOR

Loss of 2 fingers

Applicant L. C. Mattox

County Clinch

Amount $10

Date of Warrant May 17

Entered on Record May 17 1889

[illegible]

SECRETARY EXECUTIVE DEPARTMENT.

W. A. W.

NOTES.

In order to avoid unnecessary delays to applicants, and to enable all parties interested to understand the laws granting allowances to disabled soldiers, as well as the rules adopted by the Governor touching the payments provided, the following suggestions are submitted.

1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physicians, and followed by a plain statement of facts showing the *extent of the disability.* If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.

2. The law makes no allowance for an arm or a leg, unless the arm or leg has been rendered *substantially and essentially useless.*

3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of life, etc." There is no qualification to the clause of the Act in reference to the arm or leg, but the limb must for all purposes be "substantially and essentially useless."

4. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."

5. If papers are returned for correction, and amendments are *added* to any of the affidavits, the amendments must be made *under oath* before an officer, and the proofs must show that the amendments have been duly sworn to.

6. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.

The Ordinaries of the several counties are specially requested to call the attention of the physicians and applicants to these points.

Matthews & Co.
Colquitt Ga.
1 5 Cavalry

No. 22160

APPLICATION FOR ALLOWANCE

FOR

Loss of 2 fingers

Applicant L. G. Matthews
County Clinch
Amount $ 0
Date of Warrant May 17
Entered on Record May 17 1889
Secretary Executive Department.
Clerk

For Use of Applicants Who Have not Heretofore Drawn.

STATE OF GEORGIA,
Clinch County.

PERSONALLY appears L. G. Matthews of Clinch county, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has been such since the first day of January 1865; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company F, of 5th Regiment of 2 Cavalry Volunteers Robinson's Brigade; that whilst engaged in such military service, at the battle of Saltville in the State of Virginia, on the 2nd day of October 1864, he was wounded as follows: in the left hand by a ball which caused the entire loss of the little & fourth fingers and the most or third from the first joint. Also leaving no fingers to use on that side the arm has shrunk on that side. I have but two fingers and a thumb to use on the left hand which was my best hand, I being left handed.

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

Sworn to and subscribed before me, this the 5th day of April 1889
James M. Wright Exofficio J.P.

L. G. Matthews

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

Commissioned Officer's Affidavit.

STATE OF GEORGIA,
County

PERSONALLY came before me of the county of State of Georgia, who, being duly sworn, says that he was a commissioned officer in Company , of Regiment of Volunteers, and that deponent knows , and that he received the wounds (or contracted the disease) in the military service, as stated in his foregoing affidavit, and that wounds (or disease) permanently disables the said as stated by him in said affidavit. Deponent further states that said is a *bona fide* citizen of this State and resides in county.

The foregoing affidavit, changed to suit the facts should be made by a commissioned officer of Company or Regiment. If the affidavit of such an officer is not obtainable, the following affidavit of three responsible citizens should be furnished:

STATE OF GEORGIA,
County.

PERSONALLY came H. A. Mattox, G. W. Newbern and Isham Patterson citizens of Clinch county, in said State, who, being duly sworn, say that they are acquainted with L. C. Mattox and know that he received the wounds (or contracted the disease) in the military service, as stated by him in the foregoing affidavit; that said wounds (or disease) permanently disables applicant, as stated by him; that said applicant is a *bona fide* citizen of this State, and resides in Clinch county, and we are well satisfied that all the statements in his affidavit are true.

Sworn to and subscribed before me, this 27 day of April 1889
James M. Wright J.P. C.J.P.

H. A. Mattox
G. W. Newbern
Isham Patterson

NOTE.—Above affidavit *must* be made by three citizens *of the county of applicant's residence.*

STATE OF GEORGIA,
County.

PERSONALLY comes before me George Cornelius ~~Ordinary~~ of said county, W. J. Stapleton M.D. and F. C. Folks, both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined L. C. Mattox and after such examination say that the applicant has been injured as follows: In the left hand by a ball which caused the loss of the little finger and the next one to it from the first joint and this has caused the arm to shrink on that side having no use of the muscles on that side.

W. J. Stapleton M.D.
F. C. Folks M.D.

Sworn to and subscribed before me, this 4th day of May 1889
George Cornelius
ORDINARY.

READ NOTE.—The physicians will state fully the extent of the wound, and then give facts to show the extent of the disability resulting therefrom.

STATE OF GEORGIA,
Clinch County.

I, George Cornelius Ordinary of said county, do certify that I am well acquainted with L. C. Mattox 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. I also certify that the foregoing witnesses, are persons of respectability, and that their statements are worthy of full credit and belief.

I further certify that J. M. Wright J.P. before whom the foregoing affidavits were made and power of attorney was signed, is a Justice of the Peace of said county, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 4th day of May 1889
George Cornelius
Ordinary Clinch County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

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

In witness whereof I have hereunto set my hand and seal, this _____ day of _____ 1889

L. C. Mattox (L.S.)

Executed in the presence of us:

Albie E. Lanier
S. W. Register

STATE OF GEORGIA,
Clinch County.

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

I further certify that J. H. Mattox before whom the foregoing affidavits were made and power of attorney was signed, is a Justice of the Peace of said county, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 3rd day of March 1890

George Cornelius
Ordinary Clinch County.

Mattox, L. C.
Clinch Co
1890.

No. 2438
APPLICATION FOR ALLOWANCE.
FOR THE YEAR ENDING OCTOBER 31, 1891.
FOR
Loss of Fingers
Applicant, L. C. Mattox
County, Clinch
Amount, 10.00
Date of warrant, Mch 10
Entered on record
Mch 10 1890
W H H
SECRETARY EXECUTIVE DEPARTMENT.
WARRANT HANDED TO
W H Wright

STATE OF GEORGIA,
Clinch County.

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

I further certify that J. C. Kirkland before whom the foregoing affidavits were made and power of attorney was signed, is a Notary public of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 2nd day of March 1891.

George Cornelius
Ordinary of Clinch County.

Mattox, L. C.
Clinch Co
1891

No. 7696
Application for Allowance
FOR THE YEAR ENDING OCTOBER 31, 1891.
FOR
Loss of two fingers
Applicant, L. C. Mattox
County, Clinch
Amount, 10
Date of Warrant, Mch 17
Entered on record
Mch 17 1891
W H H
SECRETARY EXECUTIVE DEPARTMENT.
WARRANT HANDED TO
W H Wright
Geo. W. Harrison, Public Printer, Atlanta, Ga.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

PERSONALLY appears L. C. Mattox of Clinch county, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has been such continually since the 1st day of January 1852; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company G, of 5 th Regiment of Ga Cavalry Volunteers Robinson 's Brigade; that whilst engaged in such military service, at the battle of Saltville in the State of Virginia, on the 2nd day of October 1864, he was wounded as follows: by a ball, in the hand causing the loss of the little finger and the next finger to the first joint and breaking the metacarpal bone of the little finger into many pieces, permanently disabling his hand.

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

Sworn to and subscribed before me, this the 5th day of March 1890 — L. C. Mattox

J. H. Mattox J.P.

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

POWER OF ATTORNEY.

STATE OF GEORGIA
Clinch County.

KNOW ALL MEN BY THESE PRESENTS, That I, L. C. Mattox of Clinch county, in said State, do hereby appoint W. A. Wright of Fulton County my true and lawful attorney in fact, for me and in my name, to receive and receipt for what ever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 5th day of March 1890

L. C. Mattox [L. S.]

Executed in the presence of us:

S. D. Findley

J. H. Mattox J.P.

DIRECTION.

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

L. C. Mattox

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
_____ County.

PERSONALLY appears L. C. Mattox of Clinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 1st day of January 1852; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a private in Company G, of 5 th Regiment of Cavalry Volunteers Robinson 's Brigade; that whilst engaged in such military service at the battle of Saltville in the State of Virginia, on the 2nd day of October 1864, he was wounded as follows: In the left hand by a ball causing the loss of the little finger and first joint of the next finger, passing through the hand causing the metacarpal bone of the little finger into many pieces and came out at the wrist

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

Sworn to and subscribed before me, this the 2nd day of March 1891. — L. C. Mattox

F. C. Pinkland Ex. J. P.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

Know all Men by these Presents, That I, L. C. Mattox of Clinch County, State of Georgia, do hereby appoint W. A. Wright of Atlanta Ga my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of 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 the 2nd day of March 1891.

L. C. Mattox [L. S.]

Executed in the presence of us:

F. C. Pinkland Ex. J. P.

B. E. Mattox

DIRECTION.

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

L. C. Mattox

STATE OF GEORGIA,
Clinch County.

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

Given under my official signature and seal, this 8th day of March 1892.

George Cornelius
Ordinary Clinch County.

Mattox, L. C.
Clinch Co.
No. 2296

SOLDIER'S PENSION.
1892.

FOR THE YEAR ENDING OCTOBER 26, 1892.

Name L. C. Mattox.
County Clinch.
Disability Loss of finger & joint of wrist
Amount, $10
Entered on record March 1892.

W. H. HARRISON,
Secretary of Executive Department.
No. Color

AGENT.
W. A. Wright.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

Know all Men by these Presents, That I L. C. Mattox of Clinch County, State of Georgia, do hereby appoint W. A. Wright of Atlanta Ga. my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of 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 3rd day of April 1893.

L. C. Mattox [L. S.]

Executed in the presence of us:
L. C. Kirkland Ga. Jr.

DIRECTION.

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

L. C. Mattox

Mattox, L. C.
Clinch Co.
1893.

No. 556

Application for Allowance

For the Year Ending October 26, 1892.

For Loss 2 fingers

Applicant L. C. Mattox

County Clinch

Amount, $10

Date of Warrant, 4/8

Entered on record, 1893

W. H. H.

Secretary Executive Department.

Warrant Handed to

W. A. W.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

PERSONALLY appears L. C. Matton of Clinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of Georgia, and has been such continuously since the 1st day of January 1853; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a private in Company G, of 5 th Regiment of Cavalry Volunteers Robison's Brigade; that whilst engaged in such military service at the battle of Saltville in the State of Virginia, on the 2nd day of October 1864, he was wounded as follows: by a minnie ball in the hand which caused the loss of the little finger and the first joint of the next.

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

Sworn to and subscribed before me this the 8th day of March 1892. L. C. Matton

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.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

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

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

L. C. Matton [L. S.]

Executed in the presence of us:
H. A. Johnson J. P.
George Cornelius

DIRECTION.

Send money to me as follows, by Express to Homerville Ga P. O.
Clinch County, Georgia.
L. C. Matton

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

PERSONALLY appears L. C. Matton of Clinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 1st day of January 1853; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a private in Company G, of 5 th Regiment of Cavalry Volunteers Robison's Brigade; that whilst engaged in such military service at the battle of Saltville in the State of Virginia, on the second day of October 1864, he was wounded as follows: on the left hand by a minnie ball which caused the loss of the little finger and the first joint of the next passing through the hand longthwise breaking the metacarpus bone to the little finger into several pieces.

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

Sworn to and subscribed before me, this, the 3rd day of April 1893. L. C. Matton

J. C. Kirkland Ex. J. P.

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,
Clinch County.

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

I further certify that J. G. Kirkland before whom the foregoing affidavits were made and power of attorney was signed, is a Justice of the Peace of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 3rd day of April 1893.

George Cornelius
Ordinary Clinch County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this the 5th day of March 1894.

L. C. Mattox [L. S.]

Executed in the presence of us
H. C. Mattox
George Cornelius Ordinary

DIRECTIONS.

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

Mattox, L. C.
Clinch Co.

(For Those Already Enrolled.)

No. 552

Soldier's Pension.

1894.

Name L. C. Mattox
County Clinch
Disability Loss Fingers
Amount, $ 10
8/31 1894.

W. H. HARRISON,
Secretary Executive Department.

WARRANT HANDED TO
W. A. Wright

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

KNOW ALL MEN BY THESE PRESENTS, That I, L. C. Mattox of Clinch County, State of Georgia, do hereby appoint W. A. Wright Comp Genl of Atlanta Ga my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate States (or of this State) as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 28th day of January 1895. L. C. Mattox [L. S.]

Executed in presence of us
C. H. Smith.
George Cornelius Ordinary

DIRECTIONS.

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

L. C. Mattox

Mattox, L. C.
Clinch Co.

(For Those Already Enrolled.)

No. 3229

SOLDIER'S PENSION.

1895.

Name L. C. Mattox
County Clinch
Disability Mines Fingers
Amount, $ 10.00
3/20 1895.

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO
Att

Geo. W. Harrison, State Printer, Atlanta.

No Data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Clinch County. }

PERSONALLY appears L. C. Mattox of Clinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 1st day of January 1883; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a private in Company G, of 5th Regiment of Cavalry Volunteers Robison's Brigade; that whilst engaged in such military service at the battle of Sattville in the State of Virginia, on the 2nd day of October 1864, he was wounded as follows: In the hand by a ball causing the loss of the little finger and the first joint of the next

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1894. I have heretofore been allowed a pension of [illegible] dollars, for the year 1893

Sworn to and subscribed before me, this, the 5th day of March 1894. } L. C. Mattox

[illegible] Ordinary

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

STATE OF GEORGIA, }
[illegible] County. }

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

Given under my official signature and seal, this 5th day of March 1894.

Affix your seal here.

[illegible] Ordinary Clinch County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Clinch County. }

Personally appears L. C. Mattox of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 1st day of January 1883; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a private in Company G, of 5th Regiment of Cavalry Volunteers, Robison's Brigade; that whilst engaged in such military service at the battle of Sattville in the State of Virginia, on the 2nd day of October 1864, he was wounded as follows: In the hand by a ball causing the loss of the little finger and to the 1st joint of the next finger

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

Sworn to and subscribed before me, this, the 28th day of January 1895. } L. C. Mattox

George Lowrimore Ordinary

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

STATE OF GEORGIA, }
Clinch County. }

I, George Lowrimore Ordinary of said County, do certify that I am well acquainted with L. C. Mattox 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 28th day of January 1895.

Affix your seal here.

George Lowrimore Ordinary Clinch County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, L. C. Mattox hereby authorize W. A. Wright of Atlanta to receive and receipt for the pension paid hereon and request that he remit same to L. C. Mattox by Express at Homerville.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 4th day of February 1896.

L. C. Mattox [L. S.]

Executed in presence of us
S. R. Kirton.
George Cornelius
Ordinary

Mattox L. C.
Clinch Co.
ACT OF 24 OCT., 1887.
(For Those Already Enrolled.)
Cy 5 Corp No. 727

SOLDIER'S PENSION.
1896.

Name L. C. Mattox
County Clinch
Disability 2 Fingers ~~[illegible]~~ gone
Amount, $10
2/26 1896

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO
Atty

Geo. W. Harrison, State Printer, Atlanta.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, L. C. Mattox hereby authorize W. A. Wright of Atlanta to receive and receipt for the pension paid hereon and request that he remit same to me by express at Homerville.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 4th day of January 1897.

L. C. Mattox [L. S.]

Executed in presence of
W. K. Findley
George Cornelius
Ordinary

Mattox L. C.
Clinch Co.
ACT OF 24 OCT., 1887.
(For Those Already Enrolled.)
Cy 5 Corp No. 1488

INVALID
SOLDIER'S PENSION.
1897.

Name L. C. Mattox
County Clinch
Disability Wounded in hand
Amount, $10
4/22 1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
W. A. W.

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears L. C. Matton of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 1st day of January 1853; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a private in Company G, of 5th Regiment of Cavalry Volunteers, Rainsaw's Brigade; that whilst engaged in such military service in the State of Virginia, on the 2nd day of October 1864, he was wounded, injured or diseased as follows:
in the left hand by a minnie ball destroying the little finger and the first joint of the next finger.

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

Sworn to and subscribed before me, this, the 4th day of February 1896. } L. C. Matton

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

STATE OF GEORGIA,
Clinch County.

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

Given under my official signature and seal, this 4th day of February 1896.

Affix your seal here.

George Cornelius
Ordinary Clinch County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears L. C. Matton of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the first day of January 1853; that he enlisted in the military service of the Confederate States (or of the State of Engin) during the war between the States, and served as a private in Company G, of 5th Regiment of Cavalry Volunteers, Robisons's Brigade; that whilst engaged in such military service in the State of Virginia, on the 2nd day of October 1864, he was wounded, injured or diseased of follows:
wounded in the left hand by a ball causing the loss of the little finger and the first joint of the next finger, going through the hand to the wrist breaking up the metacarpal bone coming out at the wrist.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1897. I have heretofore under said law as a resident of Clinch county been allowed an invalid pension of ten Dollars, for the year 1895.

Sworn to and subscribed before me, this, the 4th day of January 1897. } L. C. Matton
POST OFFICE Homerville

George Cornelius Ordinary

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

STATE OF GEORGIA,
Clinch County.

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

Given under my official signature and seal, this 4th day of January 1897.

Affix your seal here.

George Cornelius
Ordinary Clinch County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, L. C. Matton hereby authorize W. A. Right Comp. Genl of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to L. C. Matto by express at Homerville

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 2nd day of February 1898.

L. C. Matton [L. S.]

Executed in presence of
L. C. Matton
J. C. Kirkland
Geo. Cornelius
Ordinary

Matton, L. C.
or Mullon
Clinch Co

ACT OF ~~24 OCT. 1890~~
(For Those Already Enrolled.)

No. 1835

INVALID
SOLDIER'S PENSION.
1898.

Name L. C. Matton
County Clinch
Disability 2 fingers lost
Amount, $ 10.00
2/15 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
W. A. R.

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

No data

Audited May 28 1889.
Wm A Wright
COMPTROLLER GENERAL.

Clinch

Maimed Soldiers.

Voucher No. 2260
Amount, $ 10
Paid to L. C. Matton
For Loss of 2 fingers.
May 18 1889.

Included in Warrant No.
issued to Treasurer.
No Invention 1889.

WARRANT CLERK.

W. J. Campbell, State Printer, Constitution Job Office.

W. A. R.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
_____ **County.**

Personally appears L. C. Mattox of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 10th day of January 1853; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a private in Company G, of 5th Regiment of G Cavalry Volunteers, Robison's Brigade; that whilst engaged in such military service in the State of Virginia, on the 2nd day of October 1864, he was wounded, injured or diseased as follows:

in the left hand by ball loosing the little finger and the one next to it.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1898. I have heretofore under said law as a resident of Clinch county been allowed an invalid pension of 10 Dollars, for the year 1897.

Sworn to and subscribed before me, this, the 2nd day of February 1898. L C Mattox
POST-OFFICE Homerville Ga

George Cornelius
Ordinary

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

STATE OF GEORGIA,
Clinch **County.**

I, George Cornelius Ordinary of said County, do certify that I am well acquainted with L C Mattox 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 January 1898.

Affix your seal here.

George Cornelius
Ordinary Clinch County.

No. 2260

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. Atlanta, Ga May 18. 1889.

Mr L C Mattox of the County of Clinch having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Act, Dec. 24, 1888, and the same having been allowed for Loss of 2 fingers

He is entitled to receive the sum of Ten & 00/ Dollars for such disability, the same being the allowance due for the year ending October, 24, 1889

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

TREASURER'S OFFICE PAID STATE OF GEORGIA

J B Gordon
GOVERNOR.

By the Governor
W H Harrison
CLERK EXECUTIVE DEPARTMENT.

10.

RECEIVED OF STATE TREASURER, R U HARDEMAN,
Ten & 00/ Dollars,
per above voucher, this 18 of May 1889.

L C Mattox
W A Wright

Audited Mch. 12 1890

Wm A Wright

COMPTROLLER GENERAL.

Clinch

Maimed Soldiers.

Voucher No. 2428

Amount $ 10.00

Paid to L C Matton

For Loss of 2 fingers

Mch 10th 1890

Included in warrant No.

issued to Treasurer.

By [illegible] 18

[illegible]

WARRANT CLERK.

W. A. Campbell, State Printer, Constitution Job Office.

W. A. Wright

AUDITED

Audited MAR 17 1891 1891.

Wm A Wright

COMPTROLLER GENERAL.

Matton, L. C.

Clinch

1891.

Maimed Soldiers.

Voucher No. 2696

Amount $ 10

Paid to L C Matton

For Loss of 2 fingers

Mch 17 1891.

Included in warrant No.

issued to Treasurer,

1891.

WARRANT-CLERK.

Geo. W. Harrison, State Printer, Atlanta.

W. A. Wright

No. 2438

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. } Atlanta, Ga., Mch 10th 1890

Mr. L C Mattox of the County of Clinch having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Act, approved, Dec. 24, 1888, and the same having been examined and allowed for Loss of 2 fingers

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

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

J B Gordon
GOVERNOR.

TREASURER'S OFFICE PAID STATE OF GEORGIA

By the Governor,
W H Harrison
CLERK EXECUTIVE DEPARTMENT.

$10.00

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Ten Dollars,

per above voucher, this 10th of Mch 1890

L C Mattox
W A W

1891.
No. 2696

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. } Atlanta, Ga. Mch 17 1891.

Mr. L C Matton of the County of Clinch having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Acts approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for Loss of 2 fingers

He is entitled to receive the sum of Ten Dollars for such disability, the same being the allowance due for the year ending October 24, 1891.

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

TREASURER'S OFFICE PAID STATE OF GEORGIA

W J Northen
GOVERNOR.

By the Governor,
W H Hamson
SEC'Y EXECUTIVE DEPARTMENT.

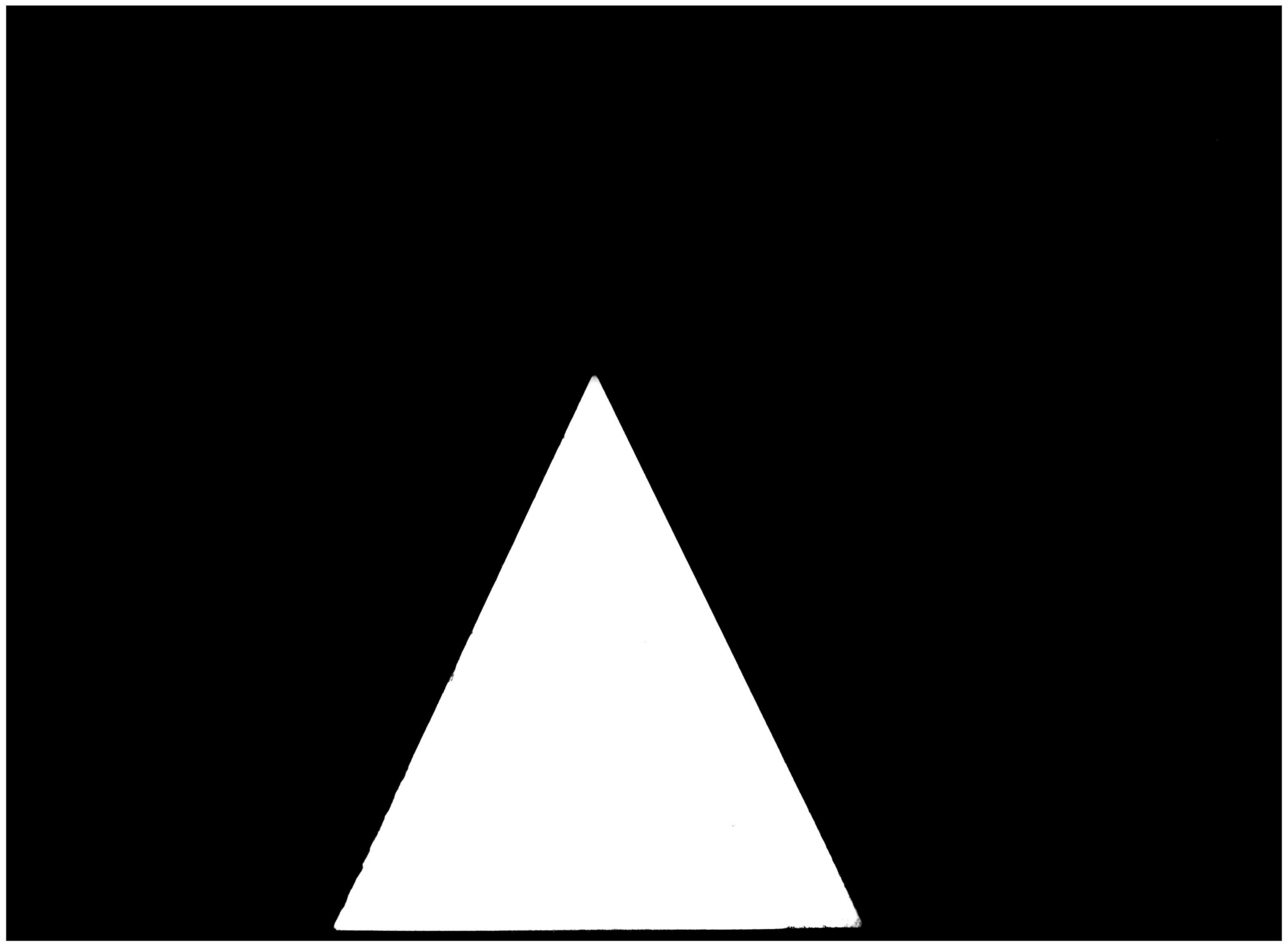
$10

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

Ten 00/100 Dollars,

per above voucher, this 17 of Mch 1891.

L C Mattox
W A W



Clinch Co.

Oct. 1914

No.

Confederate Soldier's Application.

UNDER ACT 1910.

County Clinch

Name W. F. Miley

Company H. 4th Ga.

Regiment 4th Ga. Cavalry

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

9/8/1913

Miley, W. F.
Clinch Co.
Co. [illegible] Regt.
No. [illegible]

Confederate
Soldier's Application
UNDER ACT 1910.

County: Clinch
Name: W. F. Miley
Company: A
Regiment: 4th Ga. Cavy.
Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

9/8/13

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,
Clinch County.

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

1. What is your name and where do you reside? (Give County and Post-office) W. F. Miley Clinch County Georgia Homerville Rt. 1 Box 28
2. How long and since when have you been a continuous resident citizen of this State? All My Life
3. Did you enlist in the Army of the Confederate States or of the Organised Militia of this State from 1861 to 1865? Yes
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) Feb 1st 1862 at Multon Ga. Cavalry Co. A 4th Ga Cavalry
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) Until Close of War I was wounded at Jonesboro Ga
6. When and where was your Company and Regiment surrendered or discharged from the Service? I was Discharged at Home near Ga June 1865
7. Were you actually present with your Command when it was surrendered or discharged? I was
8. If you were not actually present, state specifically and clearly where you were I was wounded in August 31st 1864 at Jonesboro Ga and Carried to the Hospital at Macon Ga
   a. Where was your Command when you left it? At Jonesboro Ga Aug 31st 1864 I was at Charley Ville Ga with Lt Gen A. P. Stewart Command
   b. When did you leave the Command? I was wounded and got leave of absence
   c. For what cause did you leave? I was wounded.
   d. By whose authority did you leave? By Surgeon in Charge
   e. For how long was your leave granted? In what way? Verbal for 60 days was granted from Gen Lee & Gen
   f. Why did you not return to your Command after leave expired? I did
   g. In what way were you prevented? —
   h. What effort did you make to return? —
   i. Were you captured during the war? —
   j. If so, when, and where? In what prison were you held and when were you released?
9. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4 Nov. 1908? (Make list by items and value.) All personal property Real and Otherwise this county with Improvements all amounting to 1600 Dollars
10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov., 1908. To whom and for what price? I have disposed of no property all my property remains as it was except I have sold a part of
11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife, and its cash value? (Make itemised list). Real Estate 600 Personal Property 1000
12. What annual or monthly income or earnings of yourself and wife and the source derived have you? None I am now living on My Farm
13. Are you drawing a pension of any amount from this State or the United States? Not
14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? None

Sworn to and subscribed before me, this the 25th day of April 1913

W. F. Miley

J. E. Lamar Ordinary,
of Clinch County.

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,
Elbert County.

W J Harwell of said State and County is hereby presented as a witness in support of the application of W J Mabry 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? W J Harwell in Elbert County Georgia

2. How long and since when have you known W J Mabry the applicant? Since the year 1863.

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 Elbert County Ga. I have known him since 1865 in this State all the time

4. When, where and in what Company and Regiment did W J Mabry enlist during war from 1861 to 1865? (Give date and place). In Elbert County in Co H 4th Ga Cavalry

5. How did you obtain your information of this Service? I was a Lieut in Co H 4th Ga Cavalry in 1863 and I found him there

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date). He served as a Private in April 1865

7. When and where was his Command surrendered or discharged (give date and place). at Abbeville in April 1865 and I think he went to Thomasville and was paroled

8. Were you personally present at the Surrender? Yes.

9. If not, where were you and how came you there? Was there

10. Was the applicant personally present with his Command at surrender? I think not

11. If not where was he and how came him there? I think he was sent out from Abbeville in August 1865 and I left my self

12. When did he leave his Command? Here in August 1865 Where was his Command when he left it? Here in Elbert County Ga for what cause did he leave? He was sent out

By whose authority did he leave and how long was he granted leave? How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically). I was a Member of the Same Co. & Regt

13. In what way was he prevented from returning to his Command? Sent by

How do you know?

14. What effort did he make to return to his Command and how do you know? Went to

15. Was applicant captured as a prisoner? Not 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 April 1913. W J Harwell

J I Dorsey Ordinary,
of Elbert County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,
Elbert County.

Personally before the undersigned C H Smith & A J Fields who on oath state that they are freeholders residing in said County and we know W J Mabry 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 values.)

150 acres of Land Value at about $600 in Elbert County Personal Property Such as Hogs Cattle Horses &c $99 in Elbert County

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov 1908? (State it fully by items). In 1908 he had about $1000 worth of Land which he has sold off from time to time for Support & Relief Some of the Land he still owns

2. When and to whom was it sold or given for?

3. What was the price paid or stated to be paid? Don't Know

4. What relation is the party to applicant? None Whatever

5. What disposition was made of the proceeds of the sale? Don't Know

6. Was the disposition of this property made in good faith and full value? Suppose So or was it made to obtain a pension? No

Sworn to and subscribed before me, this the 4 day of Sept 1913. C H Smith A J Fields.

J I Dorsey Ordinary,
of Elbert County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Elbert County.

I, J. I. Dorsey Ordinary of said County, certify that I know the applicant for Pension to the person he represents himself to be and resides in said County. That I also know W H Harwell & W J Mabry the witness swearing to the service and C H Smith & A J Fields 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 Elbert shows that W J Mabry and wife value for tax is in 1908 $ 1000 for 1909 $ 1000 for 1910 $ 1000 1911-1200 1912-1200

Sworn under my hand and official seal this 5 day of September 1913.

J I Dorsey Ordinary,
of Elbert County.

NOTES 1. [illegible]

J. T. Dame Ordinary,
of Clinch County.

Fruitland Ga 8/12/13
Mr. J. T. Dame Homerville Ga
Dear Mr. Dame I here with
Send your affidavit of W.
G. Miley to accopony my
pertision if this is a nuff.
Pleas let me know by
return mail. nerly. Every
person that was with me is
dead as far as I can Lern
about them I Send you
what I have got Pleas writ
me at once your True Frind
as Ever W. F. Miley

Georgia } Personally came W. G. Miley
Lawndes County } who being duly Sworn.
Saith that he nowes W. F. Miley and know
he Started Back to his command. and
was cutoff by Shermand coming thru
Georgia. and was Stoped in Savannah
and there Sent to Sleyhope 9 miles below
- Savannah, this was the first of
november 1864. he Remaind there untel
ahant the faul of Savannah. was
ordered to Savannah. and from there
he was ordered to Hardyville S. C.
there Remained untell Lee: Serrender
the facts Stated in the foregoing affidavit
are true. Sworn to before me.
this 9 Aug 1913.
W. G. Miley

Witness
B. F. Miley
N. [illegible]

Georgia

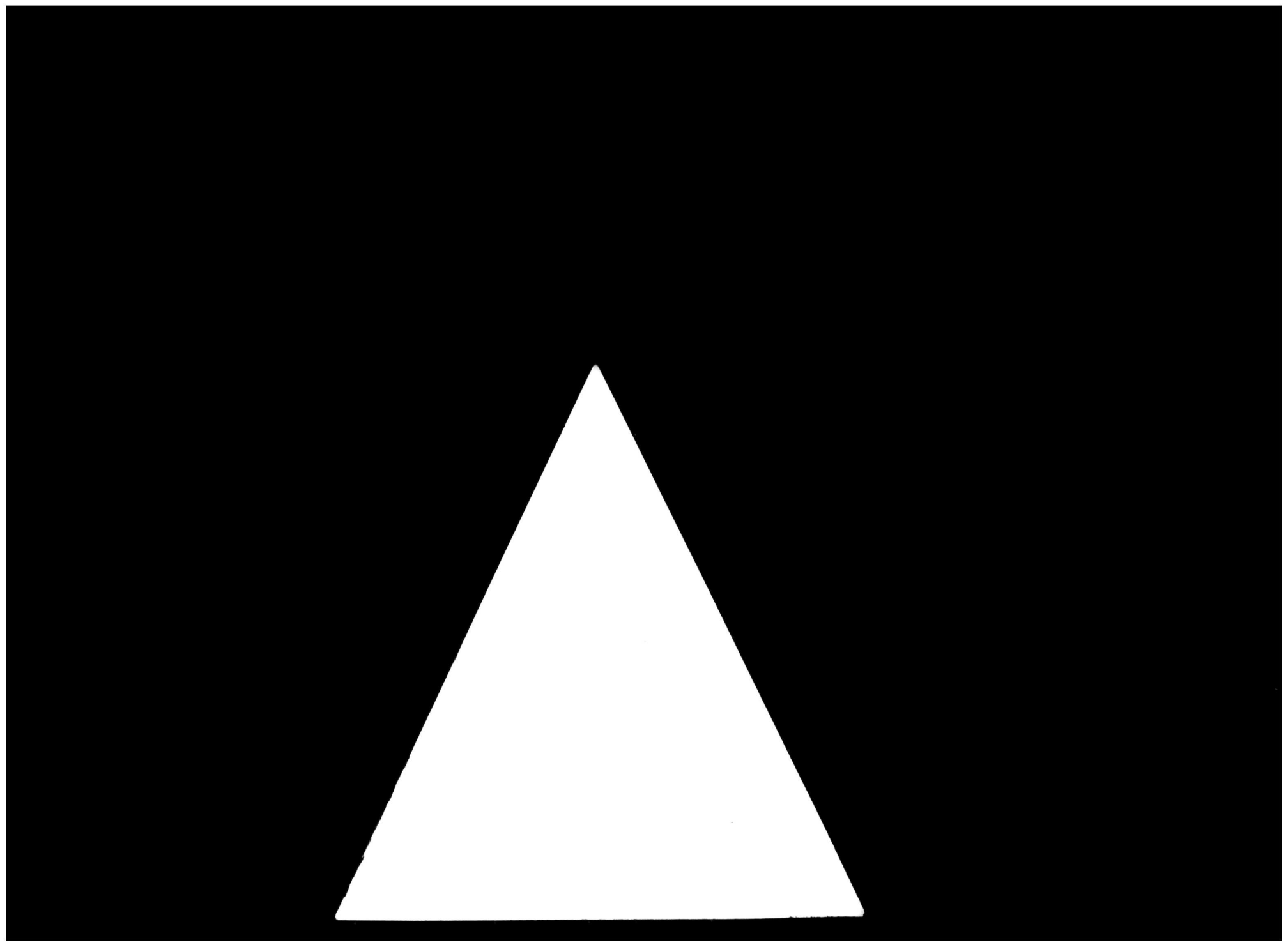
STATE OF GEORGIA
OFFICE OF
The Ordinary, Clayton County
W. M. WRIGHT,
Ordinary and Attorney

JONESBORO, GA. Oct 13 1913

Judge. John. W. Lindsey
Atlanta Ga.

Dear Judge

In [redacted] amended applic-
ation for G E Waddy. We are very anxious
to get him on the List. He gave in his
property too high. Even if it was worth
30 $ acre in 1908. It is not worth
now. I have selected men who
know it. honest & truthful as you see.
are Nelson present Representative Al
Blalock former Senator. etc
This is Mr Chatfields Comrade & Capt
J.W. English says he was at last Roll Call.
We regret to see him turned down
with 40 acres because he is honest
while some others dodge the Tax Receiver
& get in. do what the law &
facts authorizes. Very Truly Your Friend
W M Wright



APPLICATION FOR

Artificial Leg

FOR CONFEDERATE SOLDIER.

County.....

Amount $150

Date of Warrant.....

Paid.....

STATE OF GEORGIA.

Clinch County.

Personally appeared before me Jacob Minshew of the county of Clinch, State of Georgia, who, being duly sworn, deposes and says that he was on the 20th day of September, 1879, a bona fide resident of this State; that he enlisted in the military service of the Confederate States, or of this State, as a Private in Company G 50th Regiment of Georgia Volunteers that while engaged in such military service, to-wit: at the battle or engagement of Gettysburg in the State of Pennsylvania on the 2 day of July, 1863, he was wounded in the Knee, and that the same was amputated above the Knee that he has not received the payment allowed him for such limb under an Act entitled an Act to carry into effect the last clause of Paragraph 1, Section 1, Article 7 of the Constitution of 1877, approved September 20th, 1879; that he has Not supplied himself with an artificial Leg; or that, not having done so, he prefers to supply himself with an artificial Leg.

Sworn to and subscribed before me this 15th day of November, 1879
C. A. Smith Clk S.C.

Jacob Minshew

NOTE.—The above affidavit must be made before some officer authorized to administer oaths, a Judge of the Superior or County Court, Justice of the Peace, Clerk of the Superior Court, or Ordinary.

COMMISSIONED OFFICER'S AFFIDAVIT.

STATE OF GEORGIA.

County.

Personally came before me.....

the county of....., State of Georgia, who, being duly sworn, depose and says that he was.....in Company.....Regiment and that....., the above deponent, was a..... in said Company, and that this deponent knows that said,..... lost a .....in the military service as said in the above affidavit.

Sworn to and subscribed before me this.....

.....day of.....18.....

.....

NOTE.—If the affidavit of the commissioned officer is not obtainable, the following affidavit of three responsible citizens must be furnished.

AN ACT

To carry into effect the last clause of Paragraph 1, Section 1, Article 7 of the Constitu ion of 1877.

SECTION I. Be it enacted by the General Assembly of the State of Georgia, That any person now a *bona fide* resident of this State, who enlisted in the military service of the Confederate States, or of this State, who, while engaged in said military service, lost a limb or limbs, may furnish to the Governor of this State proof that such applicant has supplied himself with such needful artificial limb or limbs, and the Governor, on reception of such proof, is hereby authorized to draw his warrant on the Treasurer of this State in favor of such applicant for either amount hereinafter mentioned, to-wit: For a leg extending above the knee, one hundred dollars; for a leg not extending above the knee, seventy-five dollars; for an arm extending above the elbow, sixty dollars, for an arm not extending above the elbow, forty dollars: Provided, the said amounts of money may be allowed to any one entitled to the benefits of this Act who may prefer to supply himself with the said artificial limb.

SEC. II. Be it further enacted by the said authority, That such application shall contain proof of such applicants being entitled to the benefits of this Act, and shall further state whether arm or leg has been supplied. If an arm, whether extending above the elbow or not; if a leg, whether extending above the knee or not, and the Governor shall decide the sufficiency of the proof submitted.

SEC. III. Be it further enacted by the said authority, That no applicant shall receive the sum allowed under this Act oftener than once in five years.

SEC. IV. Be it further enacted by the authority aforesaid, That all laws and parts of laws in conflict with this Act be and the same are hereby repealed.

HENRY R. GOETCHIUS,
Secretary House Representatives.
WM. A. HARRIS,
Secretary Senate.
Approved, September 10th, 1879.

A. O. BACON,
Speaker House Representatives.
RUFUS E. LESTER,
President Senate.

ALFRED H. COLQUITT, *Governor.*

STATE OF GEORGIA,
Clinch County.

Personally came K. C. Cowart Isham Roberts and Geo. W. Newburn

who, being duly sworn, depose and say they are acquainted with Jacob Minshew and know that he lost a Leg in the military service during the late war; that said Leg was amputated above the Knee; that he is a bona fide citizen of this State, and we are well satisfied that the facts stated by him in the above affidavit are true.

Sworn to and subscribed before me this 15th day of Nov. 1879.
C. A. Smith Clk SC

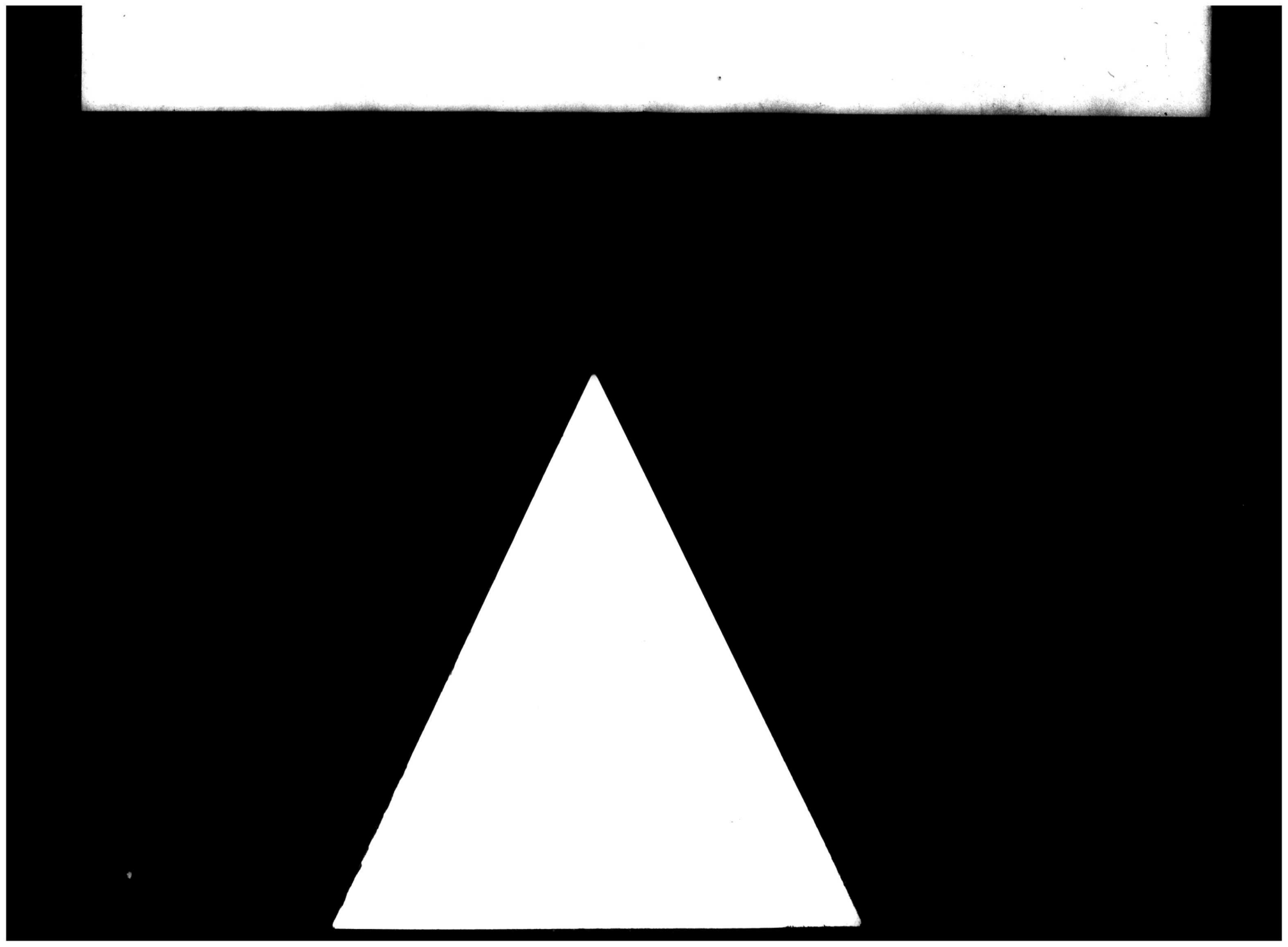
K. C. Cowart
Isham Roberts
G. W. Newburn

STATE OF GEORGIA,
Clinch County,

I, Moses Tomlinson, Ordinary of said county, do certify that I am well acquainted with Jacob Minshew the applicant for a Leg, and am well satisfied that the facts stated by him in the foregoing affidavit are true, and that I am well acquainted with K. C. Cowart Isham Roberts and G. W. Newburn the citizens who make their affidavit, that they are respectable citizens of this county, and that the facts tated by them are true.

Given under my hand and official seal, this 15th day of November 1879

Moses Tomlinson
Ordinary Clinch Co



Ordinary's Certificate

STATE OF GEORGIA,

Clinch COUNTY.

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

Sworn under my hand and official seal of office this 26th day of Oct. 1919.

(SEAL) W. V. Musgrove 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. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

No. Clinch Co

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County Clinch

Name Mrs E. A. Moore

Widow of W. M. Moore

Company Co K 50th Ga Reg

Regiment

Approved

ENTERED ROSTER OFFICE

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-28-1919

End mtg. 41 62

Ordinary's Certificate

STATE OF GEORGIA,
Clinch COUNTY.

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

Sworn under my hand and official seal of office this 26th day of Oct. 1919.

(SEAL) W. V. Musgrove 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. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

No. Clinch 1477

Widow's Pension
Under Act 1910—as Amended by Act of 1919

County Clinch

Name Mrs. E. A. Moore

Widow of W. M. Moore

Company C, 6th Ga. Cav.

Regiment

Approved

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

10-28-1919

Ent. mar. 4, 62.
Ordered Dis. 6, 65.
Paroled 4, 29, 65.

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

Questions for Applicant

STATE OF GEORGIA,
Clinch COUNTY.

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

1. What is your name, and where do you reside? Mrs Eliza Moore Clinch Co Ga
2. How long and since when have you been a continuing resident of the State of Georgia? All my Life
3. When, where and to whom were you married? Oct 2nd 1859. Ben Brooks County Georgia. To W. M. Moore
   a. Have you married since the death of first and soldier husband? no
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) March 1862 Brooks County Va. Co K 50 Ga Regiment
5. When and where did the commands of your husband surrender or discharge from the army? At Appomattox C House Virginia was Captured a few days prior to Surrender by Gen Lee
6. Was your husband personally present at the time of the surrender or discharge of this command? He was captured by Enemy
7. If he was not present, state clearly where he was? He was Paroled
8. Where was his command when he left? He was Captured at Appomattox C House
   a. For what cause did he leave his command (Parole) died 20th from Wds
   b. By whose authority did he leave his command? Parole " " " "
   c. For how long was he granted leave of absence? " " " "
   e. What was his physical condition when he left his command? Very Bad
   f. What effort did he make to return to his command? Did not Leave
   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 Point Lookout. Released after Surrender
   j. When and where did your first husband die? 2nd Day Nov 1898 Clinch Co Ga
   k. Were you residing together when he died? Yes
   l If not, how long had you resided apart? —
   m. Are you now a widow? Yes
9. Have you or your husband heretofore been paid a pension by the State? no

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

Sworn to and subscribed before me this the 26th day of Oct 1919.

Mrs E A Moore

W. V. Musgrove Ordinary
of Clinch County.

(SEAL)

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA,
Lowndes COUNTY.

Personally before me comes B F Whitington 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? B F Whitington on Valdosta Lowndes County Georgia

2. How long and since when have you known Mrs Lizzie Moore applicant? widow of W R Moore deceased

3. How long and since when has she continuously resided in this State? (Give date.) Since 1862

4. When and to whom was she married? W R Moore How do you know? Was told so

5. How long and since when did you know W R Moore her husband? Since 1862 until his death

6. When and where did W R Moore the husband of applicant, die? In Clinch County Ga 1891 or 1892 Valdosta Ga

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? Did not live apart Were they divorced? Never Divorced

9. When, where and in what Company and Regiment did W R Moore enlist? In March 1862 in Brooks County Ga Co K 64th Ga Regt

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

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? From 1862 to 1865 was Wounded in Middle Georgia after Sherman left Savannah Ga on his March to the Sea

12. When and where did his Command surrender, and was discharged? At Thomasville Ga on Dec 24th 1864 Co was Ordered to Savannah Ga a few days before the Fed Surrendered at Appomattox

13. Were you personally present when it was surrendered? I was at Thomasville If not, where were you I was a Prisoner and how came you there? I was taken a Prisoner at Waynesboro Ga on Dec 4th 1864 and was sent to Thomasville Ga

14. Was the husband of applicant personally present at surrender? Yes If not where was he? He was present Co When, where and for what cause did he leave Command? (Give date.) He was wounded at Waynesboro Ga on Dec 4th 1864 By whose authority did he leave his Command? Did not leave And how long was he granted leave? How do you know all this? I was a Member of Co K 64th Ga Regt & Served in Company with him from 1862 until the Close of the War

15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command? He was a Prisoner at Point Lookout

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? He was a Prisoner in hands of Enemy

Sworn to and subscribed before me this the 15 day of Oct 1914 } B F Whittington

W D Falconbe Ordinary

of Lowndes County. }

(SEAL)

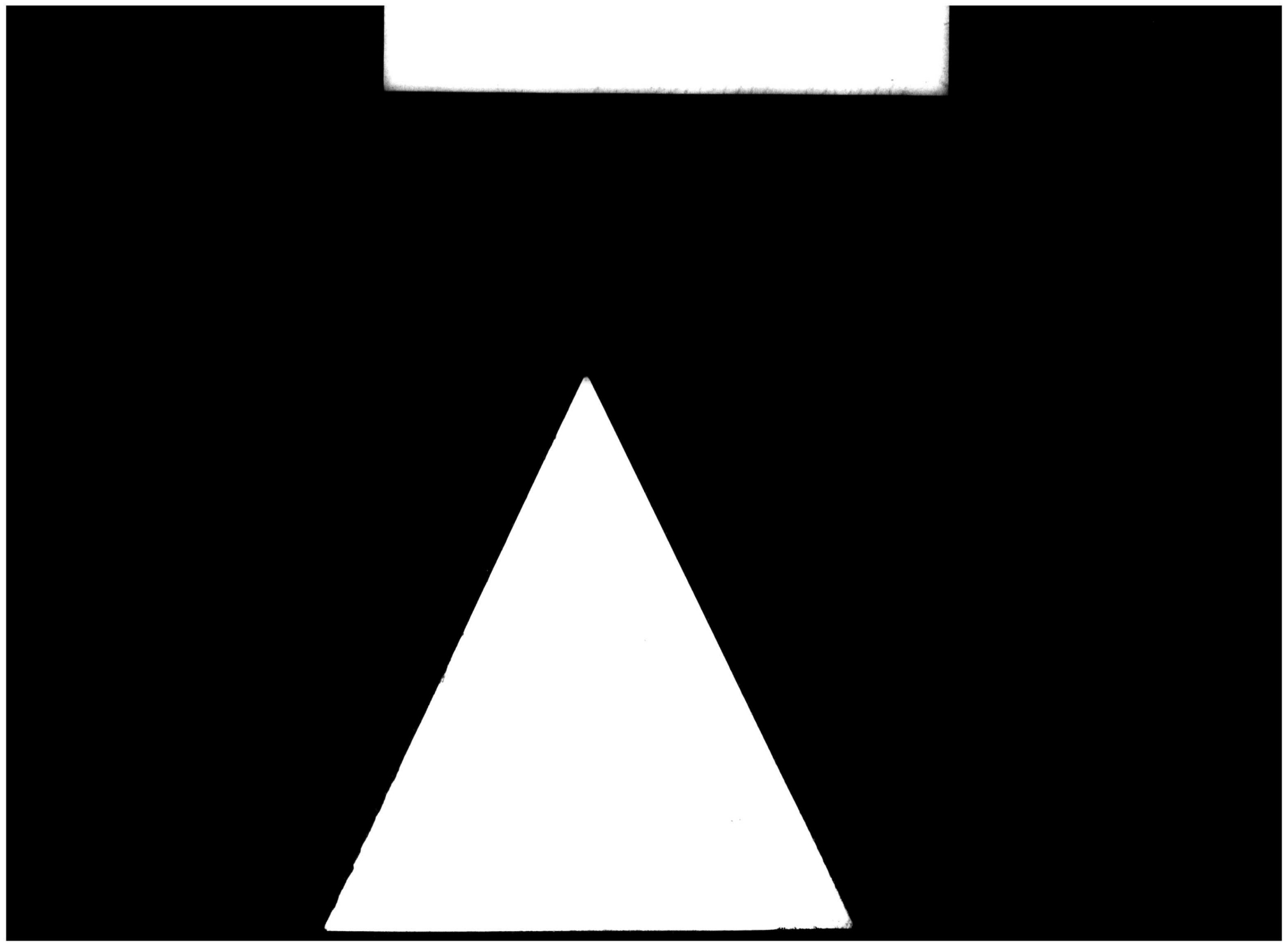
GEORGIA....LOWNDES COUNTY.

I, T.N.Holcomne, Ordinary of said County, do hereby certify that I know B.F.Whittington, the witness signing in the within application for Pension, that he is a bona fide resident of Lowndes County, Georgia, and was on the 4th day of November 1908; that he was duly sworn by me before signing the within affidavit, and that he is truthful, trustworthy, andhis statements are entitled to full faith and credit.

Sworn under my hand and official seal of office, this 26th day of Oct. 1919.

T N Holcombe

Ordinary, Lowndes County, Georgia.



POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, Narcissus M. Moore, hereby authorize W. A. Wright of Fulton Co. Ga. to receive and receipt for the pension paid hereon, and request that he remit same to W. T. Howell at Homeville Ga.

In Witness Whereof, I have hereunto set my hand and seal, this 23 day of January 1902.

Narcissus M. Moore [L. S.]
Cor. Mark

Executed in presence of
W. T. Howell

Moore, N. M. (Mrs)
Clinch, County

To Those Heretofore Paid.

1902.

No. 2794.

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO
Mrs. N. M. Moore
OF
Clinch County,

Widow of _____

Co. _____ Regiment _____

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
24 1902
AND HANDED TO
PP

GEO. W. HARRISON, STATE PRINTER, ATLANTA, GA.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Irwin County.

I, Mariana M. Moore, hereby authorize
W. A. Wright of Fulton Co Ga
to receive and receipt for the pension paid hereon, and request that he remit same to
W. T. Howell at Homerville Ga

In Witness Whereof, I have hereunto set my hand and seal, this 25
day of January 1902.

Mariana M. Moore [L. S.]

Executed in presence of
W. T. Howell

Moore, M. M. (Mrs)
Clinch, County

To Those Heretofore Paid.

1902.

No. 27294.

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO
Mrs. M. M. Moore
OF
Clinch County,

Widow of ____
Co. ____ Regiment ____

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
1902
AND HANDED TO

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, Narcissus M. Moore, hereby authorize W. A. Wright of Fulton Co. Ga. to receive and receipt for the pension paid hereon, and request that he remit same to W. T. Howell at Homeville Ga.

In Witness Whereof, I have hereunto set my hand and seal, this 23 day of January 1902.

Narcissus M. Moore [L. S.]
Cor. Howell

Executed in presence of
W. T. Howell

Moore, N. M. (mis)
Clinch, County

To Those Heretofore Paid.

1902.

No. 2794.

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO
Mrs. N. M. Moore
OF
Clinch County,

Widow of _____

Co. _____ Regiment _____

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

24 1902

AND HANDED TO

GEO. W. HARRISON, SUBS. PRINTER, ATLANTA, GA.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Clinch

PERSONALLY COMES Mrs. Narcissa M. Moore

who, being sworn, says on oath, that she is a bona fide resident of said County of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since 1845. That she is the Widow of Julius Moore who was a soldier in Company of the 26th Regiment of Patterson's Volunteers, that he enlisted in said regiment on or about the month of July 1863, and served in the Army up to 1863. That he lost his life on the day of 18 64 (*State here particulars of the husbands death, when, where and from what cause*) my husband was shot in the last battle in Va. and died in about 8 days

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18

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

Sworn to and subscribed before me, this 23 day of January 1902.
W. L. Howell Ordinary.

Narcissa M. Moore
her mark
Post-Office Homerville Ga

State of Georgia,
Clinch County.

I, W. L. Howell Ordinary of said County, certify that I am well acquainted with Mrs. Narcissa M. Moore, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 1st day of Jan 1845

Given under my official signature and seal, this the 23 day of January 1902.

Official Seal.

W. L. Howell
Ordinary of Clinch County.

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

This was granted under a transfer from Lowndes County. Jan 6 1902
W. L. Howell

Ordinary of [illegible] County.

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

This was granted under a transfer from Lowndes County. Jan 8 1902
W. L. Howell

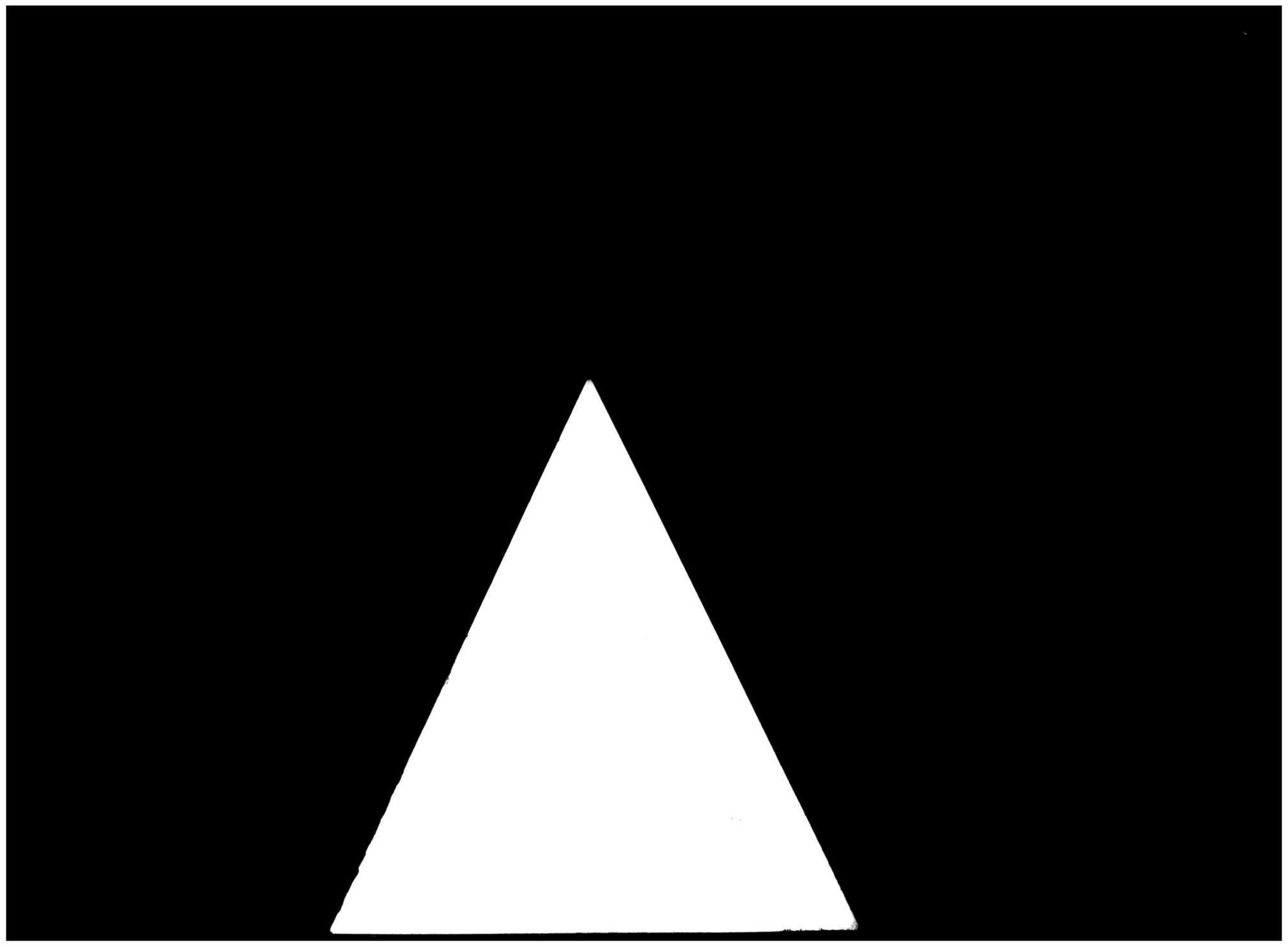
STATE OF GEORGIA
OFFICE OF
Court of Ordinary.
Lowndes County.

D. M. SMITH,
ORDINARY.

Valdosta, Ga. _____ 190__

Georgia Lowndes County.
This is to certify that Mrs Narcissa M. Moore drew a pension from Lowndes County for the year 1901. Given under my official hand and seal of office This Jany 22-1902.

D. M. Smith
Ordinary.
L. C. Ga



Morgan, Jacob
#695-
Morgan, Jacob
No. 442 Clinch Co.

APPLICATION FOR

Am

FOR CONFEDERATE SOLDIER.

Jacob Morgan

County Clinch

Limb Am above elbow

Amount $60

Date of Warrant Dec 1st /79

A. B. 50th Regt. Ga. Inf

Page

Clinch
1879

E 1952

Morgan, Jacob
#695
Morgan, Jacob
No. 442 Clinch Co.

APPLICATION FOR

Arm

For Confederate Soldier

Jacob Morgan

County Clinch

Limb Arm above elbow

Amount $60

Date of Warrant Dec 15 '79

A.B. 50th Pvt Ga Inf

Page

Clinch
1879

6195

STATE OF GEORGIA.

Clinch County.

Personally appeared before me Jacob Morgan of the county of Clinch, State of Georgia, who, being duly sworn, deposes and says that he was on the 20th day of September, 1879, a bona fide resident of this State; that he enlisted in the military service of the Confederate States, or of this State, as a Private in Company "B" 50th Regiment of Georgia Volunteers that while engaged in such military service, to-wit: at the battle or engagement of Chancellorville in the State of Virginia on the Third day of May 1863, he was wounded in the Arm, and that the same was amputated above the elbow that he has not received the payment allowed him for such limb under an Act entitled an Act to carry into effect the last clause of Paragraph 1, Section 1, Article 7 of the Constitution of 1877, approved September 20th, 1879; that he has not supplied himself with an artificial Arm; or that, not having done so, he prefers to supply himself with an artificial Arm

Sworn to and subscribed before me this 24th day of Nov 1879

C. A. Smith ARSC

Jacob + Morgan
mark

NOTE.—The above affidavit must be made before some officer authorized to administer oaths, a Judge of the Superior or County Court, Justice of the Peace, Clerk of the Superior Court, or Ordinary.

COMMISSIONED OFFICER'S AFFIDAVIT.

STATE OF GEORGIA.

County.

Personally came before me ..... the county of ....., State of Georgia, who, being duly sworn, depose and says that he was ..... in Company ..... Regiment and that ....., the above deponent, was a ..... in said Company, and that this deponent knows that said, ... lost a ..... in the military service as said in the above affidavit.

Sworn to and subscribed before me this .....

..... day of ..... 18.....

.....

NOTE.—If the affidavit of the commissioned officer is not obtainable, the following affidavit of three responsible citizens must be furnished.

AN ACT

To carry into effect the last clause of Paragraph 1, Section 1, Article 7 of the Constitution of 1877.

SECTION I. Be it enacted by the General Assembly of the State of Georgia, That any person now a *bona fide* resident of this State, who enlisted in the military service of the Confederate States, or of this State, who, while engaged in said military service, lost a limb or limbs, may furnish to the Governor of this State proof that such applicant has supplied himself with such needful artificial limb or limbs, and the Governor, on reception of such proof, is hereby authorized to draw his warrant on the Treasurer of this State in favor of such applicant for either amount hereinafter mentioned, to-wit: For a leg extending above the knee, one hundred dollars; for a leg not extending above the knee seventy-five dollars; for an arm extending above the elbow, sixty dollars, for an arm not extending above the elbow, forty dollars: Provided, the said amounts of money may be allowed to any one entitled to the benefits of this Act who may prefer to supply himself with the said artificial limb.

SEC. II. Be it further enacted by the said authority, That such application shall contain proof of such applicants being entitled to the benefits of this Act, and shall further state whether arm or leg has been supplied. If an arm, whether extending above the elbow or not; if a leg, whether extending above the knee or not, and the Governor shall decide the sufficiency of the proof submitted.

SEC. III. Be it further enacted by the said authority, That no applicant shall receive the sum allowed under this Act oftener than once in five years.

SEC. IV. Be it further enacted by the authority aforesaid, That all laws and parts of laws in conflict with this Act be and the same are hereby repealed.

HENRY R. GOETCHIUS,
Secretary House Representatives.
WM. A. HARRIS,
Secretary Senate.
Approved, September 10th, 1879.

A. O. BACON,
Speaker House Representatives.
RUFUS E. LESTER,
President Senate.

ALFRED H. COLQUITT, *Governor.*

STATE OF GEORGIA,
Clinch County.

Personally came John T. Morgan Jacob Minshew + Simon P. White who, being duly sworn, depose and say they are acquainted with Jacob Morgan and know that he lost an arm in the military service during the late war; that said arm was amputated above the Elbow; that he is a bona fide citizen of this State, and we are well satisfied that the facts stated by him in the above affidavit are true.

Sworn to and subscribed before me this 24th day of Nov 1879

John T. Morgan
Jacob Minshew
Simon P. White

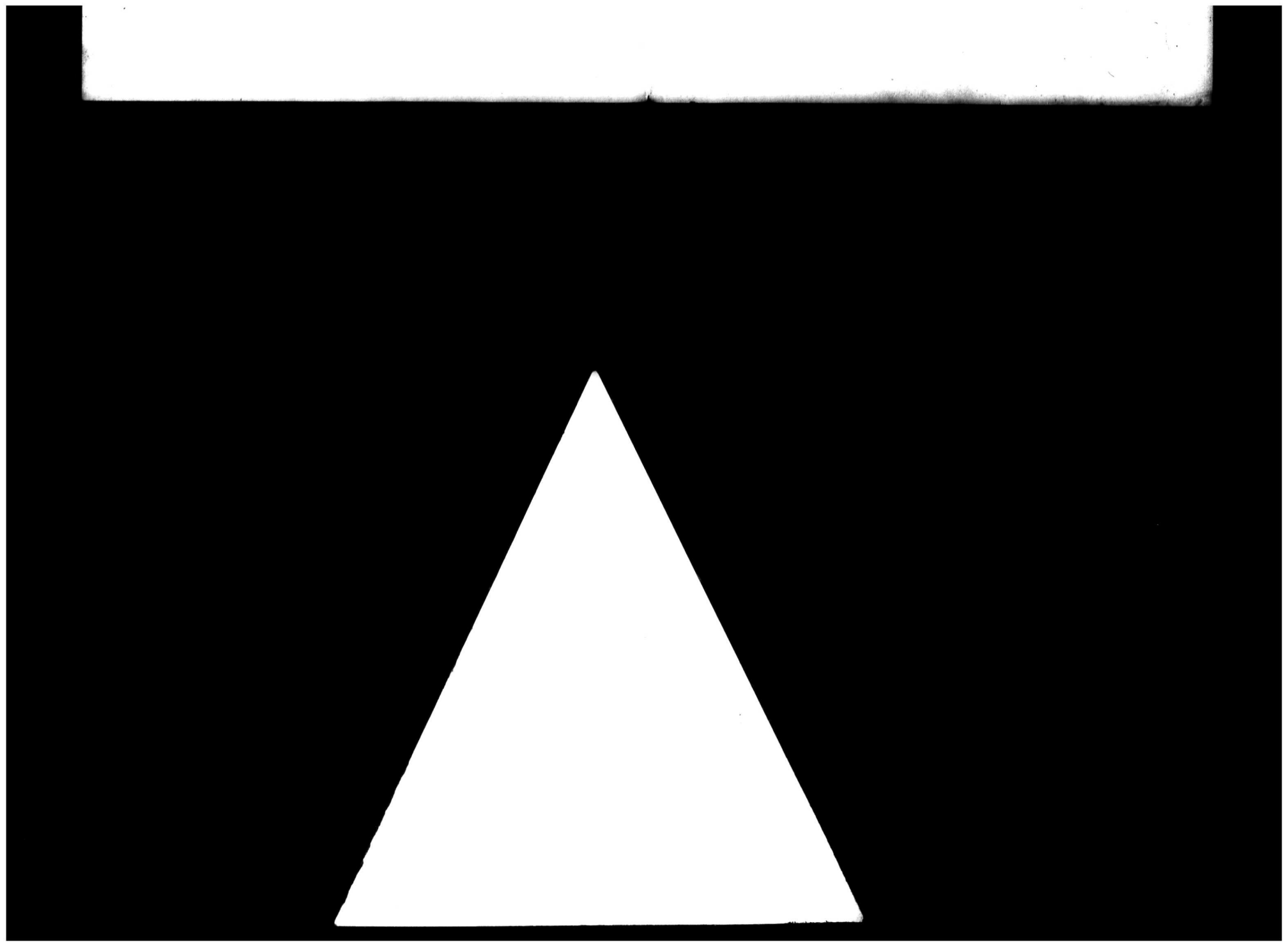
C. A. Smith Clerk SC

STATE OF GEORGIA,
Clinch County,

I, Moses Tomlinson, Ordinary of Clinch county, do certify that I am well acquainted with Jacob Morgan the applicant for an arm, and am well satisfied that the facts stated by him in the foregoing affidavit are true, and that I am well acquainted with John T. Morgan Jacob Minshew and Simon P. White the citizens who make their affidavit, that they are respectable citizens of this county, and that the facts tated by them are true.

Given under my hand and official seal, this 24th day of November 1879

Moses Tomlinson
Ordinary Clinch Co



Morgan M. J. [illegible]
Disapp'd

No. 1

INDIGENT PENSION.

1903.

Name M. J. Morgan

County Church

Co. K-6th Ga Regt.

Approved ..... 1903.

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.

9/22/03

Pension off
Oct 1 - 1903

This man sues to be the owner of taxable property - of value together with his minors Children to be. Can make a support - Disapp'd

J. W. Lindsey
Com of Pens

POWER OF ATTORNEY.

STATE OF GEORGIA,
Church County.

I, M. J. Morgan hereby authorize
S. C. Fortunately of Hammond Ga
to receive and receipt for the pension allowed and request that he remit same to me
at Winnsboro Ga by ad

Witness my hand and seal, this 7 day of Sept 1903.

M. J. Morgan [L. S.]

Executed in the presence of
D. M. Riberon

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, M. J. Morgan hereby authorize
A. C. Folsom of Homerville Ga.
to receive and receipt for the pension allowed and request that he remit same to me
at Waycross Ga. by OK

Witness my hand and seal, this 7 day of Sept 1903.

M. J. Morgan [L. S.]

Executed in the presence of
D. M. Ribron

Power of Att'y
Oct 1-03
This was sent to
the court House
by Folsom - with
papers
together with this
power of Attorney
for our work
as appointed Dr.
J. D. Lowery
Com of Pen

INDIGENT PENSION.
1903.

No.

Name M. J. Morgan
County Clinch
Co. Lt. 6th Ga. Regt.
Approved 1903

JOHN W. LINDSEY, Ordinary.

WARRANT HANDED TO

Ordinary will write Name of Applicant, Organization and Regiment as given in Affidavit above.

9/22/03

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,
Clinch COUNTY.

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

1. What is your name and where do you reside? (give State, County and post-office)
M. J. Morgan Ga Clinch Co. P.O. Waycross
2. How long and since when have you been a resident of this State? all my life
3. When and where were you born? Appling Co. Ga. Sept 2, 1839
4. When and where and in what company and regiment did you enlist or serve? March 1862 at Waynesville Ga. Co "A" 26th Ga. Regiment
5. How long did you remain in such company and regiment? about 18 months
6. When and where was your company and regiment surrendered and discharged? Appomattox Court House, April 9th 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? Home, Left command November 1863 had a substitute.
9. How much can you earn (gross) per annum by your own exertions or labor? about $85.00
10. What has been your occupation since 1865? Farming
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? age 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? about 2 yrs
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? Clinch Co. returns, 135 acres of land belonging to my children
16. How were you supported during the years 1899, 1900, 1901 and 1902? by daughters and help from my boys.
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? Cant tell as was supplied by my boys at home
18. What was your employment during 1898, 1899, 1901 and 1902? What pay did you receive in each year? Work for my children and help supported me
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? Yes. Mrs. Mary J. Morgan, Richard Morgan & Musician Regt. Mary Reynolds, Annie Jefferson, & Roger Morgan are of age. My wife is dead
20. Are you receiving any pension? If so, what amount and for what disability? No
21. Have you ever made an application for pension before? No
22. How many applications have you ever made and under what class? None

Every Question MUST be Answered.

Sworn to and subscribed before me this the ____ day of ____ 1903.

M. J. Morgan Applicant.

____ Ordinary,
of ____ County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Clinch COUNTY.

D. M. Riberon of said State and County, having been presented as a witness in support of the application of M. Z. Morgan 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? D. M. Riberon. Winegeors Clinch Co. Ga.
2. Are you acquainted with yes, the applicant; if so, how long have you known him? about 50 yrs.
3. Where does he reside, and how long and since when has he been a resident of this State? Winegeors Ga. was born in the State & has always lived here
4. When, where and in what company and regiment did he enlist, and how do you know? Co. "K" 26th Ga. Regiment. I was there
5. Were you a member of the same company and regiment? yes
6. How long did he perform regular military duty? about 18 months
7. When and where was his command surrendered? Appomattox Court House Va Aprile 1865
8. Were you present when it surrendered? yes
9. Was applicant present? No
10. If he was not present, where was he? at home

When did he leave his command? Nov. 1863 For what cause? hired a substitute

By what authority he left? Commanding officer How do you know all of this? I was there

11. What property, effects or income has the applicant? (Give your means of knowledge.) None I have never him
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? No
14. What is the applicant's occupation and physical condition? Tries to farm old and worn out
15. Is the applicant unable to support himself by labor of any sort, if so, why? yes too old and infirm
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? by his own labor and help from his boys
17. What portion of his support for these four years was derived from his own labor or income? about 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 and poor, besides being infirm he is dependent upon his children for support.
19. Who composes family? What property have they? Children's age and their earning capacity? He has no family except grown up children: he has no minor children at all
20. What interest have you in the recovery of a pension by this applicant? None

Sworn to and subscribed before me, this the 6 day of Oct 1903.

D. M. Riberon
Witness.

W. T. Howell Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Clinch COUNTY.

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

He suffers with nervous palpitation: he has piles: he has kidney troubles his condition is such that he could not earn a living by manual labor.

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

Sworn to and subscribed before me, this the 6 day of Oct 1903.

T. E. Pennington MD
H. R. Shippen MD

W. T. Howell Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch COUNTY.

I, W. T. Howell Ordinary, in and for said County, hereby certify that the applicant M. Z. Morgan resides in said County, and has been a bona fide resident of this State since the day of 1860 ~~189~~ and that the witnesses, viz.: D. M. Riberon 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 show that applicant returned for taxation in his name in 1899 $369 Dollars of property, and in 1900 " 363 Dollars of property, in 1901 1902 " 355 Dollars of property, in 1902 Dollars of property.

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

Witness my hand and seal of office, this 6 day of Oct 1903.

W. T. Howell Ordinary,
of Clinch 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, M. J. Morgan hereby authorize
W. A. Wiatt of Atlanta Ga
to receive and receipt for the pension allowed and request that he remit same to J. T. Davis
ordinary at Homerville by mail.

Witness my hand and seal, this 4th day of Sept 1909
M. J. Morgan (L. S.)

Executed in presence of
J. T. Davis

Morgan M. J.
Clinch Co
Ord. No. Jan 1910

INDIGENT PENSION

1909

Name M. J. Morgan
County Clinch
Co. K. 26 Ga. Regt
Approved 190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED T.

Ordinary will write name of applicant, Company and Regiment as here indicated above.

Chas. P. Byrd, State Printer, Atlanta.

7-22-09

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,
Clinch COUNTY.

M. J. Morgan of said State and County, desiring to avail himself of the Pension Act (Section 1384, Code), hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (Give State, County and Postoffice.) M. J. Morgan Homerville Ga
2. How long and since when have you been a resident of this State? I have 70 years old I have lived in Georgia
3. When and where were you born? Appling Co Ga 1838
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? Appomattox 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 Clinch Co Ga in 1863 later part May I was loud a sufferer home
9. How much can you earn (gross) per annum by your own exertions of labor? Not able
10. What has been your occupation since 1865? Mining as long as able
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty?" Age & poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind and when and where you lost your sight. Have been so I could not earn own living ten or 12 years

Every Question MUST Be Answered.

13. What property, real and personal, or income, do you possess, and its gross value? Got 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 except a small piece of land I sold I lived on it
15. In what County did you reside during those years, and what property did you then return for taxation? Clinch 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 the above act

Sworn to and subscribed before me this the 28 day of August 1909
J. T. Davis Ordinary,
of Clinch County.

M. J. Morgan
Applicant.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Clinch 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, deposes and answers as follows:

1. What is your name and where do you reside? D. M. Riberon
Clinch County Ga

2. Are you acquainted with I am, 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 Clinch County in State all his Life

4. When, where and in what company and regiment did he enlist, and how do you know?
March 1862 Co K 26 Ga Regiment I was with him

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? 9 of April 1865
at Appomatox C.H. 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? Later part 63 For what cause? by Putting

By what authority he left? in Substitute 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 non

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 support

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

14. What is the applicant's occupation and physical condition?
not good

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

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 think
he is entitled to It

Sworn to and subscribed before me, this the 2nd day of Sept 1909

J. T. Dame Ordinary.

D. M. Riberon Witness.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Clinch COUNTY.

Personally came before me Drs G. 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 M. J. Morgan applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:
suffering from Indigestion
and worn out from old age

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

Sworn to and subscribed before me, this the 4th day of Septem 1909

J. T. Dame Ordinary.

G. R. Thigpen M.D.

A. H. Culpepper M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch COUNTY.

I, J. T. Dame 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 Co stated by him 189.. and that the witnesses, viz.: D. M. Riberon and G. 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 none Dollars of property, and in 1903 none Dollars of property; in 1904
" Dollars of property; in 1905
" Dollars of property; in 1906
" Dollars of property; in 1907
" Dollars of property; in 1908
" Dollars of property; in 1909
" Dollars of property.

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

Witness my hand and seal of office, this 4th day of Septem 1909

J. T. Dame Ordinary,
of Clinch 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.

2nd day of Sept 1909 } D. M. Roberson Witness.

J. T. Dame Ordinary.

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,
Church County.

I, Thomas F. Morgan hereby authorize Wm A Wright Com of Ga Atlanta Ga to receive and receipt for the pension allowed and request that he remit same to Thomas F. Morgan at Hamersville Ga by Mail in care of ordinary

Witness my hand and seal this 6th day of March 1897.

Executed in presence of
George Comelius ordinary } Thomas F. Morgan

F. M. Griffis

Pension Office 5/10 1897
Witness does not answer
no. 11 positively — and the
physicians say "can not
support himself & wife"
Rich. Johnson
Com of Pensions

11th question — amended

W. Morgan Thomas
Church County
No.

INDIGENT PENSION
1897.

Name Thomas F. Morgan
County Church
Approved 1897.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

2/22.99 3/9/97

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, Thomas F. Morgan hereby authorize
Wm A Wright Ben of Ga attorney Ga
to receive and receipt for the pension allowed and request that he remit same to Thomas F. Morgan
at Homerville Ga by Mail
in care of ordinary
Witness my hand and seal this 2nd day of March 1897.

Executed in presence of
Jno. Hamilton
Ordinary
F. A. Griffis

Thomas F. Morgan

Pension Office 5/10 1897
Mr Finn don not answer
No 11 partly - and the
physicians say can not
support himself "

Rich'd Johnson
Com'r Pensions

11th question - answered

INDIGENT PENSION
1897.

Name Thomas F. Morgan
County Clinch
Approved 1897.

WARRANT HANDED NO

Thomas F. Morgan Co
Clinch County
No.

Questions for Applicant.

STATE OF GEORGIA,
Clinch County.

11th Question amended

I Thos F. Morgan of said State and County, desiring to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (give State, County and post office.) Thomas F. Morgan County of Clinch & State of Ga
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? Mc Ellis Milligasey Ga Lamb Co Ga 5 9 years
3. When and where were you born? 1838 Appling Co Ga
4. When and where and in what company and regiment did you enlist or serve? 1862 at Blackshear Ga Capt Allen Strickland Co 4th Ga Cavalry Shroud 2 years
5. How long did you remain in such company and regiment? 6 months in Capt Allen Strickland Co then transfered to Capt Thomas Mily Co H. same Regiment
6. For how long a period did you discharge regular military duty? 3 years
7. When, where and under what circumstances were you discharged from service? When at Commander at Home on sick furlough Clinch Co from Hospital
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 "infirmity and poverty" or third "blindness and poverty"? poverty & infirmity
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? a severely injurd fifteen years wounded in the both and left to bare the crutches at once and is less
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, Nothing
15. In what County did you reside during those years and what property did you then return for taxation? County of Clinch 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? One Hundred Dollars a year by Dollars
18. What was your employment during 1895 and 1896? What pay did you receive in each year? On a small farm Non
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? I have Wife & 2 Daughters & 2 sons dont Wife has small Lot in which they make and little farm not any to help me any
20. Are you receiving any pension, if so, what amount and for what disability? Non now

Every Question MUST be Answered.

Sworn to and subscribed before me this the 2nd day of March 1897.
George Hamilton Ordinary
of Clinch County.

Thomas F. Morgan
Applicant.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Clinch County.

J. L. Morgan & J. Patterson, 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. L. Morgan Waycross Ga. J. Patterson Tyhee Ga
2. Are you acquainted with Thomas F. Morgan, the applicant, if so how long have you known him? 39 years
3. Where does he reside, and how long has he been a resident of this State? Clinch Co Ga 39 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 all the time and was Capt
5. When, where and in what company and regiment did he enlist? May 1st 1862 Wells Co. Blackshear Ga Capt A. Gresham Co 4th Ga Cav. Reg.
6. Were you a member of the same company and regiment? I was
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? 3 years I saw he was orderly Sergt in Capt Wells Co and after Capt in Co Clinton Co. Don't know any thing more
8. What property, effects or income has the applicant? (Give your means of knowledge.) Non I am acquainted with his personal circumstances & he owns no property at all
9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if any did he make of same? Non
10. What is the applicant's occupation and physical condition? Farming Health not good wounded in the back and not able to work but little
11. Is the applicant unable to support himself by labor of any sort, if so, why? ~~I do not think his body is strong~~ by Disability 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 failed and has no help on his Children & Nothing to live on but support
15. What interest have you in the recovery of a pension by this applicant? non

Sworn to and subscribed before me, this the 2nd day of March 1897. J. L. Morgan Witness. J. Patterson

George Sanders Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Clinch County.

Personally came before me J. E. Lee M. D. and L. C. Mobley M. D., both known to me as reputable physicians of said County, who being severally sworn, say on oath that they have examined carefully T. F. 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 aged 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 the 8th day of March 1897. J. E. Lee M.D. L. C. Mobley M.D.

George Sanders Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch County.

I, George Sanders, 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. L. Morgan and Isham Patterson 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 Sanders 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,
Clinch County.

I, Thos F 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 F Morgan in care of ordinary Homerville Ga at by Express

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

Thos F. Morgan [L. S.]

Executed in presence of
Bryant A Steen
George Cornelius
Ordinary

Morgan, Thomas F.
Clinch Co.

CODE SEC. 1254.
(For Those Already Enrolled.)

NO. 2021

INDIGENT
SOLDIER'S PENSION,
1900.

Name T F Morgan
County Clinch

WARRANT ISSUED
January 25 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,
Clinch County.

I, T F 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 T F Morgan at Homerville Ga in care of by ordinary mail

Witness my hand and seal, this 24 day of Dec 1900 1901.

T. F. Morgan [L. S.]

Executed in presence of
George Cornelius
Ordinary

Morgan, Thomas F.
Clinch Co.

CODE SECTION 1254
(For Those Already Enrolled.)

No. 102

INDIGENT
SOLDIER'S PENSION.
1901.

Name T. F. Morgan
County Clinch

WARRANT ISSUED
Jan 14 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Wright

Geo. W. Harrison, State Printer, Atlanta.

1/2/1901

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears Thomas 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 _____ 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~~ _____) 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 Co) ; 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 189^ my application has been removed for 1899 but have not received it

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

Thos F. Morgan

George Cornelius Ordinary.

State of Georgia,
_____ County.

I, George Cornelius 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 1st day of January 1900.

Affix your seal here.

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 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 1st day of January 1860; 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 3 years in Company H, of 4th Regiment of Georgia Cavalry Capt Allen Strickland Co, that his physical condition is as follows: his 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 ~~1901~~ 1900.

Thomas F Morgan

George Cornelius Ordinary.

STATE OF GEORGIA,
Clinch County.

I, George Cornelius Ordinary of said County, do certify that I am well acqainted with Thomas 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 24th day of December ~~1901~~ 1900.

Affix your seal here

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 Fulton Co. Ga. to receive and receipt for the pension allowed and request that he remit same to W. T. Howell at Homerville Ga by mail

Witness my hand and seal, this 6 day of Jan 1902.

T. F. Morgan [L. S.]

Executed in presence of

W. T. Howell

Morgan, T. F. (Thomas F.)
Clinch County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 5131

INDIGENT
SOLDIER'S PENSION
1902.

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

WARRANT ISSUED
3/4 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Yr

Geo. W. Harrison, State Printer, Atlanta.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, Thos. F. Morgan, 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. Dame ordinary at Homerville Ga by mail

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

Thos. F. Morgan [L. S.]

Executed in presence of

J. T. Dame

Morgan, Thomas F.
Clinch Co.,

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED)

No. 4662

INDIGENT
SOLDIER'S PENSION
1907.

Name Thos. F. Morgan
County Clinch
Co. [illegible] Regiment [illegible]

WARRANT ISSUED
1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County,

Personally appears T. F. Morgan of Clinch County, State of Geoogia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of Feb. 1837; 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 4 th Regiment of Georgia Cavalry; Capt. Allen Strickland's Co. that his physical condition is as follows:

Crippled in back and suffers with asthma

that his property consists of the following items

Has 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 Clinch county been allowed a pension for the year 1901 and 1900

Sworn to and subscribed before me, this the 6 day of Jan 1902. T. F. Morgan

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. 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 6 day of Jan 1902.

W. L. Howell

Ordinary Clinch County.

Affix your seal here

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 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 9th day of Feby 1838; 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 Vol. Cav; 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, 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. Thos. F. Morgan

J. T. Dame Ordinary.

State of Georgia,
Clinch County.

I, J. T. Dame 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 1st day of Jan 1907.

J. T. Dame

Ordinary Clinch County.

Affix your seal here

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. A. 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. Z. 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. Z. Howell

Morgan W. A.
Clinch Co.
CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)
No. 56 54

INDIGENT
SOLDIER'S PENSION
1903.

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

WARRANT ISSUED 3/24 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
M

Geo. Harrison, State Printer, Atlanta.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, J. F. Morgan hereby authorize W. A. Wright of Dillon Co, Ga to receive and receipt for the pension allowed, and request that he remit same to W. Z. 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. Z. Howell

Morgan Thomas J.
Clinch Co.
(FOR THOSE ALREADY ENROLLED.)
No. 5735

INDIGENT
SOLDIER'S PENSION
1904.

Name Thomas J. Morgan
County Clinch
Co. Regiment

WARRANT ISSUED 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Lindsey

Geo. 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 _____) 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 failing eyes & thumb crippled the back

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. T. H. Morgan

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 28 day of January 1903.

Affix your Seal here

W. L. Howell
Ordinary Clinch County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County.

Personally appears Thomas 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 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 1866) during the war between the States, and served for the term of 3 years in Company H, of 4th Regiment of Calvary of Georgia Capt. Allen Strickland's Co. ; that his physical condition is as follows: Crippled in Back, and have Asthma.

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 & 04

Sworn to and subscribed before me, this the 13 day of Jan, 1904. T. H. Morgan

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 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.

Affix your Seal here

W. L. Howell
Ordinary Clinch County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, Thomas F. Morgan hereby authorize W. 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 Clerk of Court

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

Thomas F. Morgan [L. S.]

Executed in the presence of
A. G. Dickerson

Morgan, Thomas F.
Clinch County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 636

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
W

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

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, Thos F. Morgan hereby authorize W. A. Wright of Fulton Co. Ga to receive and receipt for the pension allowed, and request that he remit same to J. T. Dame 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. Dame

Morgan, Thomas F.
Clinch County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 1834

INDIGENT
SOLDIER'S PENSION
1906.

Name Thos. F. Morgan
County Clinch
Co. Regiment 4th Ga Cavalry

WARRANT ISSUED
JAN 26 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
W. A. W.

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

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

Capt. Allen Strickland's Co.

STATE OF GEORGIA, }
Clinch County. }

Personally appears T. 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 12 day of Feb. 1838; 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) 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 0 Dollars. I am now earning, by my labor, 0 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. } Thomas T. Morgan

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. 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 1 day of Jan 1905

W. L. Howell

Ordinary Clinch County.

Affix your seal here

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 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 1838; 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 Ga) during the war between the States, and served for the term of 3 years in Company H, of 4th Regiment Ga 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 2nd day of Jan 1906. } Thos F. Morgan

J. T. Adams Ordinary.

State of Georgia,
Clinch **County.**

I, J. T. Adams 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 2nd day of Jan 1906,

J. T. Adams

Ordinary Clinch County.

Affix your seal here

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

STATE OF GEORGIA.

OFFICE OF

COURT OF ORDINARY.

GEO. CORNELIUS, ORDINARY.

OLINCH COUNTY.

Homerville, Ga. Aug 24th 1894

Hon Richard Johnson Comr Pen Atlanta Ga

Dear Sir I can say to you the applicant is a worthy citizen, and should be considered as favorable as possible

Respectfully &c

George Cornelius
Ordinary

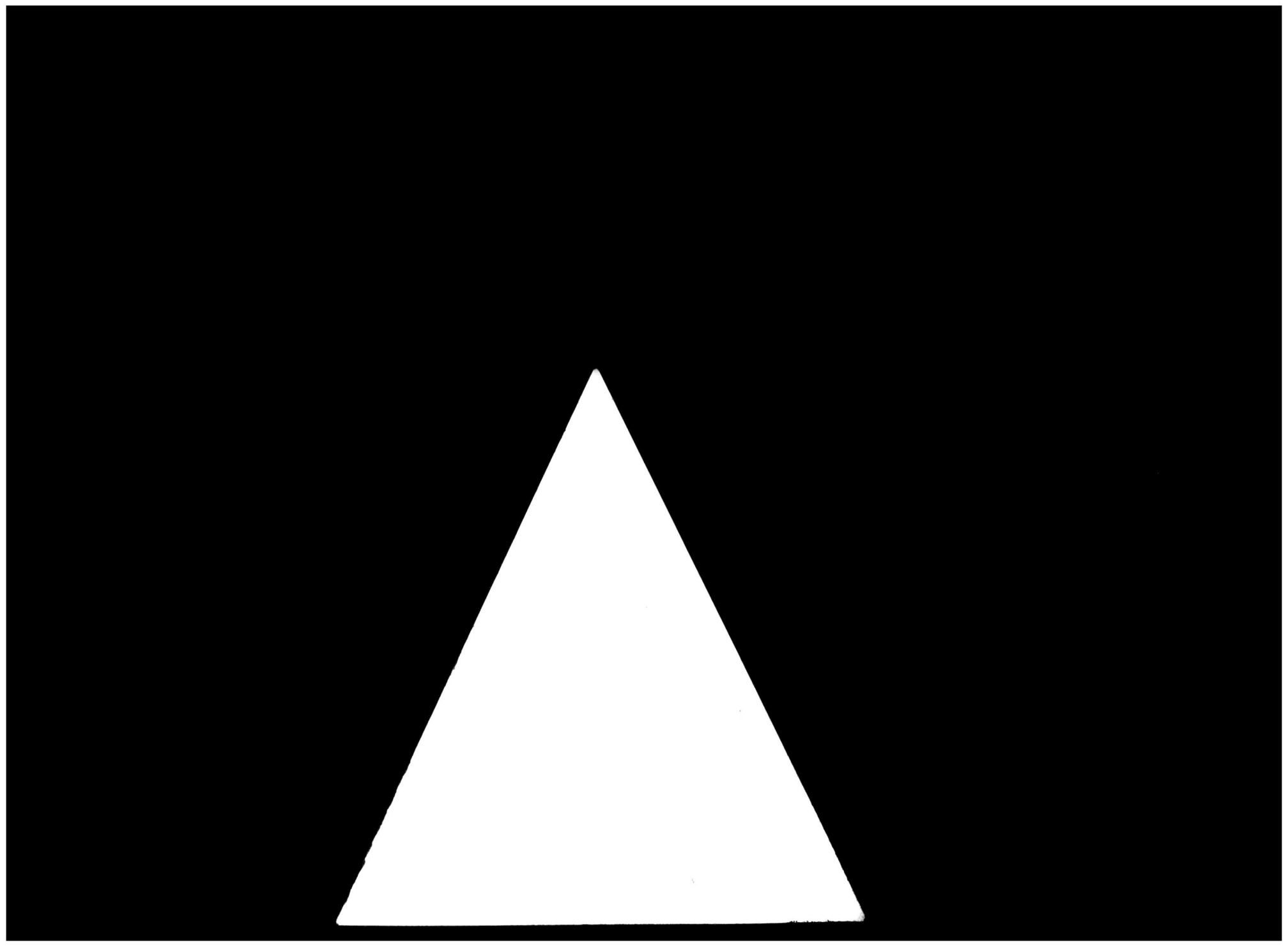
Hon Geo Cornelius -

Dear Sir -

It would be a pleasure to approve the claim but you will notice that applicant shows that he makes a support - see #16 & #17 Taking his answers in connection with the other proofs I do not feel like he comes in the Law - He may furnish additional proofs -

There are so many more claims filed than can be paid that the closest scrutiny must be made - You know this office can only be governed by the proofs as they appear -

Respy Richd Johnson



Morris, Bercta G. Jr.
Clinch County
Record Ct. 1938

Widow's Application

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

County Clinch
Name Mrs. Bercta A. Morris
Widow of Manley Elihu Morris
Date of Marriage Aug. 30, 1906.
Date of Husband's Death May 10, 1914.
Company E
Regiment 8th Regt South Carolina Inf.
Approved DEC 27 1937 193
Director.

AUG 6 1937

5

Porto Rept. Public Welfare, Atlanta, Sept. 30, 1937.

M. E. Morris enlisted as a private in Co. E, 8th Regt., South Carolina Inf. Feb. 15, 1864.....Surrendered, Greensboro, N. C., Apr. 26, 1865.

Director Confederate Records Div.

Ordinary's Certificate

STATE OF GEORGIA,
Clinch COUNTY.

I, Kate C. Pafford, Ordinary of said County, do certify that I know Mrs Bercta G. Morris 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 M. L. Morris & C. L. Morris 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 31 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.

State Dept. Public Welfare,
Atlanta, Sept. 30, 1937.

M. E. Morris enlisted as a private in Co. E, 8th Regt., South Carolina Inf. Feb. 18, 1864.....Surrendered, Greensboro, N. C., Apr. 26, 1865.

Director Confederate Records Div.

Recorded 1937
Vol. 2 Page 42

Widow's Application

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

County Clinch
Name Mrs. Bereta A. Morris
Widow of Manley Elihu Morris
Date of Marriage Aug. 30, 1906.
Date of Husband's Death May, 10, 1914.
Company E
Regiment 8th S. C. Inf. Cav. Arty.
Approved DEC 27 1937 193
Director.

Ordinary's Certificate

STATE OF GEORGIA,
Clinch COUNTY.

I, Nate C. Pafford, Ordinary of said County, do certify that I know Mrs. Bereta G. Morris 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 M. L. Morris & E. L. Morris 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 31 day of July 1937.

(SEAL OF ORDINARY) Nate 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. Bereta A. Morris 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) Homerville, Clinch County, Georgia.

2. How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? December, 1910
Give date, or year, of your birth. July, 4th. 1881 Age? 56

3. (1)When, (2)where and (3)to whom were you married? Manley Elihu Morris. August, 30, 1906 in Florence County, South Carolina.

a. Have you married since the death of first and soldier husband? No.
b. When and where did your first husband die? Clinch County, Georgia, May, 10, 1914.
c. Were you residing together when he died? Yes.
d. If not, how long had you resided apart? XXX
e. Are you now a widow? Yes.
f. Have you or your husband heretofore been paid a pension by the State? No.
g. If so, when and for what cause were you or your husband placed on the roll? XXXXX

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 Infantry, Cavalry, Artillery, Reserves, State Guards, State Militia or State Troops.
Company A, 8th. Regiment, Long Street Corps, Garner Brigade, under General Harley. entered April 1862, Darlington County, S.C.

2. When and where did the Commands of your husband surrender or discharge from the Service?
paroled at Greensboro N.C. May, 2, 1865.

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?

e. What was his physical condition when he left his Command?

f. What effort did he make to return to his Command?

g. In what way was he prevented from going back to his Command?

h. Was he captured by the enemy at any time?

i. If so, when and where? In what prison was he held and when was he released?

Sworn to and subscribed before me, this the 31 day of July, 1937.

Nate C. Pafford, Ordinary
of Clinch County.
(SEAL OF ORDINARY)

Mrs. Bereta G. Morris
Applicant.

An Affidavit

(Read carefully before making this affidavit.)

State of Georgia,

County of Clinch

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.

Mrs B. G. Morris
Secretary

Sworn to and subscribed before me, this the

31 day of July, 1937.

Kate C. Pafford, Ordinary,

Clinch County.

Questions for Witness as to Marriage and Service of Husband.

STATE OF GEORGIA,

Clinch COUNTY.

.....of said State and County is hereby presented as a witness in support of the application of.....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).....

2. How long and since when have you known.....applicant

3. Where does she now reside, and since when has she been, continuously, a bona fide, resident citizen of this State?.....

4. When and to whom was she married?.....How do you know?.....

5. How long and since when did you know.....her husband?.....

6. When and where did.....the husband of applicant, die?.....

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

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

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?.....amd when released?.....

Sworn to and subscribed before me, this the .....day of ....., 193...

....., Ordinary of....., County.

(SEAL OF ORDINARY)

.....
(Witness)

FLORENCE PUBLIC LIBRARY
FLORENCE, SOUTH CAROLINA

MRS P A WILLCOX, LIBRARIAN

March 9th.1937.

Mrs.B.G.Morris,
Rt.1.
Homerville, Ga.

Dear Mrs.Morris:

Your letter of March 8th., received requesting information of Manly E Morris.

The only reference I have is as follows: Morris,Manly E.,transferred from the 8th Regiment between Dec. 15th,1864, and April 27th,1865; paroled at Greensboro,N.C. May 2,1865....South Carolina Troops in Confederate Service... Salley--Volume 2..Page 343.

Hoping that this information is what you desire, I am,

Yours very truly,
Mrs P A Willcox
Librarian.

GEORGIA,CLINCH COUNTY.

Personally comes E.L. Morris and M.L. Morris,who on oath says that the following facts are given by them from the conversation the remember having with their Father the said Manley E. Morris,deceased, Confederate soldier.

Manley served three years in Company A 8th. South Carolina Regiment. Long Street Corps, Garner Brigade,under General Hagley. Served last three yeres of war, April,1862-1865. he was woumded during service.
Darlington County,S.C.

Sworn to and subscribed to before me this July,31,1937.

M. L. Morris
E. L. Morris.

Kate C Passford
Ordinary Clinch County,Ga.

Re: application of Mrs. Berets G. Morris,widow of Manley E. Morris,for Confederate Widow's pension.

Georgia, Clinch County.

Personally comes E.L. Morris and M.L. Morris, who on oath says that they are personally acquainted with the fore going named applicant, Widow of said Manley E. Morris; and that they deponents are sons of Manley E. Morris by his first wife and that therefore the said Mrs.Berets G. Morris is their step-mother.

Deponents further say that they were witnesses to the marriage of said Manley E. Morris and said Mrs. Berets G. Morris who at that time was Miss Berets G. Armfield, that said marriage was solemnized in Florence County,South Carolina,on August 30,1906, by Rev. Mr. Gibson, a Methodist Minister.

Depenents further say that there appears no public record of said marriage in South Carolina for the reason that at that time the State of South Carolina had no legal provisions for the public records of marriage.

Deponents further say that of their own knowledge they know that the said Manley E. Morris and Mrs Berets G. Morris after their marriage, continued to live together as man and wife until the death of said Manley E. Morris which occurred in Clinch County,Georgia, (to which they had removed in 1911) on the 10th. day of May, 1914; and she has not since remarried.

Sworn to and subscribed before me this 31st. day of July, 1937.

M. L. Morris
E. L. Morris

Kate C Passford
Ordinary Clinch County,Georgia.

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLANTA

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

WHEREAS:

MRS. BERCTA A. MORRIS, WIDOW OF MANLEY ELIHU MORRIS,

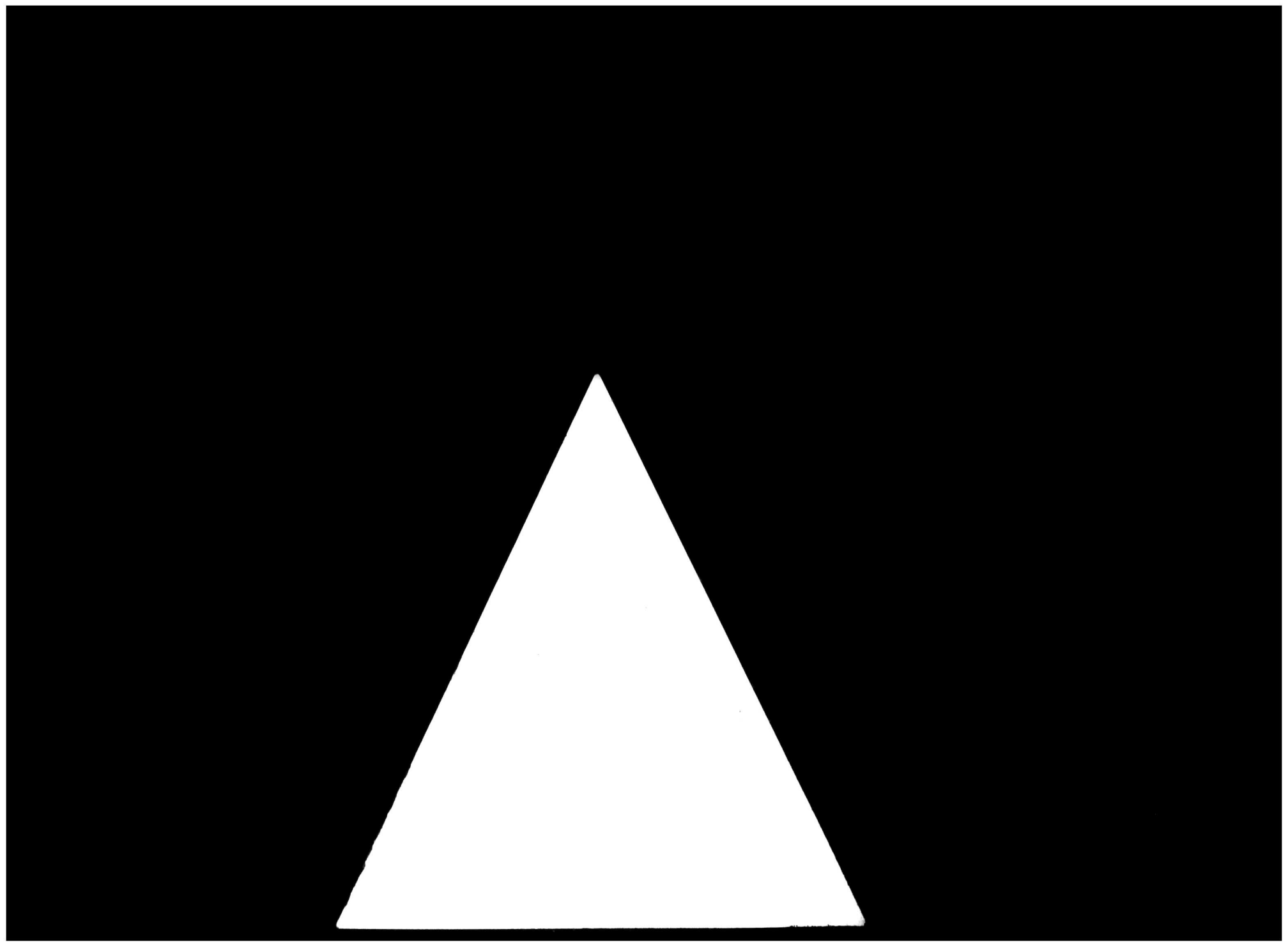
has filed in this office an application for the Georgia pension allowed to widows of Confederate veterans; and it appearing that the late husband of this applicant performed actual military service as a Confederate soldier and was honorably separated from such service; and that applicant was married to said soldier prior to January 1st, 1920, 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.

Director, Confederate Division
State Department of Public
Welfare



Ordinary's Certificate

STATE OF GEORGIA,

Clinch, COUNTY.

I, W. V. Musgrove, Ordinary of said County, do certify that I know Mrs Christian Parrish, 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 Berrien & Clinch, and was on the 4th November 1908; that I also know ~~the witness who swears to the service of husband; that both of them are now~~ Berrien & Clinch, residents of said County and were duly sworn by me before signing the foregoing affidavits and that they ~~both~~ she are truthful, trustworthy, and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 22nd day of Oct. 1922.

(SEAL) W. V. Musgrove 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. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Wm. Christian Parrish
10-28-22 (mrs)
1867 Clinch County
No.

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County Clinch

Name Mrs Christian Parrish

Widow of James W. Parrish

Company H

Regiment 6th Ga

Approved 10-30-22

John W. Clark 6-14-23

Wm
Act Ordinary
No certify to witness

~~J. W. LINDSEY,~~
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

1867

Ordinary's Certificate

STATE OF GEORGIA,
Clinch, COUNTY.

I, W.V.Musgrove, Ordinary of said County, do certify that I know Mrs Christian Parrish, the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th November 1908; that I also know Berrien & Clinch, residents of said County and ~~the witness who swears to the service of husband x that both of them are~~ were duly sworn by me before signing the foregoing affidavits and that they ~~she~~ are truthful, trustworthy, and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 22nd day of Oct. 1922.

(SEAL) W.V.Musgrove 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. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Mrs Christian Parrish
12-28-22
Minor Claim
No. 1867

Widow's Pension
Under Act 1910—as Amended by Act of 1919.

County Clinch
Name Mrs Christian Parrish
Widow of James W. Parrish
Company M
Regiment 6th Ga Cav
Approved 12-28-22
John W. Clark 6-14-13

Mrs Christian Parrish
No Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

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

Questions for Applicant

STATE OF GEORGIA,
Clinch, COUNTY.

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

1. What is your name, and where do you reside? Mrs Christian Parrish, Homerville, Ga. R.F.D.#1 Box 37.
2. How long and since when have you been a continuing resident of the State of Georgia? all my life
3. When, where and to whom were you married? James W.Parrish, (Married) 21st Day of Dec 1867.
   a. Have you married since the death of first and soldier husband? no
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) I meet and married him after the surender.
5. When and where did the commands of your husband surrender or discharge from the army?
6. Was your husband personally present at the time of the surrender or discharge of this command?
7. If he was not present state clearly where he was?
8. Where was his command when he left?
   a. For what cause did he leave his command?
   b. By whose authority did he leave his command?
   c. For how long was he granted leave of absence?
   e. What was his physical condition when he left his command?
   f. What effort did he make to return to his command?
   g. In what way was he prevented from going back to Command
   h. Was he captured by the enemy at any time?
   i If so, when and where captured and where held as a prisoner, and when and for what cause released?
   j. When and where did your first husband die? June 5th, 1916, In Berrien County, Ga.
   k. Were you residing together when he died? yes
   l If not, how long had you resided apart?
   m. Are you now a widow? yes
9. Have you or your husband heretofore been paid a pension by the State? no

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

Sworn to and subscribed before me this the 22nd day of Oct. 1922.
W.V.Musgrove Ordinary
of Clinch, County.
(SEAL)

Mrs Christian Parrish

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA,
Turner ~~Church~~ COUNTY.

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

1. What is your name and where do you reside? J. J. Williams Resides Ashburn Ga. Turner County

2. How long and since when have you known Mrs. Christianna Parrish applicant? all her Life

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

4. When and to whom was she married? James W. Parrish 1867. How do you know? Living in Settlement

5. How long and since when did you know James W. Parrish her husband? Knew him all his Life

6. When and where did James W. Parrish the husband of applicant, die? Berrien County Ga 1916 - June 5th

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? Lived together
Were they divorced? no

9. When, where and in what Company and Regiment did James W. Parrish enlist? Enlisted Apr 1st 1864 Berrien Co at Nashville Ga Co-H. 6th Ga Reserves

10. Were you a member of the same Company? I was

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? until April 1865 when war closed

12. When and where did his Command surrender, and was discharged? April 1865 near Greensboro, N.C.

13. Were you personally present when it was surrendered? was not If not, where were you was In Berrien County and how came you there? Sick Furlough

14. Was the husband of applicant personally present at surrender? an Detail Duty at home if not where was he? at an Detail Duty When, where and for what cause did he leave Command? (Give date.) Came Home July 1864 Sick Furlough By whose authority did he leave his Command? order of Commander And how long was he granted leave? 60 Days & afterwards an Detail Service How do you know all this? Lived In Same County and Same Community

15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command? Came Home on Sick Furlough and afterwards an Detail Service

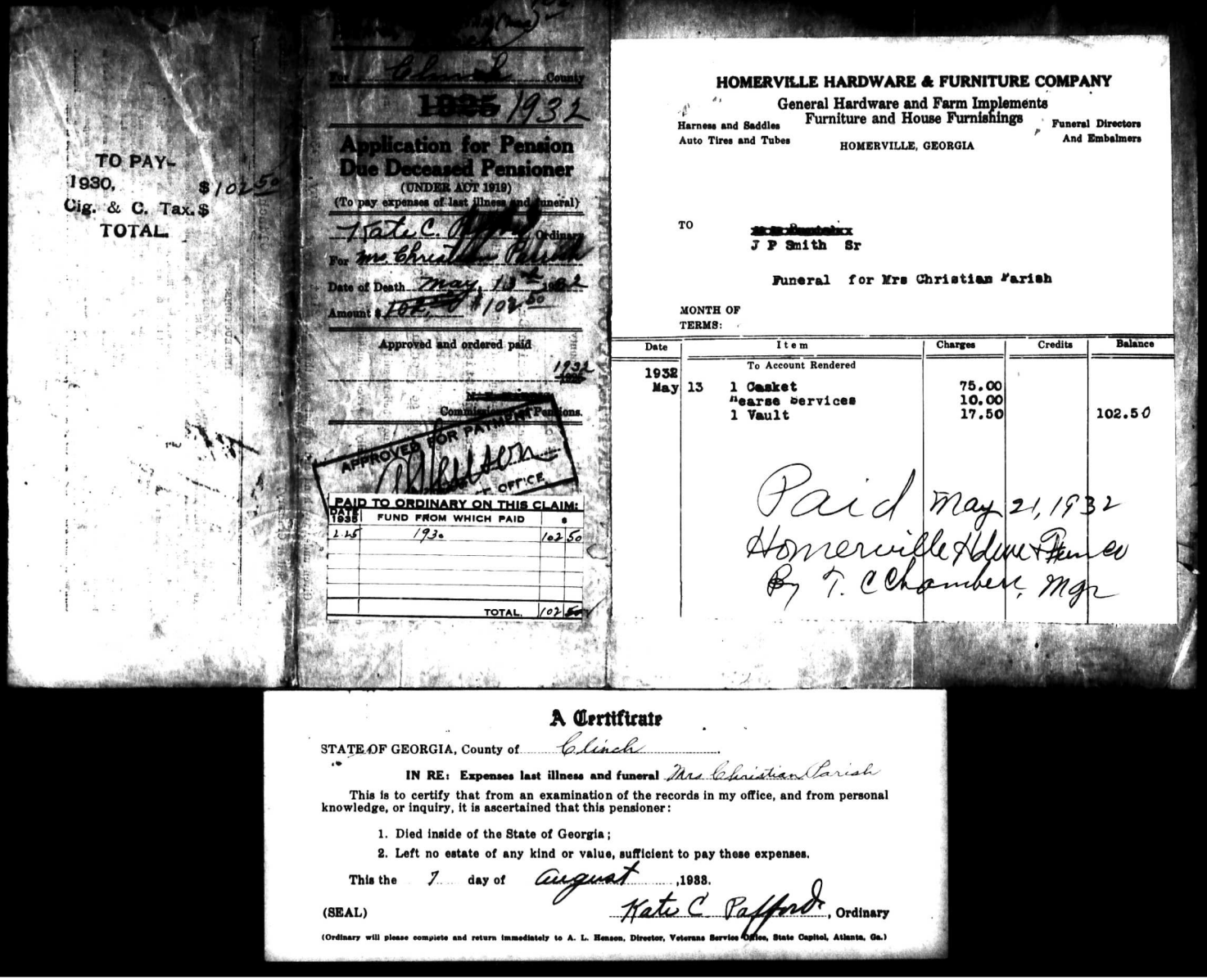
16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? made no Effort But was Detailed Duty at Home I know James W Parrish to be Honorable Discharged from war

Sworn to and subscribed before me this the 24 day of Oct 1922

J J Williams

Jan McHancock Ordinary of Turner County.

(SEAL)



TO PAY-
1930, $102.50
Cig. & C. Tax. $
TOTAL.

For Clinch County

~~1925~~ 1932

Application for Pension Due Deceased Pensioner

(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

Kate C. Pafford Ordinary

For Mrs Christian Parish

Date of Death May 13th 1932

Amount $ ~~102.50~~ $102.50

Approved and ordered paid

1932

Commissioner of Pensions.

APPROVED FOR PAYMENT
[signature]
OFFICE

PAID TO ORDINARY ON THIS CLAIM:

DATE 1935	FUND FROM WHICH PAID	$
2.25	1930	102.50
	TOTAL.	102.50

HOMERVILLE HARDWARE & FURNITURE COMPANY

General Hardware and Farm Implements
Furniture and House Furnishings

Harness and Saddles
Auto Tires and Tubes

HOMERVILLE, GEORGIA

Funeral Directors
And Embalmers

TO
J P Smith Sr

Funeral for Mrs Christian Parish

MONTH OF
TERMS:

Date		Item	Charges	Credits	Balance
1932		To Account Rendered			
May	13	1 Casket	75.00		
		Hearse Services	10.00		
		1 Vault	17.50		102.50

Paid May 21, 1932
Homerville Hdwe & Furn Co
By T. C Chambers, Mgr

A Certificate

STATE OF GEORGIA, County of Clinch

IN RE: Expenses last illness and funeral Mrs Christian Parish

This is to certify that from an examination of the records in my office, and from personal knowledge, or inquiry, it is ascertained that this pensioner:

1. Died inside of the State of Georgia;
2. Left no estate of any kind or value, sufficient to pay these expenses.

This the 7 day of August, 1933.

(SEAL) Kate C Pafford, Ordinary

(Ordinary will please complete and return immediately to A. L. Henson, Director, Veterans Service Office, State Capitol, Atlanta, Ga.)

TO PAY-
1930, $10250
Cig. & C. Tax. $
TOTAL

1932

Application for Pension Due Deceased Pensioner
(UNDER ACT 1919)
(To pay expenses of last illness and funeral)

I Kate C. [illegible] Ordinary
For Mrs Christian Parish
Date of Death May 13 1932
Amount $102.50 $102.50

Approved and ordered paid
1932
[illegible]
Commissioner of Pensions.

APPROVED FOR PAYMENT
[illegible]
AUDITOR'S OFFICE

PAID TO ORDINARY ON THIS CLAIM:

DATE 1933	FUND FROM WHICH PAID	$
2.15	1930	102 50
	TOTAL	102 50

Harness and Saddles
Auto Tires and Tubes

Furniture and House Furnishings
HOMERVILLE, GEORGIA

Funeral Directors
And Embalmers

TO
J P Smith Sr

Funeral for Mrs Christian Parish

MONTH OF
TERMS:

Date	Item	Charges	Credits	Balance
1932	To Account Rendered			
May 13	1 Casket	75.00		
	Hearse Services	10.00		
	1 Vault	17.50		102.50

Paid May 21, 1932
Homerville Hdwe & Furn Co
By T. C. Chambers, Mgr

A Certificate

STATE OF GEORGIA, County of Clinch

IN RE: Expenses last illness and funeral Mrs Christian Parish

This is to certify that from an examination of the records in my office, and from personal knowledge, or inquiry, it is ascertained that this pensioner:

1. Died inside of the State of Georgia;
2. Left no estate of any kind or value, sufficient to pay these expenses.

This the 1 day of August, 1933.

(SEAL) Kate C. Pafford, Ordinary

(Ordinary will please complete and return immediately to A. L. Henson, Director, Veterans Service Office, State Capitol, Atlanta, Ga.)

Application for Pension Due to a Deceased Pensioner

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 Joseph P. Smith. Sr. of said County, who, after being sworn, on oath says that he knew Mrs. Christian Parrish 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 13th. day of May 1932., ~~prior~~ and that a Pension of $30.00 per Month. ($) Dollars was due pensioner and ~~unpaid~~ at the time of pensioner's death, and that pensioner left no widow or dependent children surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of $ 102.50 per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me this 21st. day of May 1932.

Kate C. Pafford, Ordinary
Clinch County
(Seal of Ordinary)

Joseph P. Smith Sr

CERTIFICATE OF ORDINARY

GEORGIA, Clinch County.

I, Kate C. Pafford, Ordinary of said County, do certify that I personally know Joseph P. Smith Sr., who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew Mrs. Christian Parrish 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, $30.00 per month in 1932, ($) Dollars in said County for 192..., 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 21st day of May, 1932, 192...

(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: "Sam, true, full and paid," 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 the same."

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 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 delivers the money himself and takes receipt.*

8th. Accept no bills for nursing until you write the Pension Department and learn 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 folded, is filled out.

John W. Clark
[redacted]
Commissioner of Pensions
Atlanta, Ga.

11/15/22/

Hon. W.V. Musgrove,
Ordinary of Clinch Co.,
Homerville, Ga.

My dear Judge Musgrove:

I am returning to you herewith the application and marriage certificate of Mrs. Christian Parrish, in order that the application may be filled out. You will observe that Mrs. Parrish has answered none of the questions relating to the service. This is absolutely necessary and we can't recognize this paper until it is perfected.

You may let the dates remain as they appear.

Yours sincerely,

John W. Clark

COM. OF PENSIONS.

Dear Sir-;

You will plese understand, that Mrs Parrish did not know Mr Parrish untill after the War, she meet and married him after the surender, is why she did not answer these questions, hopeing that this will perfect her paper I remain,

Yours very truly,

W.V. Musgrove
Ordinary.

Clinch County Court of Ordinary

Mrs. Kate C. Pafford, Judge

Homerville, Georgia

March, 26, 1938.

Hon. A.L. Henson;
Director, Pension Dept.
Atlanta, Ga.

Dear Mr. Henson:

Enclosed find certified copy of order from heirs of Joseph P. Smith Sr. authorizing me to pay to the widow of Joseph P. Smith Sr. the claim for refund of burial expenses for Mrs. Christian Parrish, deceased, widow pensioner of Clinch County;

Please attach this paper to the claim for burial expenses for Mrs. Christian Parrish made by Joseph P. Smith Sr.

Yours very truly,

Kate C. Pafford

Ordinary.

GEORGIA CLINCH COUNTY.

I, do solemnly swear that the following itemized statement of the funeral expenses for Mrs. Christian Parrish, deceased Widow pensioner of Clinch County were paid by me.

May, 13, 1932.

I Casket	$75.00
Hearse service	10.00
I Vault	17.50
	$102.50

Joseph P. Smith Sr.

Sworn to and subscribed before me this 21st. day of May, 1932.

Kate C. Pafford
Ordinary Clinch Co., Ga.

GEORGIA, CLINCH COUNTY,

This agreement entered into this March 3rd. 1938, by and between Henry P. Smith, William Smith, Mrs. Lizzie Tomlinson and Mrs. Emma Dame parties of the first part, and Mrs. Jessie Smith party of the second part, for and in consideration of One Dollar and other valuable consideration and the love and affection that said parties of the first part hold to and for their step-mother, party of the second part, witnesseth,

That parties of the first part, together with party of the second part, are the sole surviving heirs at law of Joseph P. Smith, Sr. deceased, late of said County of Clinch; and that for the aforesaid consideration, the parties of the first part do hereby sell, give, convey and assign unto party of the second part, the widow of the said Joseph P. Smith, Sr., deceased, any and all of their rights, title, interest and equity that they or either of them may have in and to a certain fund of $102.50 now held by Kate C. Pafford, Ordinary of Clinch County, Georgia, and payable to Joseph P. Smith, Sr., deceased, as a refund on burial expenses of Mrs. Christian Parrish, a deceased, widow pensioner of Clinch County.

This agreement witnesseth further that said burial expense of the said Mrs. Christian Parrish was paid by the said Joseph P. Smith Sr., during his lifetime and that he has, since filing his claim for refund with the Pension Department of Georgia, died intestate and that there is no legal Representative of his estate. It is the intention of the parties of the first part to authorize the Ordinary of Clinch County and the Pension Department of Georgia to pay this refund to the said Party of the second part for her individual use.

In witnesseth whereof we have hereunto set our hands and seals, the day and year first above written.

Signed, sealed and delivered in the presence of:

Kate C. Pafford as to Mrs Dame
Ordinary Clinch County, Ga.
(Seal)

S.A. Summerlin
Ordinary Atkinson County, Ga.

(Seal)

Mrs. Emma Dame

H.P. Smith

Mrs. Lizzie Tomlinson

William Smith

GEORGIA, CLINCH COUNTY.

I, Kate C. Pafford, Ordinary of Clinch County, Georgia, do hereby certify that the within and foregoing is a true and correct copy of the agreement entered into by the heirs of the late Joseph P. Smith, Sr, which is of record in my office in Minutes "D"

This March, 5th. 1938.

Kate C. Pafford
Ordinary Clinch County, Georgia, and Exofficio Clerk thereof.

11

$102.50

Sworn to and subscribed before me
this 21st. day of May, 1932.

Kate C. Pafford
Ordinary Clinch Co., Ga.

Joseph P Smith Sr

11

No. 823 MARSHALL & BRUCE CO., NASHVILLE

STATE OF GEORGIA, Berrien, COUNTY.

ORDINARY'S OFFICE—ss.

I, J. I. Norwood, , Ordinary and ex-officio Clerk of the Court of Ordinary of said County, do hereby certify that I have compared the foregoing copy of Marriage License of James T. Parrish, and Christian DeVane,

with the original record thereof, now remaining in this office, and the same is a correct transcript therefrom, and of the whole of such original record.

In Testimony Whereof, I have hereunto set my hand and affixed the seal of the Court of Ordinary, this the 24th day of October, 1922.

J. I. Norwood
Ordinary and ex-officio C. C. O.

No.

MARRIAGE LICENSE,

STATE OF GEORGIA, COUNTY OF BERRIEN

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

You are hereby authorized to join

James W. Parrish, *and* Christian DeVane,

in the Holy State of Matrimony, according to the Constitution and Laws of this State and for so doing this shall be your License. And you are hereby required to return this License to me, with your Certificate hereon of the fact and date of the Marriage.

Given under my hand and seal this 21st, *day of* December, 1867, 19

W. E Connell, (L.S.)
Ordinary.

STATE OF GEORGIA CERTIFICATE COUNTY OF BERRIEN

I Certify that James W. Parrish, *and* Christian DeVane,

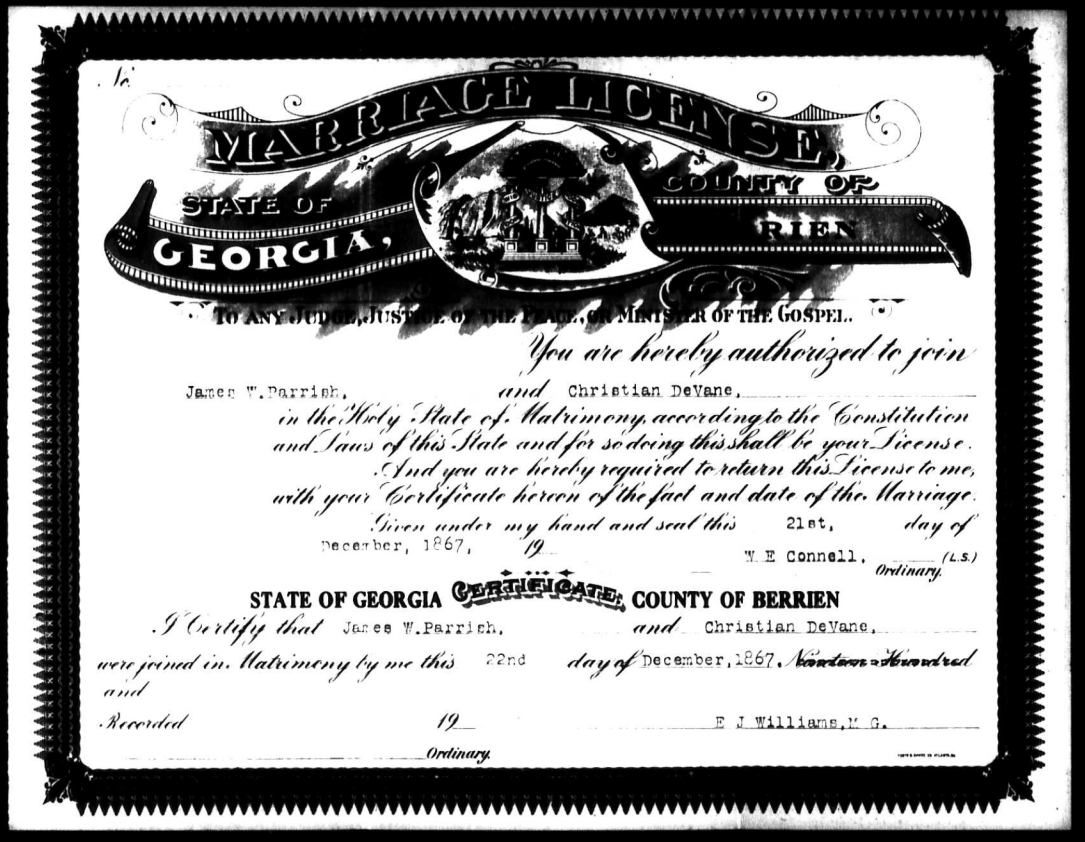
were joined in Matrimony by me this 22nd *day of* December, 1867. ~~Nineteen Hundred~~

and

Recorded 19

E J Williams, M. G.

Ordinary.



No.

MARRIAGE LICENSE

STATE OF GEORGIA, COUNTY OF BERRIEN

TO ANY JUDGE, JUSTICE, O[illegible] PEACE, OR MINISTER OF THE GOSPEL.

You are hereby authorized to join James W. Parrish, and Christian DeVane, in the Holy State of Matrimony, according to the Constitution and Laws of this State and for so doing this shall be your License. And you are hereby required to return this License to me, with your Certificate hereon of the fact and date of the Marriage.

Given under my hand and seal this 21st, day of December, 1867, 19

W. E Connell, (L.S.)
Ordinary.

STATE OF GEORGIA CERTIFICATE COUNTY OF BERRIEN

I Certify that James W. Parrish, and Christian DeVane, were joined in Matrimony by me this 22nd day of December, 1867. ~~Nineteen Hundred~~ and

Recorded 19

Ordinary.

E J Williams, M. G.

I, have this day received from Kate C. Pafford, Ordinary Clinch County, Georgia, $108.80, for Burial expenses for Mrs. Christian Parrish, deceased Widow pensioner of Clinch County, Georgia.

This 4th. day of March, 1935.

Mrs Jane Smith

This 4th. day of March, 1935.

Mrs Jane Smith

POWER OF ATTORNEY.

STATE OF GEORGIA,
S Clinch County.

I, C. M. Patterson hereby authorize Wm A. Wright of Fulton Co Ga

to receive and receipt for the pension paid hereon and request that he remit same to W. T. Howell, Ordinary return mail at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 11 day of Feb 1901.

C M Patterson [L. S.]

Executed in presence of

W. T. Howell
Ordinary
C-(a)

Patterson C. M.
Clinch Co

CODE SECTION 1830.

For Those Already Enrolled.)
Fr. Patterson Fl. 80

No. 2649

DISABLED
SOLDIER'S PENSION.
1901.

Name Patterson C. M.
County Clinch
Disability Arm
Amount, $ 50.00

2/13 1901.

JOHN W. LINDSEY,
[redacted]
Commissioner of Pensions.

WARRANT HANDED TO
Wright

Geo. W. Harrison, State Printer, Atlanta.

Paid in Putnam Co in 1900 Pro data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, C. M. Patterson hereby authorize Wm. A. Wright of Fulton Co. Ga.

to receive and receipt for the pension paid hereon and request that he remit same to W. T. Howell, Ord. by return mail at Homerville Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 11 day of Feb 1901.

C M Patterson [L. S.]

Executed in presence of

W. T. Howell
Ordinary

Patterson, C. M.
Clinch Co

CODE SECTION 1280
For Those Already Enrolled.)
Fr. Pittman 1900

No. 2649

DISABLED
SOLDIER'S PENSION.
1901.

Name Patterson C. M.
County Clinch
Disability Lam
Amount, $ 50

2/13 1901.

JOHN W. LINDSEY,
[redacted]
Commissioner of Pensions.

WARRANT HANDED TO
Wright

Geo. W. Harrison, State Printer, Atlanta.

Paid in Putnam Co in 1900 Rolla

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, C. M. Patterson hereby authorize Wm. A. Wright of Fulton Co. Ga.

to receive and receipt for the pension paid hereon and request that he remit same to W. T. Howell by mail at Homerville Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 30 day of January 1902.

STATE OF GEORGIA

C M Patterson [L. S.]

Executed in presence of

W T Howell Ordinary
C C

Patterson, C. M.
Clinch Co.

(Same from Putnam Co)
CODE SECTION 1280
(FOR THOSE ALREADY ENROLLED.)

No. 2724
To Bibb 1903

DISABLED
SOLDIER'S PENSION
1902.

Name C. M. Patterson
County Clinch
Co. B Regiment 39
Disability
Amount, $ 50

2/14 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Dr

Geo. W. Harrison, State Printer, Atlanta.

No data

STATE OF GEORGIA

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears C. M. Patterson of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 1 day of October 1864; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company B, of 29th Regiment of Tennessee Volunteers, Vaughn's Brigade; that whilst engaged in such military service in the State of Georgia, on the 19 day of August 1863, he was wounded, injured or diseased as follows:

Was wounded in the left elbow and left side by a Minnie so disabling the arm and side

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

Sworn to and subscribed before me, this the 11 day of Feb 1901. C M Patterson Postoffice Fargo Ga

W. T. Howell Ordinary C.C.

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

STATE OF GEORGIA,
Glenn County.

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

Given under my official signature and seal, this 11 day of Feb 1901.

W. T. Howell
Ordinary Clinch County.

Affix your seal here

Mr C. M. Patterson is on the Invalid Pension Roll of Putnam Co. He has made Fargo Ga his home. J. H. Adams Jr Ordy Putnam Co

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County.

Personally appears C. M. Patterson of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 1st day of October 1864; that he enlisted in the military service of the Confederate States (or of the State of Tennessee) during the war between the States, and served as a Private in Company B, of 29th Regiment of Tennessee Volunteers, Vaughn's Brigade; that whilst engaged in such military service in the State of Tennessee, on the 19th day of August 1863, he was wounded, injured or diseased as follows:

Through the left Elbow by shot and in the left side by shot.

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

Sworn to and subscribed before me, this the 10th day of January 1902. C M Patterson Post-office Fargo.

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

STATE OF GEORGIA,
Clinch County.

I, W. T. Howell Ordinary of said County, do certify that I am well acquainted with C. M. Patterson 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 Feb. 1902.

W. T. Howell
Ordinary Clinch County.

Affix your seal here

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

This man was transferred from Putnam County here Feb. 3 - 1902.
W. T. Howell Ordinary

Given under my official signature and seal, this ___

day of Feb 1901.

W. L. Howell

Ordinary Clinch County.

Affix your seal here

Mr C. M. Patterson is on the Invalid Pension Roll of Putnam Co. He has made Fargo Ga his home. J. H. Adams Jr Ordy Putnam Co

day of ___ 1902.

W. L. Howell

Ordinary Clinch County.

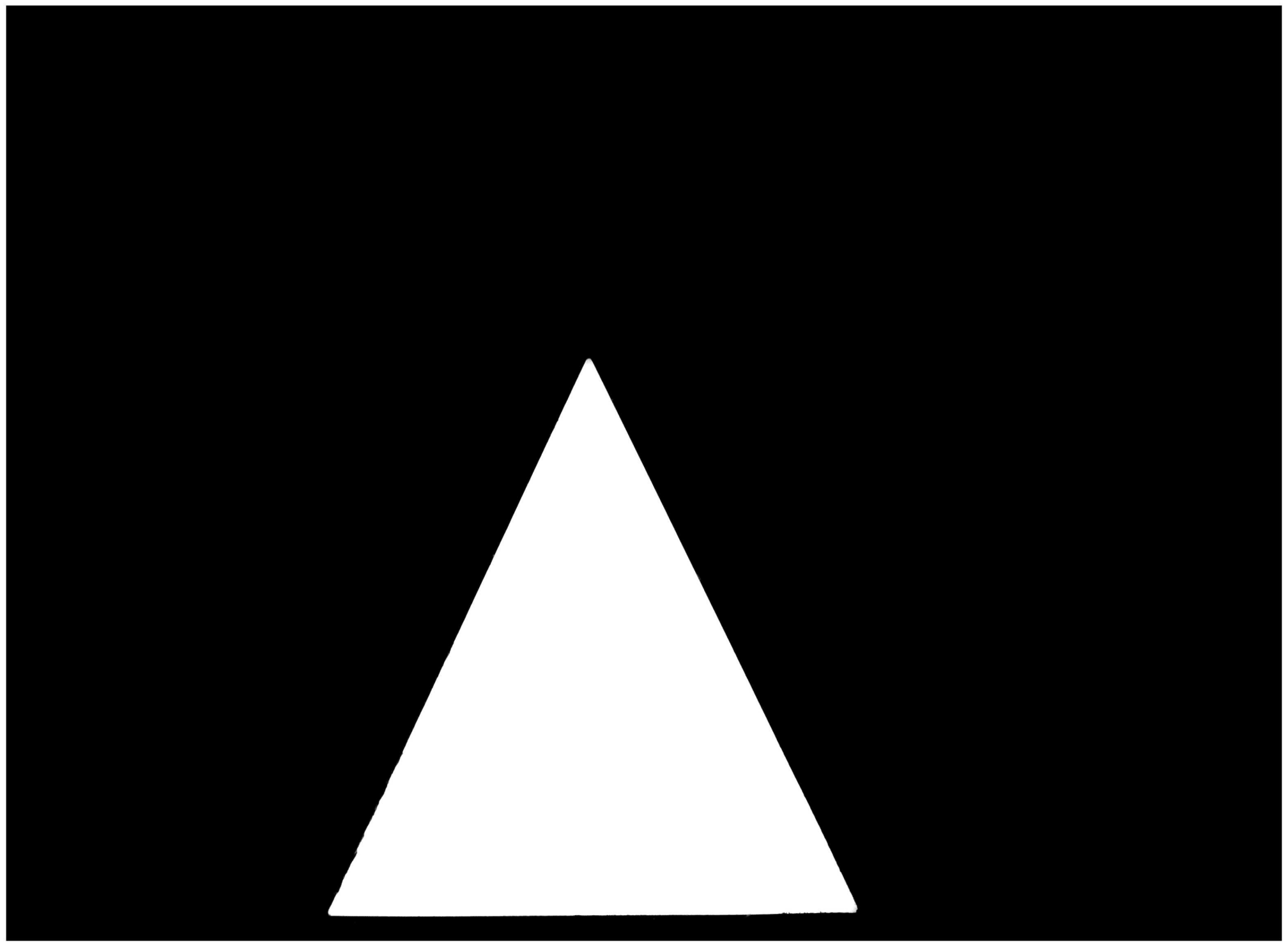
Affix your seal here

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

This man was transferred from Putnam County here—
Feb. 3—1902
W. L. Howell Ordinary

Homerville, Ga. Feb. 4—1901—
Hon John W. Lindsey,
Commissioner of Pensions,
Atlanta, Ga.

Dear Sir,
I enclose you herewith application for Pension of Martha E. Gidden's.
Please pay the same out right away and oblige.
Very truly Yours,
W. L. Howell
Ordinary



Powell, Katie
Clinch, County

G 29 No. 1910

WIDOW'S
~~INDIGENT~~ New Roll PENSION.
1904.

Put on New Roll

Name Katie Powell

County Clinch

Widow of William C. Powell

Co. G. 29th Ga Reg.

Approved ..... 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

..... 1904.

Geo. W. Harrison, State Printer, Atlanta.

11/30/10

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, Katie Powell hereby authorize W. A. Wright of Fulton County, to receive and receipt for the pension allowed and that he remit the same to me at Homerville by his check or registered mail.

Witness my hand this 23 day of Sept 1909

Executed in presence of

J. T. Dame Ordinary, } Katie Powell L. S.
Clinch County. } Mass.

SEAL.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, Mrs Katie Powell hereby authorize W. A. Wright
of Fulton County, to receive and receipt for the pension allowed and that he remit the same to me at Homerville by his check or registered mail.

Witness my hand this 21 day of Sept 1909

Executed in presence of
J. T. Dame Orditary,
Clinch County.

Mrs Katie Powell L. S.

SEAL

Pension Roll
Clinch County
No. 1914
WIDOW'S PENSION
1904.
Name Katie Powell
County Clinch
Widow of William C. Powell
Co. K 27th Ga Reg.
Approved 1904
JOHN W. LINDSEY, Commissioner of Pensions.
WARRANT HANDED TO
1904
Geo. W. Harrison, State Printer, Atlanta.

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,
Clinch County.

Mrs Katie Powell of said State and County, desiring to avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly, passed 1900, hereby submits her 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) Mrs Katie Powell Clinch Co. Ga. Mistletoe Post Office.
2. How long and since when have you been a resident of this State? Lived in Clinch all my Life.
3. When and where were you born? Born in this Clinch County 7th Day of August 1844.
4. When and where was your husband born—state his full name, and when were you and he married? (Attach copy marriage license in every case.) My husband W C Powell was Born in Jones County 1844 we was Married Jan 1866. June
5. When and where and in what Company and Regiment did your husband enlist or serve during the war between the States? Company G. 27th Ga Reg. July 1861 at Milltown Ga.
6. How long did your husband serve in said Company and Regiment? Until he was Shot & Captured in the Fall of 1864 then in Prison
7. When and where did your husband's Company and Regiment surrender and was discharged?
8. Was your husband present at the time and place when his Company and Regiment surrendered? He was Captured & shot and given Furlow
9. If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause, and by what authority? He was Captured & shot and given Furlow but had returned I think.
10. When and where did your husband die? In Clinch County July 12 1906.
11. Which of the following grounds do you base your application for Pension, viz.: First—Age and Poverty; Second—Infirmity and Poverty, or Third—Blindness and Poverty? Age & Poverty
12. If upon the first ground, state how long you have been in such a condition that you cannot 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 7 years. My health is very bad not able to do but very little.
13. What has been your occupation since your husband's death? Trying to raise young Corn the best I Could Mid Farming Work
14. How much can you earn gross, by your own exertion or labor? none
15. What property, real or personal, or income do you have or possess, and its gross value? None that I Have owned Contributed to my Support
16. What property, real or personal, did you possess at death of husband or he left you, and of the years 1899, 1900, 1901, 1902, 1903, 1904, and what disposition, if any, by sale or gift, have you made of the same? None but very little.
17. In what counties did you reside in 1899, 1900, 1901, 1902, 1903 and 1904, and what property did you return for taxation? In Clinch County no Property that owned Personally
18. How have you been supported since death of husband, and especially for 1899, 1900, 1901, 1902, 1903 and 1904? By the help of my Children Who are of us.
19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income? I Could not do but very little.
20. What was your employment during 1899, 1900, 1901, 1902 and 1903—how much did you receive for each year? Trying to do my house work.
21. Have you a family? If so, who composes such family? Give their means of support? Have they any lands or other property? My Children are Grown & of age but 2 yet.
22. Have you ever made application for pension before? None
23. How many applications have you made for a pension, and under what class? None

Sworn to and subscribed before me, this the 20 day of September 1909

Mrs Katie Powell
her mark

J. T. Dame Ordinary,
of Clinch County.

QUESTIONS FOR WITNESSES.

STATE OF GEORGIA.
Brooks County.

L. J. Knight and John W. Powell of Clinch County Georgia, of said State and County, having been presented as a witness in support of the application of Mrs. Katie Powell for a Pension under the Act of 1900, 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? L. J. Knight in Quitman Brooks County Georgia.
2. Are you acquainted with the applicant, Mrs. Katie Powell yes have known
If so, how long have you known her? her since 1845
3. Where does she reside, and how long and since when has she been a resident of this State? In Clinch County Ga In State all her life.
4. When and where was she born? Thinks in Jan 1845
5. Were you ever acquainted with her husband? yes
6. Where did she reside in 1861? In Clinch County Georgia
7. When and to whom was he married? Katie Guthrie in June 1868
8. When and where was he born? In James County Georgia Jan 1848.
9. How long have you known him? Since 1859 up to time of his death
10. When and where did W. C. Powell enlist in the war between the States, and in what Company and Regiment did he enlist, and how do you know this? Co. G. 29th Ga. Regt. from having been present
11. Were you a member of the same Company and Regiment? yes
12. How long did he perform regular military duty? from time of enlist until close of War
13. When and where was his Company and Regiment surrendered and discharged from service? at or near Augusta Ga Captured at Nashville Tenn in Dec. 1864 and sent to prisons in different places
14. Were you with the Command when it surrendered? S. War
15. Was W. C. Powell the husband of applicant present? he was not.
16. If not present, where was he? Home on furlough but not returned to his Command.
17. When and where did he leave his command? I think at Jim Barrow Ga in July 1864
For what cause? he was shot and not able for military duty
By whose authority he left? By Officers in Georgia
How do you know all this? (State fully and clearly.) By being member of same Company & Reg
18. When and where did W. C. Powell die? In Clinch County Feby 17th 1906.
19. Where did he reside at his death and how long had he been a resident of Georgia at his death? In Clinch Co. in State all his life.
20. Do you of your own knowledge know that applicant is the lawful widow of W. C. Powell Yes
21. Has she remained unmarried since her soldier husband's death, and is now his widow? yes.
22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge? no Property or Income
23. What property, effects or income did applicant possess in 1899, 1900, 1901, 1902 and 1903, and what disposition did she make of it? But very little if any.
24. Has applicant conveyed any property in last two years or given any away, if so, what was it, and to whom? None
25. What is applicant's physical condition and her chances and ability to earn a support? Her Physical Condition Bad. not able to Earn her support.

J. T. Dame ordinary etc.
Ord to J. W. Powell
Ds. to Bdy of Sept 1909

26. Is applicant able to earn a support at labor of any sort, if not, why? She is not.
27. How was she supported for 1899, 1900, 1901, 1902 and 1903? By her husband and since his death By her Children.
28. How much did applicant contribute to her support for last two years? Very little if any.
29. Give a full and complete statement of applicant's physical condition? She is old about 65 years of age. and not able to work
30. What interest have you in the recovery of this pension by the applicant? none only think she is entitled to it.

Sworn to and subscribed before me this 9 day of Dec 1908
Chas H Conway Ordinary,
Brooks County.

L. J. Knight
J. W. Powell
Witnesses.

AFFIDAVITS OF PHYSICIANS.

STATE OF GEORGIA,
County.

Personally before me comes Mrs. Louis Smith M.D. and W. L. Patten M.D., both known to me to be reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully Mrs. Mrs. W. C. Powell, applicant for a Pension under act of 1900, and after such personal examination say that her physical condition is this. She is unable to do manual labor sufficient to support herself. Being very a frail invalid.

and we have no interest in said pension if allowed.

Sworn to and subscribed before me this 20 day of September 1909
J. T. Dame Ordinary,
Clinch County.

Louis Smith M.D.
W. L. Patten M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch County.

I, J. T. Dame Ordinary, in and for said County, hereby certify that the applicant, Mrs. Katie Powell resides in said County, and has been a bona fide resident of this State since the as stated by her day of 18____, and that the witnesses, Mr. J. W. Powell are of trustworthy character, and that their statements are entitled to full faith and credit.

I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses *before the same was signed and subscribed.*

I further certify that the tax digest of [illegible] County shows that applicant returned for taxation in her own name in 1899 ____ dollars worth of property, and in 1900 ____ dollars worth of property, in 1901 ____ dollars worth of property, in 1902 ____ dollars worth of property, and in 1903 ____ dollars worth of property.

The tax digest shows that [illegible] was the [illegible] worth of property [illegible] my personal knowledge [illegible] J. T. Dame ordinary

Witness my hand and official seal this 6th day of August 1908

SEAL.

J. T. Dame Ordinary,
Clinch 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 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. All affidavits must be made before Ordinary.
4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since the 9th April, 1865, not entitled.
5. ..... Witnesses and two Physicians are necessary to make out claims.
6. Attach certified copy marriage license in every case, or show why it cannot be obtained.

Georgia Clinch County.

Personally appeared before me John W. Powell who on oath says that he is satisfied from his own knowledge and belief that William C. Powell and Katie Guthrie was married in June 1868. while he was not present but saw them going to D. H. Johnson house who was Justice of the Peace. and they claimed that they was married by him. and they have been recognized by the community in which they lived ever since as being man and wife and have raised a big family of children and was living together at the time of his death.

John W. Powell

Sworn to and Subscribed before me this 6th day of August 1910

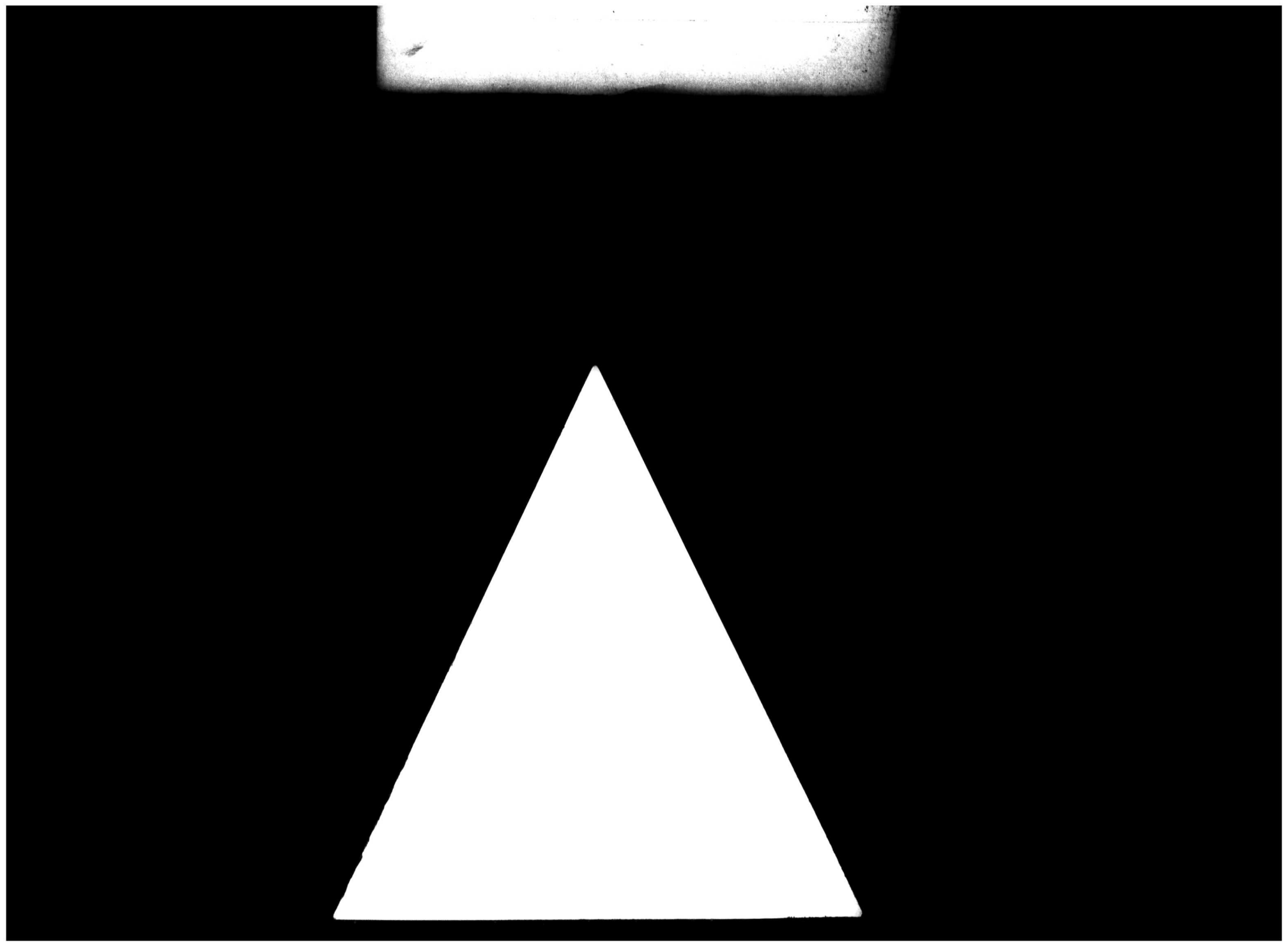
J. T. Dame ordinary C.C.

Georgia Clinch County.

I use this as evidence to show the marriage of W. C. Powell and Katie Guthrie the records was destroyed by fire. and cannot get copy of marriage license.

J. T. Dame

this 6th day of aug 1910. ordinary Clinch Co. Ga



John W. Powell
Co-G-29th Inf.
Private, Aug-1-1861.
Paroled, Thomas-
ville, Ga; May
25-1865-(W.R.)

Witness,- Enlisted
Sept-1-1861. Captured
Stone River, Tenn.
Dec-7-64. Paroled,
Thomasville, Ga,
May 19-1865-
(WR)

Powell Matilda
OR for 1919
Clinch Co

No. 2189-90

1619

Mtr for Recd

Widow's Pension

UNDER ACT 1910.

County CLINCH,

Name Mrs Matilda Powell.

Widow of John W.Powell.

Stockton,Ga.R.F.D.

G-29th Ga Inf

J. W. LINDSEY,
Commissioner of Pensions.

Chas. P. Byrd, State Printer.

6/11/1918

Lindsey Powell
Co. G-29th Inf.
Privats, Aug-1-1861.
Carolyn, Thomas-
ville, Ga; May
25-1865-(Gr-R.)

Witness, Enlisted
Sept-1-1861. Captured
Stone River, Tenn.
Dec-7-64. Carolyn,
Thomasville, Ga;
May 19-1865-
(Gr-R)

Powell, Matilda
Dr for 1917
Clinch Co.

No. 2189-90

Mrs. Matilda Powell

Widow's Pension

UNDER ACT 1910.

County CLINCH.

Name Mrs Matilda Powell.

Widow of John W. Powell.

Stockton, Ga. R.F.D.

J. W. LINDSEY,
Commissioner of Pensions.

Chas. P. Byrd, State Printer.

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

STATE OF GEORGIA,
CLINCH, County.

Personally before me comes Mrs Matilda Powell, 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 Matilda Powell, Stockton, Ga. R.F.D.
2. How long and since when have you been a continuing resident in the State of Georgia? all of my life.
3. When, where and to whom were you married? John W. Powell, at my home in Clinh County, on April 8th, 1865.
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.) July 1861, Company G. 29th Regment, Artilary.
5. When and where did the Commands of your husband surrender or discharge from the army? at Nashville Tenn.
6. Was your husband personally present at the time of the surrender or discharge of this Command? no-he was home on furlough, wounded.
7. If he was not present state clearly where he was?
8. Where was his Command when he left? Nashville, Tenn.
a. For what cause did he leave his command? was wounded.
b. By whose authority did he leave his Command? Commanding Officer,
c. For how long was he granted leave of absence? 30 days and then exstended,
e. What was his physical condition when he left his Command? wounded.
f. What effort did he make to return to his command? none
g. In what way was he prevented from going back to Command? surrendered before able,
h. Was he captured by the enemy at any time? no
i. If so, when and where captured and where held as a prisoner, and when and for what cause released?
j. When and where did your husband die? May 12th 1918, at Home, Clinch County,
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.) none
10. What property of any kind have you sold or given away since Nov. 4, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.) none
11. What property of any description of any value have you now? none
Give list and cash value?
12. What are your annual earnings or income and their value? none
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 8th day of June 1918.

Matilda Powell

W. W. Musgrove Ordinary.
of CLINCH, County.

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

STATE OF GEORGIA,
.....County.

Personally before me comes M L Corbitt 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? M L Corbitt Pearson Ga.
2. How long and since when have you known Matilda Powell 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? April 9 - 1865 Jno W Powell How do you know? I was Present
5. How long and since when did you know Jno W Powell her husband? All my life
6. When and where did Jno W Powell the husband of Applicant die? Clinch County April 20 - 1918
7. Where the Aplicant and her husband living together as husband and wife at the date of his death? Yes
8. If not, how long did they live apart before his death? Were they divorced?
9. When, where and in what Company and Regiment did John enlist? I dont know what C he enlist But I served with him 3 years in C G 29th Ga Regiment
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 4 years
12. When, and where did his Command surrender, and was discharged? Nashville Tennessee
13. Were you personally present when it was surrendered? No If not where were you In hospital and how came you there? Wounded
14. Was the husband of applicant personally present at surrender? No If not where was he? At Home when, where and for what cause did he leave Command? (Give date.) Because of being wounded By whose authority did he leave his Command? By a furlow and how long was he granted leave? 30 Days at first and extended How do you know all this?
15. For what cause, if you know of your own knowledge was he prevented from returning to his Command? Because of his wounds
16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? dont know

Sworn to and subscribed before me this the 27 day of May 1918 M. J. Corbitt

W. V. Musgrove Ordinary,

of Clinch County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,
CLINCH. County.

Personally before me comes A.J.Gibbs. who on oath says that they are freeholders of said County and that they know Mrs Matilda Powell. 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 none.

Personal property	none	$
Notes and accounts due	none	$
Total		$

Schedule (B).

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

none Personal property		$
Money, Notes and accounts	none	$

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	none	$
Cows and Hogs	none	$
Other property	none	$
income and earnings	none	$
Total Value of all property and effects		$

Sworn and subscribed before me this the 8th. day of June 1918. A J Gibbs

W. V. Musgrove Ordinary,

of CLINCH. County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
CLINCH. County.

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

That I also know M.J.Corbit. the witness who swears to the service of husband, and A.J.Gibbs. 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 $ none for 1910 $

Sworn under my hand and official seal of office this 8th. day of june 1918.

SEAL. W. V. Musgrove Ordinary,

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.
4 All affidavits must be made before the Ordinary.
3 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.

W. V. Murphree, Ordinary,

of Dixon County.

"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.
4 All affidavits must be made before the Ordinary.
3 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.

Approved (2)
1930
~~Registered~~ Widow's Application

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

County Clinch
Name Elizabeth S. Register
Widow of Abraham R. Register
Date of Marriage 1872
Company 2nd Lt
Regiment 53 Gen. Dist. Militia
Approved Under Lawrence Pension Commissioner

Ord. notified

JOHN W. CLARK,
Commissioner of Pensions.

2-17-30 E

"Register, Abraham R.
5th Senatorial District
Clinch, Co.

Local District 790"

These troops went out in Spring of 1864."

Roster Office.

her State
872 to h
n co to
efly f

Ordinary's Certificate.

STATE OF GEORGIA,
Clinch COUNTY.

I, Kate C Pafford, Ordinary of said County, do certify that I know Mrs Elizabeth S. Register 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 Martha Symmons + Mary E Weaver the witness or who swear to the service and marriage of husband; to best of their recollection 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 official seal of office this 14 day of Feb 1930

(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, 1881, 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 copies 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.

"Register, Abraham R.
5th Senatorial District
Clinch, Co.

Local District 790

These troops went out in Spring of 1864."

Roster Office.

Approved (2)
Feb 1930 Elizabeth D. Register
Widow's Application

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

County Clinch
Name Elizabeth D. Register
Widow of Abraham R. Register
Date of Marriage 1872
Company 2nd Co.
Regiment 3rd Ser. Dist. Militia
Approved Robert L. Lawson
Pension Commissioner

Cert. rejected

JOHN W. CLARK,
Commissioner of Pensions.

2-17-30 E

Ordinary's Certificate.

STATE OF GEORGIA,

Clinch COUNTY.

I, Kate C. Pafford, Ordinary of said County, do certify that I know Mrs. Elizabeth D. Register 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 Martha Symmonds and Mary E. Pearce the witnesses who sweard to the service of husband; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and official seal of office this 14 day of Feb., 1930

(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, 1881, 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 copies 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.

APPLICATION FOR PENSION BY A WIDOW

Under Act of 1910, as Amended by Act of 1919, and Constitutional Amendment of 1920

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,

Clinch COUNTY.

Personally appears before me, Mrs. Elizabeth D. Register 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 Amendment of 1920, and submits testimony to support the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to wit:

1. What is your name, and where do you reside? (Give Post Office and County) Folkston
Elizabeth D. Register

2. How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? all her life - Born in Clinch County Ga. in 1858

3. When, where and to whom were you married? Abraham R. Register
in 1872 in Clinch County, Ga.

a. Have you married since the death of first and soldier husband? No

4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service, and give name of Colonel and Captain.)
2d Ser. Dist. Ga. Militia Co. E 5th Regt. Ga. Militia Capt. R. L. Lawson
He served until the end of the War in the Militia

5. When and where did the commands of your husband surrender or discharge from the Service?
Do not know.

6. Was your husband personally present with his command when it was surrendered or discharged?
I think he was.

7. If he was not present, state specifically and clearly where he was?

8. 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? In what way?

e. What was his physical condition when he left his command?

f. What effort did he make to return to his Command?

g. In what way was he prevented from going back to Command?

h. Was he captured by the enemy at any time? No

i. If so, when and where? In what prison was he held and when was he released?

j. When and where did your first husband die? Oct. 5. 1906 in Clinch Co. Ga.

k. Were you residing together when he died? yes

l. If not, how long had you resided apart? —

m. Are you now a widow? yes

9. Have you or your husband heretofore been paid a pension by the State? No

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

Sworn to and subscribed before me, this the 10 day of Feb, 1930

Kate C. Pafford, Ordinary

of Clinch County.

(SEAL OF ORDINARY)

Elizabeth D. Register
Applicant.

Applicant further states under oath that she was married in 1872 to her husband Abr. R. Register and that her information as to his service in the C.S. Army ~~and~~ was ~~be~~ derived chiefly from him after their marriage; that she heard him say many times that Eli W. O'Quin was in his same Company and that said O'Quin waited on him when he was taken sick in the Army: That the said Eli W. O'Quin was in same Company with A.R. Register, and is now dead, having died in 1900.- That the said Abraham R. Register ~~did~~ served in the Malitia in active service as he often talked to his family about being in the battles around Atlanta, and was in Atlanta at the time serving ~~under~~ in the Malitia.

That she is advised that there is no record of their marriage but that she and the said A.R. Register were duly married under proper license, in Clinch Co. Ga. in 1872 (Exact date not remembered) by Rev. Isaac D. Hutto, Primitive Baptist Minister; and that she and her said husband lived together thereafter until his death in 1906.-

Sworn to & subscribed before me
This Feb. 16. 1930.

Elizabeth S. Register
E.

Kate A. Pafford
Ordinary Clinch Co. Ga.

Georgia Clinch County: Personally comes before the undersigned Officer, Mrs. Martha Sirmans and Mrs. Mary Weaver who on oath say that they were present at the marriage of their brother Abraham R. Register and Elizabeth Stalvey in Clinch County Ga. in the year 1872, and witnessed their marriage but do not recall the day and month when the same occurred: that said marriage was performed by Elder Isaac D. Hutto at the home of Benj. Stalvey, father of the bride: that said Elizabeth Stalvey Register is the same person who is applicant for pension in the attached application; and that they know that their said brother Abraham R. Register enlisted in the Georgia Malitia ~~and~~ in 1864 and saw active service in same in the Confederate Service, but do not know ~~that~~ any of the details as to company, regiment, battles in, or time of discharge.

Martha Sirmans

Mary E Weaver

Sworn to & subscribed before me
This Feb. 14. 1930.

Kate A Pafford
Ordinary.

Questions for Witness as [illegible] Husband and Marriage

STATE OF GEORGIA,

.....

.....of said State and County is hereby presented as a witness in support of the application of.....for the pension provided by the Act of 1910, as amended by the Act of [illegible]19 and the Constitutional Amendment of 1920, 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?.....

2. How long and since when have you known.....applicant

3. Where does she now reside, and since when has she been, continuously, a bona fide, resident citizen of this State?.....

4. When and to whom was she married?.....How do you know?.....

5. How long and since when did you know.....her husband?.....

6. When and where did.....the husband of applicant, die?.....

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

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

9. When, where and in what Company and Regiment did.....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 .....day of....., 192.....

.....
(Witness)

....., Ordinary
of.....County.
(SEAL OF ORDINARY)

June 30
July 30
Aug 30
90

FILED
APR 9 1934
VETERANS SERVICE OFFICE
A. L. HENSON, Director

TO PAY-
1930. $ 85
Cig. & C. Tax. $
TOTAL.

C/ Register, Clinch Co. 6/1/35
Clinch Co.

For Clinch County

Application for Expenses of Last Illness and Funeral

(UNDER ACT OF 1919)

Kate C. Pafford, Ordinary

For: Mrs. Elizabeth S. Register
(Name of Pensioner)

Date of Death: September 15, 1933

Amount: $ ~~175.00~~ 90.00

PAID TO ORDINARY ON THIS CLAIM:

DATE	FUND FROM WHICH PAID	$
1934 2-27	C&C	90 00
1935 3-25	1920	85 00
	TOTAL	175 00

Approved, and ordered paid,
FEB 27 1934, 193
A. L. HENSON,
Director, Veterans Service Office.

—STATEMENT—

Homerville, Ga., Sept 19 1933

M. Levy Register
Funeral for Mrs Elizabeth Register
In Account With

HOMERVILLE HARDWARE & FURNITURE CO.

1 Casket	125 00
1 Vault	50 00
	175 00

Received Payment
Sept 19 1933
Homerville Hdwe & Furn Co
By T. C. Crenshaw

I, have this day received from Kate C/ Pafford, Ordinary Clinch County, Georgia, $85.00 balance of funeral expenses for Mrs. Elizabeth S. Register deceased, widow pensioner.

This March, 11th. 1935.

Levy Register

I have this day received from Kate C. Pafford, Ordinary of Clinch County, Georgia, $90.00 in part payment on the funeral expenses of Mrs. Elizabeth S. Register, deceased, widow pensioner of Clinch County, Georgia.

This March, 26th. 1934.

Levy Register

Homerville, Ga. Dec. 18th. 1933.

Hon. A.L. Henson,
Atlanta. Ga.

Dear Mr. Henson:

Find enclosed application for funeral expenses for Mrs. Elizabeth S. Register, deceased widow pensioner of Clinch County.

Yours very truly,
Kate C. Pafford
Ordinary.

Application for
Payment of Expenses of Last Illness and Funeral

(Under Act of 1919)

(To be disbursed by the Ordinary)

GEORGIA, Clinch County:

Before me, the Ordinary of said County, comes Levy Register, of said County, who, after being duly sworn, on oath says that he knew Mrs. Elizabeth S. Register 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 widow pensioner LEFT ~~NO WIDOW and~~ NO ESTATE of ANY KIND OR VALUE sufficient to pay the expenses of last illness and funeral, which amounted to the sum of $ 175.00, as shown by sworn statements FULLY and COMPLETELY ITEMIZED, hereto attached.

Sworn to and subscribed before me,
this the 11 day of Oct 1933.
Kate C. Pafford Ordinary.

Levy Register

CERTIFICATE OF THE ORDINARY

GEORGIA, Clinch County.

I certify that Levy Register 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. Elizabeth S. Register 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 11th day of Oct., 1933.

(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 Veterans Service Office for approval and no money must be paid out until it is returned to you as your authority to make the payment.

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

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

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

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

Georgia, Clinch County.

I, Levy Register, do solemnly swear that attached itemized bill for funeral expenses of Mrs. Elizabeth S. Register, widow pensioner of Clinch County, Ga. were paid by me and that said widow pensioner did not leave any estate of value sufficient to pay funeral expenses.

This Oct. 11th. 1933. Levy Register

Sworn to and subscribed before me
this Oct. 11th. 1933,
Kate C. Pafford
Ordinary Clinch County, Ga.

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

March, 29th. 1930.

Hon. R. deT Lawrence,
Commissioner of Pensions,
Atlanta, Georgia.

Dear sir:-

I am enclosing the affidavit of Mrs. Martha Sirmans and Mrs. Mary Weaver to be considered by you in connection with the Pension Application of Mrs. Elizabeth Register, widow of A.R. Register, which has already been sent in to you.

I would be glad for you to give this your careful attention, and if possible, to grant it.

Yours very truly,
Kate C. Pafford.
Ordinary.

outside of the State of Georgia for more than twelve (12) months immediately preceding date of death.

Yourefery truly,
Kate C. Pafford.
Ordinary.

GEORGIA, CLINCH COUNTY:

Personally comes before the undersigned Ordinary of said county, Mrs. Martha Sirmans, age 78, and Mrs. Mary Weaver, age 80, both of said county, and who are personally known to me as persons of good repute and veracity, and who are known to me to be the sisters of the late Abraham R. Register of said county, and who being duly sworn deposes and says:

That they the said Martha Sirmans and Mary Weaver both of their own knowledge, know that their said brother, A.R.Register, enlisted in the Georgia Malitia for service in the Confederate Army in the spring of 1864, and that he was in said service continuously until the close of the war, returning home in the spring of 1865 but they do not remember just where he was mustered out or discharged from the service at; and they remember that he returned home to Dupont, Ga., on the train.

Sworn to and subscribed before me
this the 28th day of March, 1930.

Martha Sirmans

Mary Weaver

Kate C. Pafford

Ordinary, Clinch Co. Ga.

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

Feb. 14th, 1930.

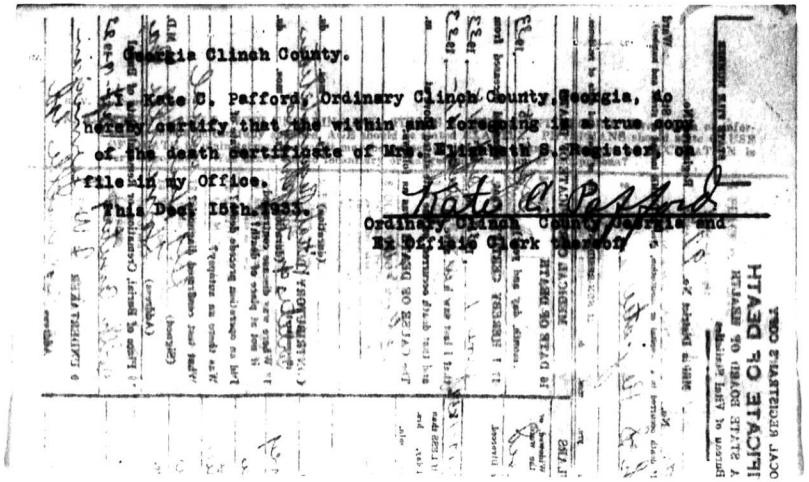
Hon. R. [illegible] Lawrence,
Commissioner of pensions,
Atlanta. Ga.

Dear Sir:

I am sending in application of Mrs. Elizabeth S. Register, widow of Abraham R. Register, to get on the widows pension roll of Clinch County. Mrs. Register and the witnesses, Mrs. Sirmans and Mrs. Weaver are all very old and do not remember the day and month of the marriage of Mr. and Mrs Register, but well remember the occasion. While they are advanced in years they are very active, keeping up with the topics of the day. and are known for their truthfulness and honesty. I'm very sorry we cannot get facts as to the exact dates of his service in the army and date of his discharge. but I understand that you have record that he had enlisted in Clinch County in 1864.

Hoping this application will be sufficient evidence.

Yours very truly,
Kate C. Pafford.
Ordinary.



Georgia Clinch County.

I, Kate E. Pafford, Ordinary Clinch County, Georgia, do hereby certify that the within and foregoing is a true copy of the death certificate of Mrs. Elizabeth P. Register, on file in my Office.

This Dec. 15th. 1933.

Kate E Pafford
Ordinary Clinch County, Georgia and
Ex Officio Clerk thereof

By giving this widow the "Benefit of the doubt" there seems sufficient evidence for a pension.

Will have to give "Benefit of doubt" as there is no evidence of length of service, As he returned home after the war it is presumed he was with his Co at its close.

LOCAL REGISTRAR'S COPY

CERTIFICATE OF DEATH

GEORGIA STATE BOARD OF HEALTH
Bureau of Vital Statistics

STATE FILE NUMBER

1 PLACE OF DEATH
State—Georgia.
County Clinch Militia District No. 970 Registered No.
City or Town Homerville Ga. No. St. Ward
(If death occurred in a hospital or institution, give its NAME instead of street and number).

2 FULL NAME Mrs. Elizabeth S Register
(a) Residence
(Usual place of abode, street and number)
Length of residence in city or town where death occurred yrs. mos. ds. If NON-RESIDENT give city or town and state of residence.

PERSONAL AND STATISTICAL PARTICULARS

3 SEX	4 Color or Race	5 Single, Married, Widowed, or Divorced, (write the word).
Female	white	widowed

5a Name of Husband or Wife, if Married, Widowed or Divorced.

6 DATE OF BIRTH (month, day and year) May, 17-1854

7 AGE Years Months Days If LESS than 1 day, hrs. or min.

8 OCCUPATION
(a) Trade, Profession or particular kind of work Housewife
(b) General nature of Industry Business or Establishment in which employed (or employer)

9 BIRTHPLACE (State or Country) DuPont, Ga.

10 NAME OF FATHER Benjamin Stalvey

11 BIRTHPLACE OF FATHER (State or Country) Georgia

12 MAIDEN NAME OF MOTHER Rhoda Register

13 BIRTHPLACE OF MOTHER (State or Country) Georgia

14 The Above is True to the Best of My Knowledge.
(Informant) Levy Register
(Address) DuPont Ga.

15
Filed Sept 30 1933
Registrar Folks Hufford

MEDICAL CERTIFICATE OF DEATH

16 DATE OF DEATH
(month, day and year) Sept-18- 1933

17 I HEREBY CERTIFY, That I attended deceased from June 1, 1933, to Sept-18, 1933
that I last saw her alive on Sept-17-, 1933
and that death occurred, on the date stated above at m.
The CAUSE OF DEATH was as follows:
myocarditis

(duration) yrs. mos. ds.
CONTRIBUTORY Vital Regulation
(duration) yrs. mos. ds.

18 Where was disease contracted if not at place of death?
Did an operation precede death? Date of
Was there an autopsy?
What test confirmed diagnosis? usual
(Signed) H. T. Huey M.D.
(Address) Homerville Ga

19 Place of Burial, Cremation, or Removal Date of Burial
North Amitery Sept-19-1933

20 UNDERTAKER J. W. Jernigan
Address Homerville Ga.

R. V. S.—Form 11.

N. B.—WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. AGE should be stated EXACTLY. PHYSICIANS should state CAUSE OF DEATH in plain terms, so that it may be properly classified. Exact statement of OCCUPATION is very important. Was death due to insanitary or dangerous conditions or occupations?

February 18, 1930.

Mrs. Kate C. Pafford,
Ordinary of Clinch Countyh,
Homerville, Ga.

My dear Judge:

The application of Mrs. Elizabeth S. Register to be placed on the pension roll as the widow of Abraham R. Register, 2nd Company, 5th Military District of Clinch County has been received.

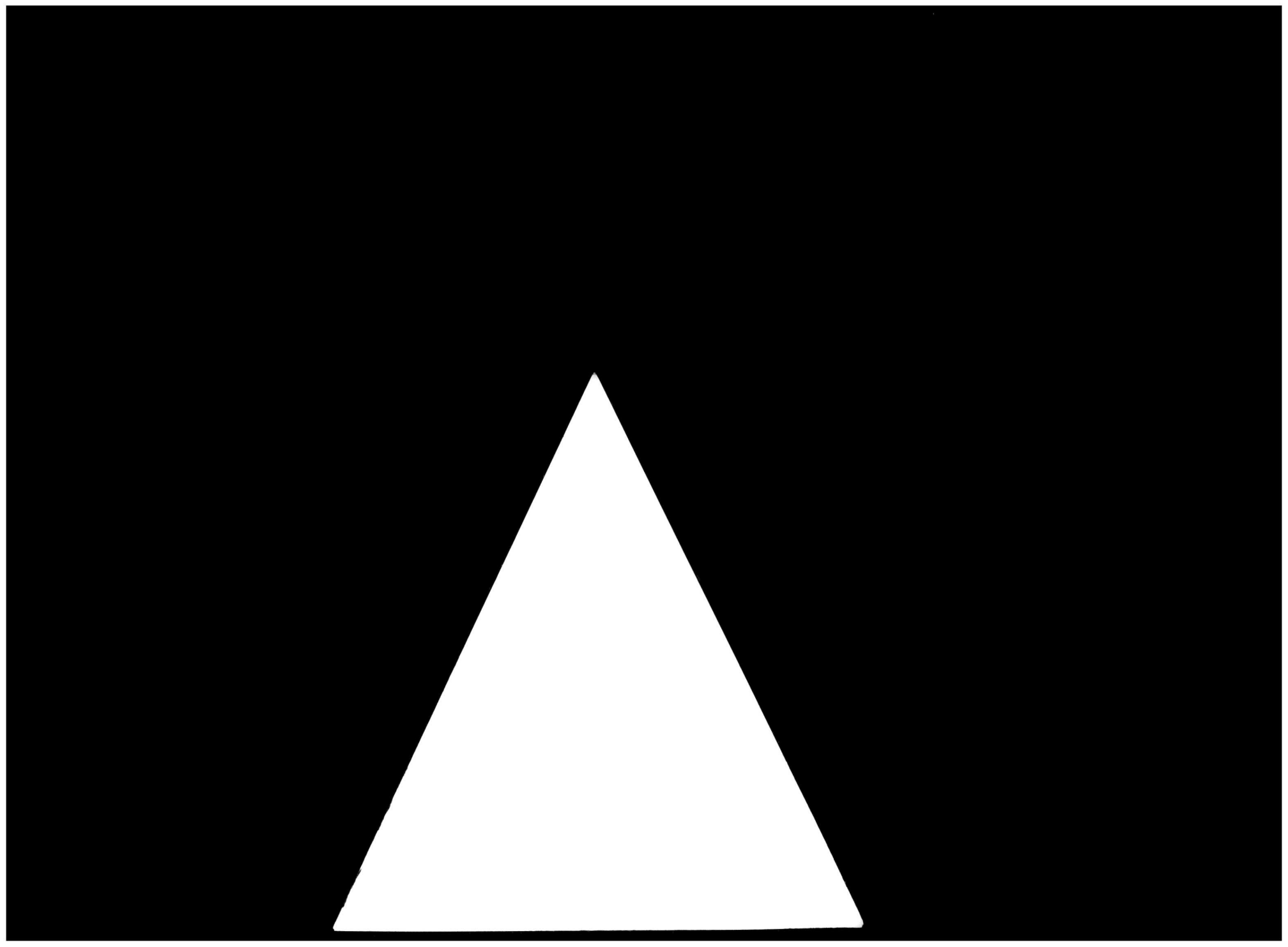
It has been established that this soldier was enlisted as a member of the 2nd. Co. of the 5th. Military District, Capt. R. B. Johnson, but before the record is complete, proof must be furnished that Abraham R. Register performed as much as six month's actual military service and was honorably discharged.

The affidavit of Mrs. Simmons and Mrs. Weaver will be accepted as proof of marriage before 1861, but there is not sufficient proof of service as yet to make it possible to approve the application.

With kind regards,

Very truly yours,

Commissioner of Pensions



Ordinary's Certificate

STATE OF GEORGIA,

CLINCH. COUNTY.

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

Sworn under my hand and official seal of office this 6th. day of Oct. 1919.

(SEAL) W.V.Musgrove 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. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Registered
Ordinary
Clinch Co.

No. 1

Widow's Pension 19-20

Under Act 1910—as Amended by Act of 1919.

County Clinch

Name Mrs. Katie Register

Widow of John T. Register

Company G

Regiment 50th

Approved

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-9-1919

Ordinary's Certificate

STATE OF GEORGIA,
CLINCH. COUNTY.

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

Sworn under my hand and official seal of office this 6th day of Oct. 1919.

(SEAL) W.V.Musgrove 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. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Register, Katie
No. 56
Widow's Pension
Under Act 1910—as Amended by Act of 1919.
County Clinch
Name Mrs Katie Register
Widow of John T Register
Company K
Regiment 50
Approved
J. W. LINDSEY,
Commissioner of Pensions.
Byrd Printing Co., State Printers, Atlanta.
10-9-1919

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

Questions for Applicant

STATE OF GEORGIA,
CLINCH. COUNTY.

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

1. What is your name, and where do you reside? Katie Register near DuPont, Ga.
2. How long and since when have you been a continuing resident of the State of Georgia? all of my life.
3. When, where and to whom were you married? June 27th, 1878 near DuPont, Ga. too John T. Register.
   a. Have you married since the death of first and soldier husband? no
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) March 4th 1862. Co. G. 50 Regment.
5. When and where did the commands of your husband surrender or discharge from the army? Appomattox Court House, Va.
6. Was your husband personally present at the time of the surrender or discharge of this command? no
7. If he was not present state clearly where he was? he was in prison.
8. Where was his command when he left? I dont know.
   a. For what cause did he leave his command? he was 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? he was woundad in the nack.
   f. What effort did he make to return to his command? ---
   g. In what way was he prevented from going back to Command by being in prison.
   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? I dont know.
   j. When and where did your first husband die? Dec 15th, 1915, near DuPont, Ga.
   k. Were you residing together when he died? yes.
   l If not, how long had you resided apart? ---
   m. Are you now a widow? yes.
9. Have you or your husband heretofore been paid a pension by the State? no

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

Sworn to and subscribed before me this the 6th day of Oct. 1919.
W.V.Musgrove Ordinary
of Clinch. County.
(SEAL)

Katie her X Register
mark

Questions for 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? C.W.Curry, Stockton, Ga. R.F.D.

2. How long and since when have you known Mrs Katie Register, applicant? since about 1870.

3. How long and since when has she continuously resided in this State? (Give date.) ever since I first knew here, and I under-stand all of her life.

4. When and to whom was she married? June 27th, 1878 John T.Register How do you know? by general repretation.

5. How long and since when did you know John T.Register, her husband? since March 4th, 1862

6. When and where did John T.Register, the husband of applicant, die? near DuPont, Ga Clinch County.

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

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

9. When, where and in what Company and Regiment did John T.Register, enlist? March 4th, 1862 Homerville, Ga Co G. 50 Regment.

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? untill he was wounded, and captured.

12. When and where did his Command surrender, and was discharged? Appomattox Court House in Va.

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

14. Was the husband of applicant personally present at surrender? he was in prison. If not where was he? in prison. When, where and for what cause did he leave Command? (Give date.) By whose authority did he leave his Command? And how long was he granted leave? How do you know all this? because I served with him untill he was captured.

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

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 6th. day of Oct. 1919.

C W his x Curry
Mark

W.L. Musgrove Ordinary of CLINCH. County.

(SEAL)

How do you know all this?

because I served with him untill he was captured.

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

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 6th. day of Oct. 1919.

W. W. Thompson Ordinary

of CLINCH. County.

(SEAL)

C. W. his + Curry mark

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

STATE OF GEORGIA,

CLINCH. COUNTY.

Personally before me comes J.L. Clark. known to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. Kattie Register., who made the foregoing affidavit, is the lawful widow of John T. Register. who died in Clinch. County in said State of Ga. on 15th. day of Dec. 1915, and that she has not since remarried. That she became the wife of John T. Register. on the 27th. day of June 1878, and that she and he had resided together as man and wife continuously since 27th. day of June. 1878, and that the ha [illegible] he died.

Sworn to and subscribed before me, this the 6th. day of Oct. 1919.

W. W. Thompson Ordinary

of CLINCH. County.

(SEAL)

J. L. Clark

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

STATE OF GEORGIA,
CLINCH. COUNTY.

Personally before me comes J.L.Clark. known to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. Kattie Register., who made the foregoing affidavit, is the lawful widow of John T.Register. who died in Clinch. County in said State of Ga. on 15th. day of Dec. 1915, and that she has not since remarried. That she became the wife of John T.Register. on the 27th day of June 1878, and that she and he had resided together as man and wife continuously since 27th. day of June. 1878, and that the he XXXXX

~~[illegible]~~

~~[illegible]~~

Sworn to and subscribed before me, this the 6th. day of Oct. 1919.
W.T.Musgrove Ordinary of CLINCH. County.
(SEAL)

J L Clark

United States of America.

J Register, of the County of Clinch, State of Ga, do solemnly swear that I will support, protect, and defend the Constitution and Government of the United States against all enemies, whether domestic or foreign; that I will bear true faith, allegiance, and loyalty to the same, any ordinance, resolution, or laws of any State, Convention, or Legislature, [illegible] contrary notwithstanding; and further, that I will faithfully perform all the duties which [illegible] by the laws of the United States; and I take this oath freely and voluntarily, [illegible] reservation or evasion whatever.

John T Register

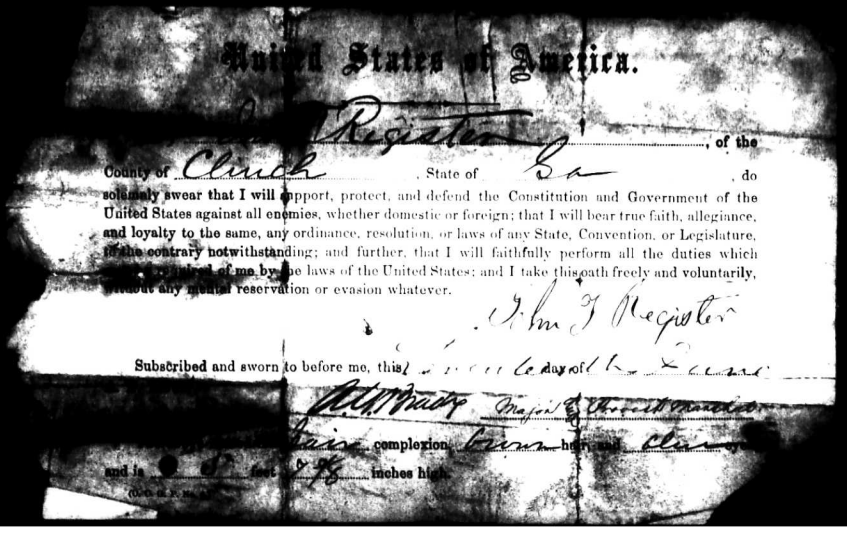
Subscribed and sworn to before me, this [illegible] day of [illegible] June

[illegible]

reservation or evasion whatever.

John J Register

Subscribed and sworn to before me, this 12 day of June



United States of America.

[illegible] Register, of the County of Clinch, State of Ga, do solemnly swear that I will support, protect, and defend the Constitution and Government of the United States against all enemies, whether domestic or foreign; that I will bear true faith, allegiance, and loyalty to the same, any ordinance, resolution, or laws of any State, Convention, or Legislature, to the contrary notwithstanding; and further, that I will faithfully perform all the duties which [illegible] required of me by the laws of the United States; and I take this oath freely and voluntarily, without any mental reservation or evasion whatever.

John T Register

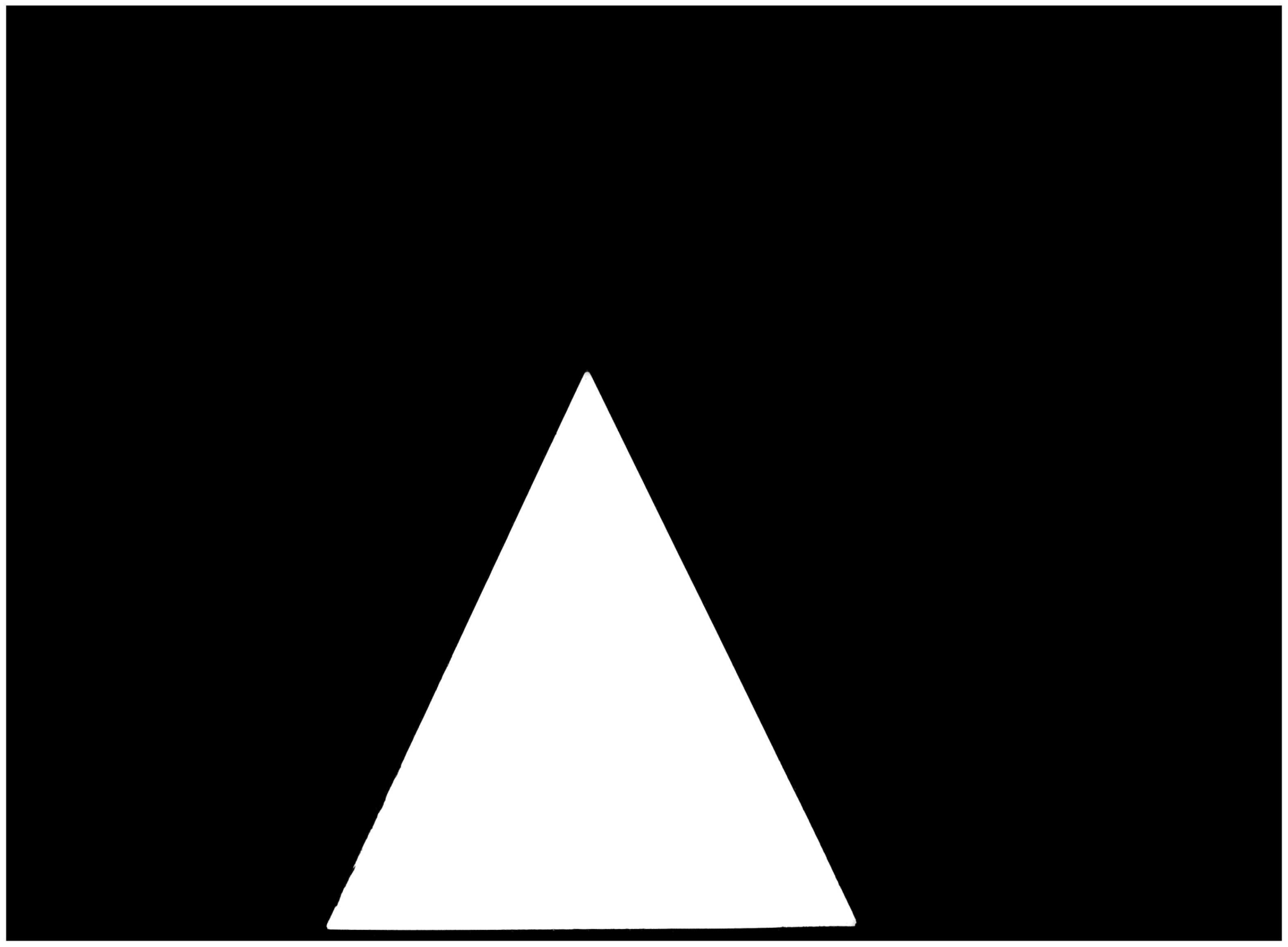
Subscribed and sworn to before me, this [illegible] day of [illegible]

[illegible] Major [illegible] Provost Marshal

[illegible] complexion [illegible] hair, and [illegible] eyes

and is [illegible] feet [illegible] inches high.

(C. O. G. P. No. [illegible])



Private May 1, 1862.
Sect 3 fingers, 2d
Manassas, Aug. 30, 1862
Paroled, Apr. 1865.

Witness was 2d Corpl
and 4th Sergt; and
was paroled, Lynchburg,
Va., 1865

Entered, Roster Office
10/29/1913

OK pro 1914

Clinch Co

No.

Widow's Pension

UNDER ACT 1910.

County Clinch

Name Mary Register

Widow of S. W. Register

Co G. 50th Va Regiment

J. W. LINDSEY,
Commissioner of Pensions.

Chas. P. Byrd, State Printer.

10/28/1913

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

STATE OF GEORGIA,
Clinch County.

Personally before me comes Mrs. Lou Register 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? Mary Register nee Lou Clinch Co. 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? to Lou Register Jan 1857 in Clinch Co.
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.) March 4th 1862 at Homerville Ga Company K. 50th Ga Regiment.
5. When and where did the Commands of your husband surrender or discharge from the army? In Virginia in April 1865.
6. Was your husband personally present at the time of the surrender or discharge of this Command? He was.
7. If he was not present state clearly where he was? ——
8. Where was his Command when he left? he was with it
   a. For what cause did he leave his command? —
   b. By whose authority did he leave his Command? —
   c. For how long was he granted leave of absence? —
   e. What was his physical condition when he left his Command? —
   f. What effort did he make to return to his command? —
   g. In what way was he prevented from going back to Command? —
   h. Was he captured by the enemy at any time? no
   i. If so, when and where captured and where held as a prisoner, and when and for what cause released? he was not captured.
   j. When and where did your husband die? May 9th 1908 at Homerville Ga Clinch Co.
   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.) None
10. What property of any kind have you sold or given away since Nov. 4, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.) None
11. What property of any description of any value have you now? Nothing 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? None

Sworn to and subscribed before me this the 22 day of Oct 1913.

Mary Register

J. J. Davis Ordinary.
of Clinch County.

Widow's Pension
UNDER ACT 1910.

County Clinch
No.

Name Mary Register
Widow of Lou Register
Co. I. 50th Ga Regt.

J. W. LINDSEY,
Commissioner of Pensions.

Chas. P. Byrd, State Printer.

Recorded May 17 1882
Book 3 Page 21
Marriage Book
Clinch Co. Ga.

Witness my hand and official seal this 10th day of Jan 1913

Estus Rountree
Ordinary

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? C W Curry In Clinch Co. Ga
2. How long and since when have you known Mrs. Mary W. Register applicant? 70 years
3. How long and since when has she continuously resided in this State? (Give date.) Lived in Ga about all her life.
4. When and to whom was she married? R.W. Register How do you know? By living with them and being at their home often when they were married by Lee Register Justice of the peace
5. How long and since when did you know her husband? I have known him 58 years the was a soldier
6. When and where did R. W. Register the husband of Applicant die? In May 1908 at Homerville in Clinch Co.
7. Where the Aplicant and her husband living together as husband and wife at the date of his death? yes
8. If not, how long did they live apart before his death? — Were they divorced? —
9. When, where and in what Company and Regiment did R.W. Register enlist? 4th Day of March 1862 at Homerville Ga Company G. 50th Ga Regiment
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? I think he served until the close of the war 1865 in fact I know he did.
12. When, and where did his Command surrender, and was discharged? in Virginia near Lynchburg.
13. Were you personally present when it was surrendered? yes If not where were you was present and how came you there? —
14. Was the husband of applicant personally present at surrender? Yes If not where was he? My last recollection he was there when, where and for what cause did he leave Command? (Give date.) I think he was present By whose authority did he leave his Command? — and how long was he granted leave? — How do you know all this? By being a member of same Co. and Regiment
15. For what cause, if you know of your own knowledge was he prevented from returning to his Command? he was present I think
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 4th day of Oct 1913 — C W Curry

J. I. Dame Ordinary,
of Clinch County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,
County.

Personally before me comes who on oath says that they are freeholders of said County and that they know of said County and know what property she owned on 4th Nov. 1908, and its cash value to be as set out by Schedule (A) as follows.

Schedule (A).

Personal property	$
Notes and accounts due	$
Total	$

Schedule (B).

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

Personal property	$
Money, Notes and accounts	$

Schedule (C).

We also know what property she has now in her possession, use and control to wit:

Acres of land worth	$
Horses and Mules	$
Cows and Hogs	$
Other property	$
Income and earnings	$
Total Value of all property and effects	$

Sworn and subscribed before me this the day of 19

Ordinary,
of County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch County.

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

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

That the Tax Returns Mary Register Returned for Tax is for 1908 $ None for 1910 $ None

Sworn under my hand and official seal of office this 4th day of Oct. 1913 So help me God.

SEAL.

J. I. Dame Ordinary,
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.
4 All affidavits must be made before the Ordinary.
3 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.

OFFICE OF
J. T. DAME
ORDINARY
CLINCH COUNTY

HOMERVILLE, GA. _____ 190

Georgia Clinch County.

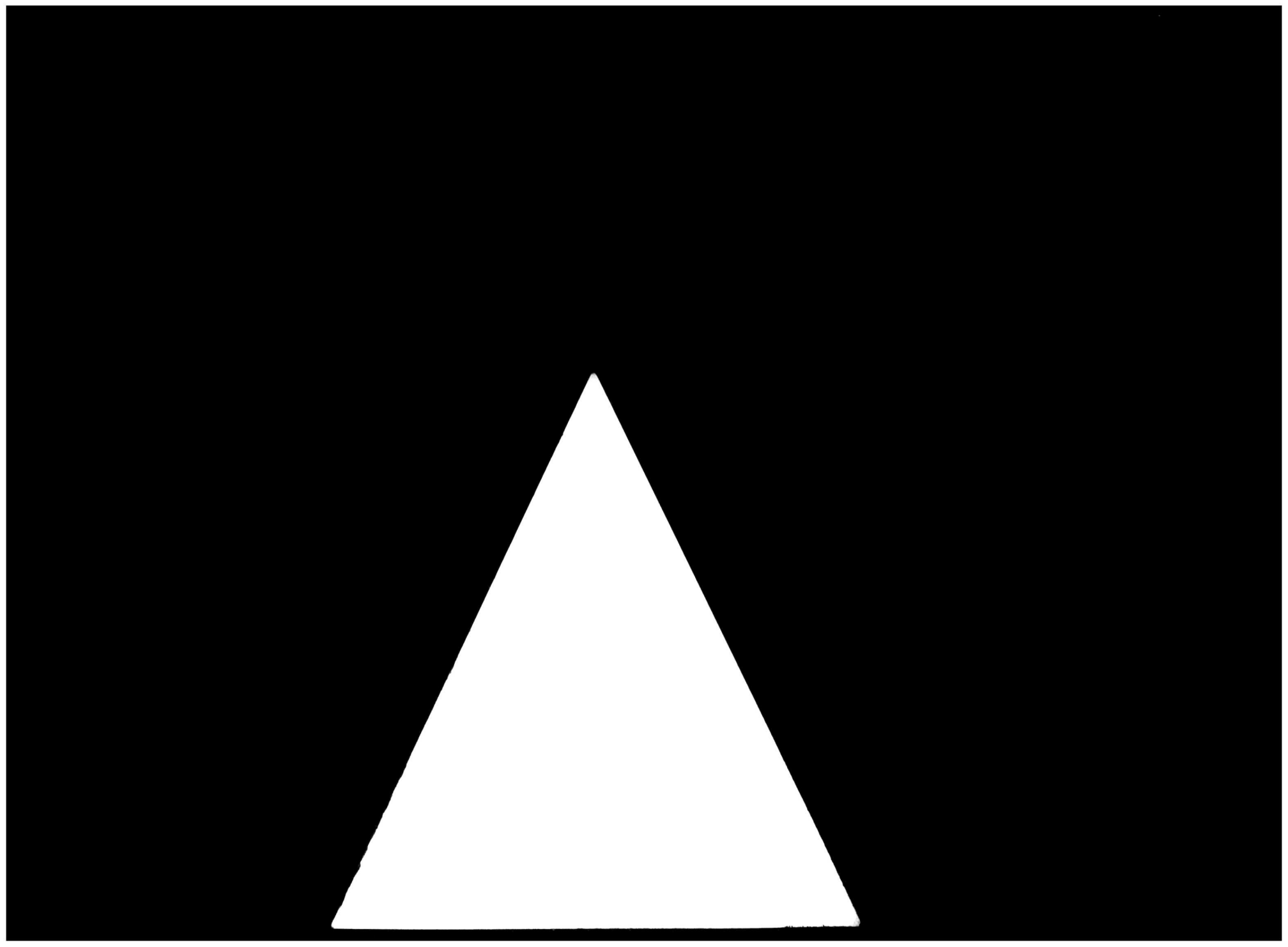
Personaly appeared before me C.A. Smith who on oath says that he has been personally acquainted with D.W Register and his Wife Mary Register all his life while he was not present at the Marriage but he is satisfied beyound any doubt that they was married as they have raised a large family and have always been recognized by the people General as man & Wife

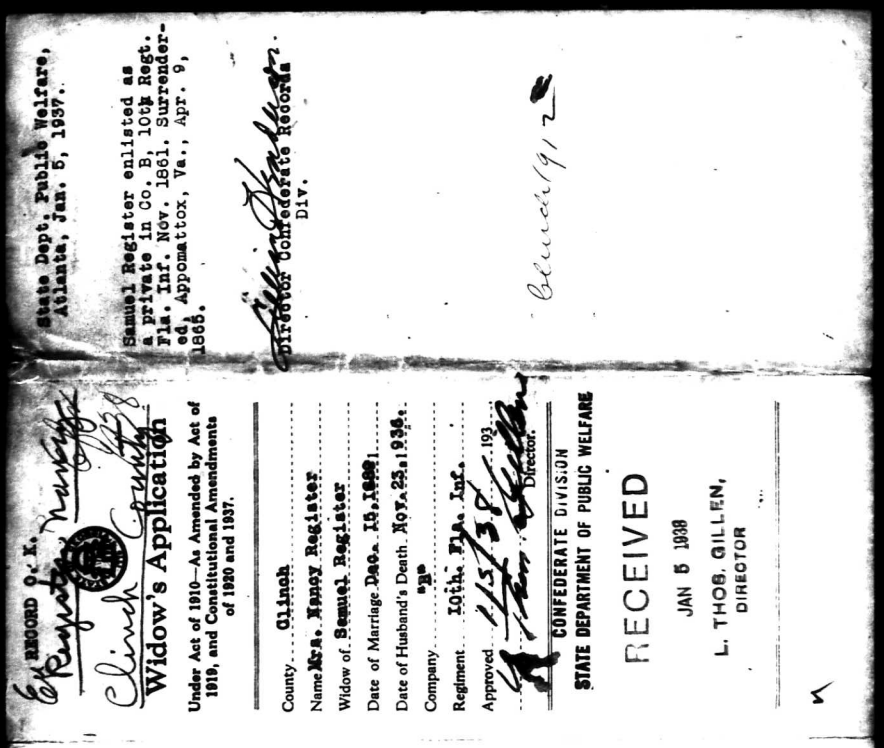
C.A. Smith

Sworn to and subscribed before me this 22nd day of Oct 1913.

J.T. Dame. Ordinary C.C.

Records destroyed by fire in 1867 Could not get Copy of Marriage License.





State Dept. Public Welfare,
Atlanta, Jan. 5, 1937.

Samuel Register enlisted as a private in Co. B, 10th Regt. Fla. Inf. Nov. 1861. Surrendered, Appomattox, Va., Apr. 9, 1865.

Director Confederate Records Div.

Record O. K.
Clinch County

Widow's Application

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

County Clinch
Name Mrs. Nancy Register
Widow of Samuel Register
Date of Marriage Dec. 15, 1860.
Date of Husband's Death Nov. 23, 1936.
Company "B"
Regiment 10th Fla. Inf.
Approved 1/5/38 193
Director.

CONFEDERATE DIVISION
STATE DEPARTMENT OF PUBLIC WELFARE

RECEIVED
JAN 5 1938
L. THOS. GILLEN,
DIRECTOR

Ordinary's Certificate

STATE OF GEORGIA,

Clinch COUNTY.

I, Kate C. Pafford, Ordinary of said County, do certify that I know Mrs. Nancy Register 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 Mrs. Belle Allen 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 21st day of December, 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.

State Dept. Public Welfare,
Atlanta, Jan. 5, 1937.

Samuel Register enlisted as a private in Co. B, 10th Regt. Fla. Inf. Nov. 1861. Surrendered, Appomattox, Va., Apr. 9, 1865.

Director Confederate Records Div.

Clinch Co. Ga. Nov. 23 1936

Ex RECORD O. K.
Reynolds

Clinch County

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 Register
Widow of Samuel Register
Date of Marriage Dec. 15, 1880.
Date of Husband's Death Nov. 23, 1936.
Company "E"
Regiment 10th Fla. Inf.
Approved 1-15-38 [signature] Director.

CONFEDERATE DIVISION
STATE DEPARTMENT OF PUBLIC WELFARE

RECEIVED
JAN 5 1938
L. THOS. GILLEN,
DIRECTOR

Ordinary's Certificate

STATE OF GEORGIA,

Clinch COUNTY.

I, Kate C. Pafford, Ordinary of said County, do certify that I know Mrs. Nancy Register 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 Mrs. Belle Allen the witness who swears to 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 21st day of December, 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 Register 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 Register

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. September 28th. 1854 Age? 83

3. (1)When, (2)where and (3)to whom were you married?
Dec. 15, 1880, Hamilton Co. Fla. to Samuel Register/

a. Have you married since the death of first and soldier husband? No.
b. When and where did your first husband die? Clinch County. Nov 23. 1936
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 has.
g. If so, when and for what cause were you or your husband placed on the roll? Service in Army

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 Infantry, 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?
e. What was his physical condition when he left his Command?
f. What effort did he make to return to his Command?
g. In what way was he prevented from going back to his Command?
h. Was he captured by the enemy at any time?
i. If so, when and where? In what prison was he held and when was he released?

Sworn to and subscribed before me, this the 21st. day of December, 1937.

Kate C. Pafford, Ordinary
of Clinch County.
(SEAL OF ORDINARY)

Mrs. Nancy Register
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 ....., 193...

....., Ordinary,

.....County.

Questions for Witness as to Marriage and Service of Husband.

STATE OF GEORGIA,
Clinch COUNTY.

Mrs. Belle Allen of said State and County is hereby presented as a witness in support of the application of Mrs. Nancy Register 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) Mrs. Belle Allen, Fargo, Clinch County, Georgia.

2. How long and since when have you known Mrs. Nancy Register applicant All my life. I Was in my Home)

3. Where does she now reside, and since when has she been, continuously, a bona fide, resident citizen of this State? She lives with me at Fargo, Ga. has lived in Georgia all her life

4. When and to whom was she married? Dec. 18, 1890 How do you know?

5. How long and since when did you know Samuel Register her husband? Since Dec. 18, 1890. I was then five years of age.

6. When and where did
the husband of applicant, die? Clinch County, Georgia, November 23, 1936.

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? XXX
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
21st day of December, 1937.
State of Georgia, Ordinary
of Clinch, County.
(SEAL OF ORDINARY)

Mrs Belle Allen
(Witness)

GEORGIA,
CLINCH COUNTY.

Personally appeared me the undersigned officer, J. L. Langdale to me well known, who on oath says that he is 58 years of age, and has resided in Clinch County all his life, and has known Mrs. Nancy Register all his life, and that she resided with the late Mr. Samuel Register, as his wife for forty years prior to the death of her husband, the late Samuel Register, whose death occurred during November 1936.

J. L. Langdale

Sworn to and subscribed before me this 3d days of January, 1938.

Kate C. Pafford
Ordinary Clinch County, Ga.

Georgia, Clinch County.

Personally appeared before me the undersigned Officer, J.T. Dame, to me well known, who on oath says that he has resided in Clinch County, about forty five years, that he was Ordinary of said County for 12 years, and that Samuel Register, deceased pensioner was on the pension roll during his terms in Office, and that he knows from general reputation that Mrs Nancy Register and Samuel Register resided together as man and wife for at least forty years prior to his death on Nov. 23, 1936.

J.T. Dame

Sworn to and subscribed before me this Jan. 4th. 1938.

Kate C. Pafford
Ordinary Clinch County, Georgia.

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLANTA

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

WHEREAS:

MRS. NANCY REGISTER, WIDOW OF SAMUEL REGISTER,

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, 1920, 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. Thos. "Pat" Gilleam

Director, Confederate Division
State Department of Public Welfare

GEORGIA, CLINCH COUNTY.

I, Kate C. Pafford, Ordinary Clinch County, Georgia, do hereby certify that the within and foregoing is a true and correct copy of the death certificate of Samuel Register, which is of file and of record in my Office.

This Jan. 4th. 1938.

Kate C Pafford

Ordinary Clinch County, Georgia and Ex-Officio Clerk thereof.

CERTIFICATE OF DEATH

GEORGIA DEPARTMENT OF PUBLIC HEALTH

BUREAU OF VITAL STATISTICS

Registered No. 1076

1. PLACE OF DEATH
County Clinch Militia District (Number and Name) 1219. Fargo State of Georgia
City or Town Length of residence in this city or town: Yrs. Mos. Ds. NON-RESIDENT (Yes or No)
Street and Number (No.) (Street) Ward
(If death occurred in a hospital, give its name instead of street and number)

2. FULL NAME Samuel Register
Residence (City or Town) Councill Ga (Street and Number) (State)

PERSONAL AND STATISTICAL PARTICULARS

3. SEX	4. COLOR or RACE	5. Single, Married, Widowed, Divorced (write the word)
male	White	married

6. DATE OF BIRTH (month, day, year)

7. AGE: Years 94 | Months 6 | Days 9 | If less than one day: Hours ____ Minutes ____

8. OCCUPATION
(a) Trade, profession or particular kind of work done, as spinner, sawyer, bookkeeper, etc. Retired Farmer
(b) Industry or business in which work was done, as cotton mill, sawmill, bank, etc.
(c) Date deceased last work at this occupation (month and year)
(d) Total years spent in this occupation

9. BIRTHPLACE (P. O. Address) Stockton Ga R#2

FATHER
10. NAME David Register
11. BIRTHPLACE (P. O. Address) North Carolina

MOTHER
12. MAIDEN NAME Matilda McDaniel
13. BIRTHPLACE (P. O. Address) D.K.

14. INFORMANT
(Signed) Dave Register
(Address) Fargo Ga

15. BURIAL PLACE
(Cemetery) Bonny Bluff
(Postoffice) Fargo Ga Date 11-23-1936

16. UNDERTAKER
(Signed) John Lovett
(Address) Valdosta Ga

MEDICAL CERTIFICATE OF DEATH

16. DATE OF DEATH Nov 13th 1936 at 6 P. M
(Month, Day, Year) (Hour)

17. I HEREBY CERTIFY, That I attended the deceased from
19__, to 19__
I last saw h__ alive on 19__, death is said to have occurred on the date and hour stated above.
The principal cause of death and related causes of importance in the order of onset and duration of each:

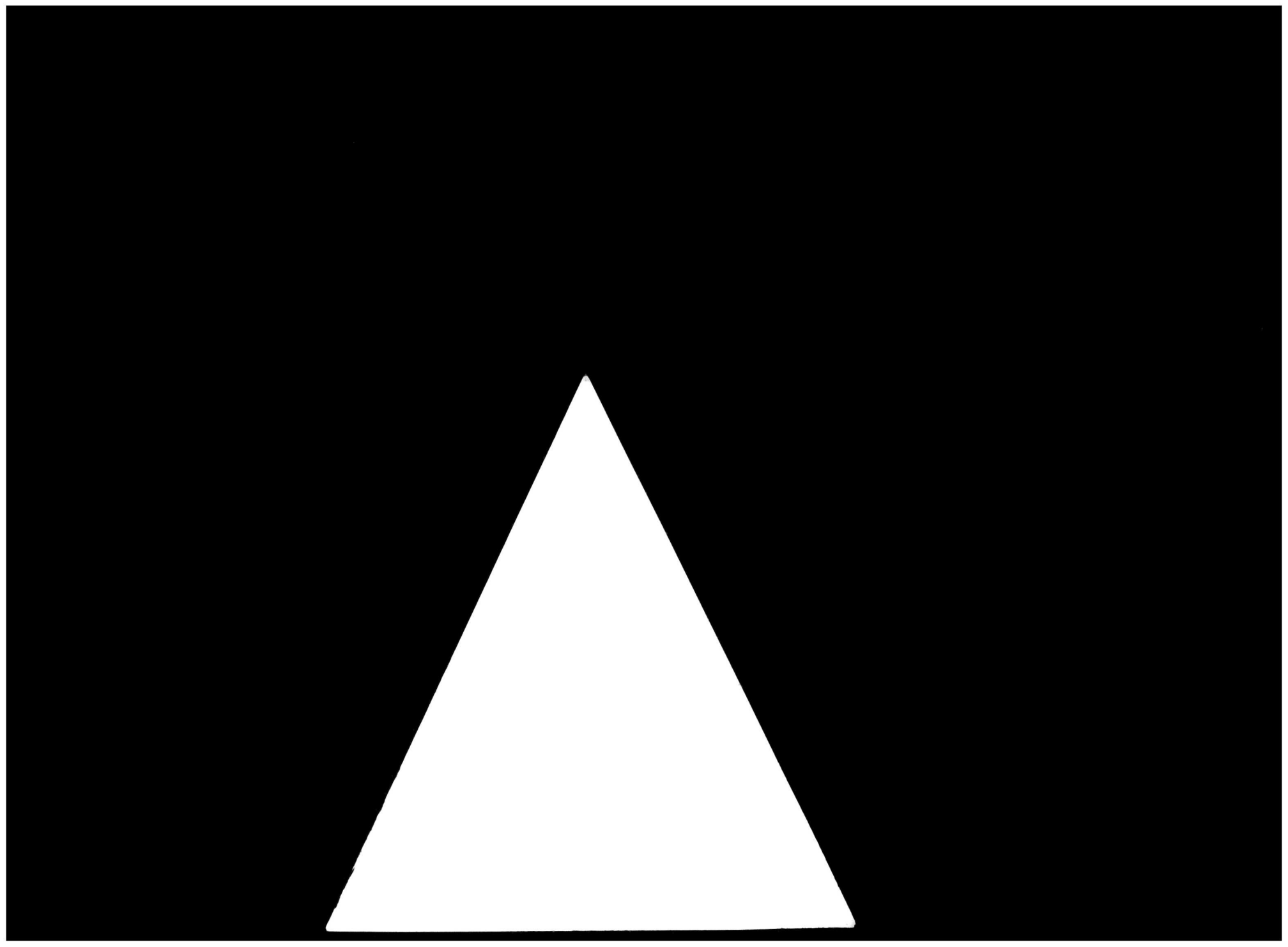
Other contributory causes of importance: Mr Register had no attending Doctor for about one year P

What test confirmed diagnosis?
(Specify whether autopsy, operation, laboratory, or clinical)
If death was due to external causes (violence) fill in also the following:
Was injury an accident, suicide, or homicide?
Where did injury occur?
(Specify city or town, if outside of limits, the county, and also the state)
Did injury occur in a home, public place or industry?
Manner of injury
Nature of injury
(Signed) M. D.
(Address)

18. FILED Sept - 15 - 1937
(Signed) Lott Tomlinson
(Local Registrar)

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. Cause of death should be stated in plain terms, so that it may be properly classified. Exact statement of occupation is very important. Was disease or injury caused by dangerous or insanitary conditions or occupation?____ Where was disease contracted if not at place of death?____

V.S.-2



NOTES.

In order to avoid unnecessary delays to applicants, and to enable all parties interested to understand the laws granting allowances to disabled soldiers, as well as the rules adopted by the Governor touching the payments provided, the following suggestions are submitted:

1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physician, and followed by a plain statement of facts showing the *extent of the disability*. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.

2. The law makes no allowance for an arm or leg, unless the arm or leg has been rendered *substantially and essentially useless*.

3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of life, etc." There is no qualification to the clause of the Act in reference to the arm or leg, but the limb must for all purposes be "substantially and essentially useless."

4. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."

5. If papers are returned for correction, and amendments are *added* to any of the affidavits, the amendments must be made *under oath* before an officer, and the proofs must show that the amendments have been duly sworn to.

6. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.

The Ordinaries of the several counties are specially requested to call the attention of the physicians and applicants to these points.

Register S. W.
Clinch Co.
Ly 50 1889

No. 22459

APPLICATION FOR ALLOWANCE.

FOR

Laws of Agreement

Applicant S. W. Register

County Clinch

Amount 15

Date of Warrant May 17

Entered on record May 17 1889

SECRETARY EXECUTIVE DEPARTMENT.

Waw
E 1959

NOTES.

In order to avoid unnecessary delays to applicants, and to enable all parties interested to understand the laws granting allowances to disabled soldiers, as well as the rules adopted by the Governor touching the payments provided, the following suggestions are submitted:

1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physician, and followed by a plain statement of facts showing the *extent of the disability*. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.

2. The law makes no allowance for an arm or leg, unless the arm or leg has been rendered *substantially and essentially useless*.

3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of life, etc." There is no qualification to the clause of the Act in reference to the arm or leg, but the limb must for all purposes be "substantially and essentially useless."

4. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."

5. If papers are returned for correction, and amendments are *added* to any of the affidavits, the amendments must be made *under oath* before an officer, and the proofs must show that the amendments have been duly sworn to.

6. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.

The Ordinaries of the several counties are specially requested to call the attention of the physicians and applicants to these points.

Registry S. W.
Clinch Co.
Ap 5 1889

No. 2259

APPLICATION FOR ALLOWANCE.

FOR

Loss of Three Fingers

Applicant S. W. Register

County Clinch

Amount 15

Date of Warrant May 17

Entered on record May 17 1889

W H H

SECRETARY EXECUTIVE DEPARTMENT.

Waw
5 1959

For Use of Applicants Who Have not Heretofore Drawn.

STATE OF GEORGIA,
Clinch County.

PERSONALLY appears S. W. Register of Clinch county, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has been such since the 8 day of August 1889; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Trinck in Company G, of 50 th Regiment of Georgia Volunteers Mercers, 's Brigade; that whilst engaged in such military service, at the 2nd battle of Manassas in the State of Virginia, on the 25 day of July 1862, he was wounded as follows: In the left hand by a minnie ball which caused the loss of three fingers they being amputated at the palm.

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

Sworn to and subscribed before me, this the 6th day of May 1889 } S W Register

E J Futch J P

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

Commissioned Officer's Affidavit.

STATE OF GEORGIA,
County.

PERSONALLY came before me ..... of the county of ..... State of Georgia, who, being duly sworn, says that he was a commissioned officer in Company ....., of ..... Regiment of ..... Volunteers, and that deponent knows ....., and that he received the wounds (or contracted the disease) in the military service, as stated in his foregoing affidavit, and that wounds (or disease) permanently disables the said ..... as stated by him in said affidavit. Deponent further states that said ..... is a *bona fide* citizen of this State and resides in ..... county.

.....

The foregoing affidavit, changed to suit the facts should be made by a commissioned officer of Company or Regiment. If the affidavit of such an officer is not obtainable, the following affidavit of three responsible citizens should be furnished:

STATE OF GEORGIA,
Clinch County.

PERSONALLY came Harris Tomlinson, John T. Register and G. N. Register citizens of Clinch county, in said State, who, being duly sworn, say that they are acquainted with S. W. Register and know that he received the wounds (or contracted the disease) in the military service, as stated by him in the foregoing affidavit; that said wounds (or disease) permanently disables applicant, as stated by him; that said applicant is a *bona fide* citizen of this State, and resides in Clinch county, and we are well satisfied that all the statements in his affidavit are true.

Sworn to and subscribed before me, this 6th day of May 1889
E J Futch
Justice of the Peace

Harris Tomlinson
John T. Register
G. N. Register

NOTE. Above affidavit *must* be made by three citizens *of the county of applicant's residence.*

STATE OF GEORGIA,
Clinch County.

PERSONALLY comes before me George Cornelius Ordinary of said county, L. C. Matton M.D. and H. J. Stapleton M.D. both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined S. W. Register and after such examination say that the applicant has been injured as follows: In the left hand by a ball which caused three fingers to be amputated at the hand leaving the index fingers.

Sworn to and subscribed before me this 6th day of May 1889
George Cornelius
ORDINARY.

L. C. Matton M.D.
H. J. Stapleton M.D.

READ NOTE.—The physicians will state fully the extent of the wound, and then give facts to show the extent of the disability resulting therefrom.

STATE OF GEORGIA,
Clinch County.

I, George Cornelius Ordinary of said county, do certify that I am well acquainted with S. W. Register 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. I also certify that the foregoing witnesses are persons of respectability, and that their statements are worthy of full credit and belief.

I further certify that ..... before whom the foregoing affidavits were made and power of attorney was signed, is a justice of the peace of said county, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 6th day of May 1889

George Cornelius
Ordinary Clinch County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
County.

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

In witness whereof I have hereunto set my hand and seal, this 6th day of May 1889

S. W. Register (L. S.)

Executed in the presence of us:
L. C. Matton
E J Futch J P

Eph. B. Homanville

STATE OF GEORGIA,
Clinch County.

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

I further certify that John T. Courson before whom the foregoing affidavits were made and power of attorney was signed, is a Justice of the peace of said county, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 5 day of March 1890

George Cornelius
Ordinary Clinch County.

Register S. W.
Clinch Co

1890.

No. 2437

APPLICATION FOR ALLOWANCE,

FOR THE BENEFIT OF THE SOLDIERS OF 1890.

Loss of Fingers
Applicant, S. W. Register
County, Clinch
Amount, 15.00
Date of warrant, Mch 10
Entered on record Mch 10 1890
O.H.A.
Warrant Handed to
W. A. Wright

STATE OF GEORGIA,
Clinch County.

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

I further certify that Thomas Conine N.P. before whom the foregoing affidavits were made and power of attorney was signed, is a Notary public of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature, and seal, this 2 day of March 1891.

Cornelius
Ordinary Clinch County.

Register S. W. Rs
Clinch Co

1891

No. 7693

Application for Allowance

FOR THE BENEFIT OF THE SOLDIERS OF 1891.

Loss of Fingers
Applicant, S. W. Register
County, Clinch
Amount, 15
Date of Warrant, Mch 17
Entered on record Mch 17 1891
W.A.W.
Warrant Handed to
W. A. Wright

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

PERSONALLY appears S W Register of Clinch county, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has been such continually since the 5th day of Aug 1839; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a private in Company G, of 50 th Regiment of Georgia Volunteers Dratons 's Brigade; that whilst engaged in such military service, at the battle of Manasses in the State of Virginia on the 6 day of July 1862, he was wounded as follows: in the Left Hand causing the Loss of three Fingers - Leaving the Thumb and Index finger

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

Sworn to and subscribed before me, this the 5 day of March 1890 } S W Register
John P. Courson J.P.

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

POWER OF ATTORNEY.

STATE OF GEORGIA
Clinch County.

KNOW ALL MEN BY THESE PRESENTS, That I, S W Register of Clinch county, in said State, do hereby appoint W. A. Wright of Fulton County my true and lawful attorney in fact, for me and in my name, to receive and receipt for what ever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 5th day of March 1890
S W Register [L. S.]

Executed in the presence of us:
Thomas Robert
John P. Courson J.P.

DIRECTION.

Send money to me as follows, by Express to Homerville P.O.
Clinch County, Georgia.
S W Register

Less Trouble for services

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

PERSONALLY appears S W Register of Clinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the Fifth day of August 1839; that he enlisted in the military service of the Confederate States (~~or of the State of~~) during the war between the States, and served as a Private in Company G, of 50 th Regiment of Georgia Volunteers Mercers 's Brigade; that whilst engaged in such military service at the battle of Manasses in the State of Virginia on the 6 day of July 1862, he was wounded as follows: in the Left Hand causing a Loss of three fingers leaving the Index finger and thumb

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

Sworn to and subscribed before me, this the 2 day of March 1891. } S W Register
Thomas Conine N.P.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 2 day of March 1891.
S W Register [L. S.]

Executed in the presence of us:
W R Harken
Thomas Conine N.P.

DIRECTION.

Send money to me as follows, by Express to Homerville ~~P.O.~~
Clinch County, Georgia.
S W Register

STATE OF GEORGIA,
Clinch County.

I, George Cornelius Ordinary of said county, do certify that I am well acquainted with S W Register the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, *and that he is disabled, to the extent he claims*, and I know he is the individual he repesents himself to be, and that he resides in this county.

Given under my official signature and seal, this 21 day of March 1892

George Cornelius
Ordinary Clinch County.

Register S. W.
Cl. 14 Co.
1893 No. 2830

SOLDIER'S PENSION.
1892.

FOR THE YEAR ENDING OCTOBER 26, 1892.

Name S W Register
County Clinch
Disability Loss 3 Fingers
Amount, $ 15.
Entered on record Mch 24 1892.

W. H. HARRISON.
Secretary of Executive Department.
No Letter

AGENT.
W A Wright
Geo. W. Harrison, State Printer, Atlanta, Ga.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 16th day of March 1893.

S W Register [L. S.]

Executed in the presence of us:
J. H. Matt Jr.
Justice of the peace

DIRECTION.

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

Register S. W.
Clinch Co.
1893.

No. 558

Application for Allowance
For the Year Ending October 26, 1892.

FOR
Loss of 3 Fingers
Applicant, S. W. Register
County, Clinch
Amount, 15
Date of Warrant, 3
Entered on record, 20
1893.

W H H
Secretary Executive Department.

WARRANT HANDED TO
W. A. W.
Geo. W. Harrison, State Printer, Atlanta.
No Letter

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

PERSONALLY appears S W Register of Clinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of Georgia, and has been such continuously since the 5th day of August 1839; that he enlisted in the military service of the Confederate States (~~or of the State of~~) during the war between the States, and served as a private in Company G, of 50 th Regiment of Georgia Volunteers Mercers's Brigade; that whilst engaged in such military service at the battle of Manassas in the State of Virginia, on the 6th day of July 1862, he was wounded as follows: in the left Hand causing the Loss of three fingers the thumb and Index finger yet remaining on the Left Hand.

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

Sworn to and subscribed before me this the 21st day of March 1892.

George Condrey Ordinary.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

Know all Men by these Presents, That I, S W Register of Clinch County, in said State, do hereby appoint W A Wright of Fulton County Ga my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of 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 21st day of March 1892.

S W Register [L. S.]

Executed in the presence of us:
Howard Vickerson
George Condrey Ordy

DIRECTION.

Send money to me as follows, by Express to Du Pont P.O.
Clinch County, Georgia.
S W Register

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

PERSONALLY appears S W Register of Clinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the fifth day of August 1839; that he enlisted in the military service of the Confederate States (~~or of the State of~~) during the war between the States, and served as a private in Company G, of 50 th Regiment of Georgia Volunteers Mercers's Brigade; that whilst engaged in such military service at the 2nd battle of Manassas in the State of Virginia, on the 6th day of July 1862, he was wounded as follows: in the left hand causing the Loss of three fingers leaving the Index fing and Thumb

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

Sworn to and subscribed before me, this, the 16 day of March 1893.

S W Register

J H Mattox J.P.

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,
Clinch County.

I, George Condrey Ordinary of said County, do certify that I am well acquainted with S W Register the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, *and that he is disabled, to the extent he claims,* and I know he is the individual he represents himself to be, and that he resides in this County.

I further certify that J H Mattox a Justice of the peace before whom the foregoing affidavits were made and power of attorney was signed, is a Justice of the peace of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 16th day of Mch 1893.

George Condrey
Ordinary Clinch County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

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

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

S. W. Register [L. S.]

Executed in the presence of us

James M. Wright Esq. P.
George A. Mathews

DIRECTIONS.

Send money to me as follows, by Express to Homerville P. O.

Clinch County, Georgia.

Register, S. W.
Clinch Co.

(For Those Already Enrolled.)

No. 502

Soldier's Pension.

1894.

Name S. W. Register
County Clinch
Disability Loss of 3 Fingers
Amount, $ 15.00
31

1894.

W. H. HARRISON,
Secretary Executive Department.

WARRANT HANDED TO
W. A. Wright

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

KNOW ALL MEN BY THESE PRESENTS, That I, S. W. Register of Homerville Clinch County, State of Georgia, do hereby appoint Copyholder Genl W. A. Wright of Atlanta Georgia my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate States (~~or of this State~~) as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

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

S. W. Register [L. S.]

Executed in presence of us

Seward Smith
George Cornelius Ordinary

DIRECTIONS.

Send money to me as follows, by Postal Money order to Homerville P. O.

Clinch County, Georgia.

S. W. Register

Register, S. W.
Clinch Co.

(For Those Already Enrolled.)

No. 3230

SOLDIER'S PENSION.

1895.

Name S. W. Register
County Clinch
Disability 3 Fingers off left hand
Amount, $ 15.
32.

1895.

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO
Wm

Geo. W. Harrison, State Printer, Atlanta.

No Date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

PERSONALLY appears S. W. Register of Homerville County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the fifth day of August 18[illegible]; that he enlisted in the military service of the Confederate States (~~or of the State of~~) during the war between the States, and served as a private in Company "S", of 50th Regiment of Georgia Volunteers Mercer's Brigade; that whilst engaged in such military service at the battle of Manassas in the State of Virginia, on the or about 30 day of August 1862, he was wounded as follows: In the left hand causing the loss of three fingers, leaving the thumb and index finger

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1894. I have heretofore been allowed a pension of fifteen dollars, for the year 1893

Sworn to and subscribed before me, this, the 6th day of March 1894. } S. W. Register

George Cornelius Ordinary

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

STATE OF GEORGIA,
Clinch County.

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

Given under my official signature and seal, this 6th day of March 1894.

Affix your seal here

George Cornelius
Ordinary Clinch County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears S. W. Register of Homerville Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 5th day of August 1839; that he enlisted in the military service of the Confederate States (~~or of the State of~~) during the war between the States, and served as a private in Company "G", of 50th Regiment of Ga Volunteers, Drayton or Mercer's Brigade; that whilst engaged in such military service at the battle of Manassas in the State of Virginia, on ~~the~~ or about 30 day of August 1862, he was wounded as follows: ~~In~~ the left hand causing the loss of all the fingers except the index finger and thumb

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

Sworn to and subscribed before me, this, the 28th day of January 1895. } S. W. Register

George Cornelius Ordinary

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

STATE OF GEORGIA,
Clinch County.

I, George Cornelius Ordinary of said County, do certify that I am well acquainted with S. W. Register 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 28th day of January 1895.

Affix your seal here

George Cornelius
Ordinary Clinch County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

PERSONALLY appears S W Register of Homerville County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the fifth day of August 1839; that he enlisted in the military service of the Confederate States (~~or of the State of~~) during the war between the States, and served as a private in Company "G", of 50th Regiment of Georgia Volunteers Mercers 's Brigade; that whilst engaged in such military service at the battle of Manasses in the State of Virginia, on or about the 15th day of August 1862, he was wounded as follows: in the left hand causing the Loss of three fingers. leaving the Thumb and Index finger

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1894. I have heretofore been allowed a pension of fifteen dollars, for the year 1893

Sworn to and subscribed before me, this, the 6th day of March 1894. } S W Register

George Cornelius Ordinary

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

STATE OF GEORGIA,
Clinch County.

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

Given under my official signature and seal, this 6th day of March 1894.

Affix your seal here.

George Cornelius
Ordinary Clinch County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears S W Register of Homerville Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 5th day of August 1839; that he enlisted in the military service of the Confederate States (~~or of the State of~~) during the war between the States, and served as a private in Company "G", of 50th Regiment of Ga Volunteers, Drayton or Mercer 's Brigade; that whilst engaged in such military service at the battle of Manasses in the State of Virginia, on or about 30 day of August 1862, he was wounded as follows: In the left hand causing the loss of all the fingers except the Index finger and thumb

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

Sworn to and subscribed before me, this, the 28th day of January 1895. } S W Register

George Cornelius Ordinary

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

STATE OF GEORGIA,
Clinch County.

I, George Cornelius Ordinary of said County, do certify that I am well acquainted with S W Register 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 28th day of January 1895.

Affix your seal here.

George Cornelius
Ordinary Clinch County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, S.W. Register hereby authorize W. A. Wright of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to S.W. Register by Express at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 10th day of Jany 1896.

S.W. Register [L. S.]

Executed in presence of us
S. L. Drawely.
Jm Hodges

Register, S.W.
Clinch Co.
ACT OF 24 OCT., 1887.
(For Those Already Enrolled.)

No. 729

SOLDIER'S PENSION.

1896.

Name S.W. Register
County Clinch
Disability Loss three fingers
Amount, $15.00
2/26 1896

RICHARD JOHNSON,
Secretary, Executive Department.

WARRANT HANDED TO
Pat
Geo. W. Harrison, State Printer, Atlanta.
No data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, S.W. Register hereby authorize W. A. Wright of Atlanta to receive and receipt for the pension paid hereon and request that he remit same to S.W. Register by Express at Homerville.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 11th day of Jany 1897.

S.W. Register [L. S.]

Executed in presence of
B. E. Mattox
J R Dickerson

Register S.W.
Clinch Co.
ACT OF 24 OCT., 1887.
(For Those Already Enrolled.)

2/50 No. [illegible]

INVALID

SOLDIER'S PENSION.

1897.

Name S. W. Register
County Clinch
Disability 3 fingers
Amount, $15.00
4/22 1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
[illegible]
GEO. W. HARRISON, STATE PRINTER, ATLANTA.
No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears S.W. Register of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 5th day of August 1839; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company "G", of 50th Regiment of Ga Volunteers, Bryan's Brigade; that whilst engaged in such military service in the State of Virginia, on the 30 day of August 1862, he was wounded, injured or diseased as follows:

In the left hand loosing three fingers leaving the Index finger and Thumb the above described Injuries was received at the second Battle of Manassas

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

Sworn to and subscribed before me, this, the 10th day of Jany 1896. } S.W. Register

George Cornelius ordinary

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

STATE OF GEORGIA,
Clinch County.

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

Given under my official signature and seal, this 10th day of January 1896.

Affix your seal here.

George Cornelius

Ordinary Clinch County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears S.W. Register of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 19th day of May 1865; that he enlisted in the military service of the Confederate States (~~or of the State of~~) during the war between the States, and served as a private in Company "G", of 50th Regiment of Georgia Volunteers, Mercer's Brigade; that whilst engaged in such military service in the State of Virginia, on the 30th day of August 1862, he was wounded, injured or diseased of follows:

in the left hand causing the loss of all the fingers on the left hand except the Thumb and Index finger

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

Sworn to and subscribed before me, this, the 11th day of Jany 1897. } S.W. Register POST OFFICE Homerville Ga

George Cornelius ordinary

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

STATE OF GEORGIA,
Clinch County.

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

Given under my official signature and seal, this 11th day of Jany 1897.

Affix your seal here.

George Cornelius

Ordinary Clinch County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, S W Register hereby authorize W. A. Wright Compt Genl of Atlanta Ga

to receive and receipt for the pension paid hereon and request that he remit same to S W Register by Express at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 31st day of February 1898.

S. W. Register [L. S.]

Executed in presence of
J. C. Kirkland Ex-J.P.

Register, S. W.
Clinch Co.

ACT OF 24 OCT., 1897.
(For These Already Enrolled.)

No. 1693

INVALID
SOLDIER'S PENSION.
1898.

Name S W Register
County Clinch
Disability
Amount, $ 15.00
2/15 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
W. A. W.

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, S W Register hereby authorize W. A. Wright of Atlanta

to receive and receipt for the pension paid hereon and request that he remit same to S W Register by Express (Collect) at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 3rd day of January 1899.

S W Register [L. S.]

Executed in presence of
J. C. Kirkland Ex-J.P.

Register, S. W.
Clinch County

CODE SECTION 1298.
(For These Already Enrolled.)

No. 148

INVALID
SOLDIER'S PENSION.
1899.

Name S W Register
County Clinch
Disability Loss of 3 fingers
Amount, $ 15.00
2/15 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
W

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears S.W. Register of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 19 day of May 1865; that he enlisted in the military service of the Confederate States (~~or of the State of~~) during the war between the States, and served as a Private in Company "G", of 50th Regiment of Georgia Volunteers, Mercer's Brigade; that whilst engaged in such military service in the State of Virginia, on the 30th day of August 1862, he was wounded, injured or diseased as follows:
in the left hand causing the loss of Three fingers. leaving the Index finger and Thumb

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1898. I have heretofore under said law as a resident of Clinch Ga county been allowed an invalid pension of fifteen Dollars, for the year 1897.

Sworn to and subscribed before me, this, the 1st day of February 1898. S.W. Register POST-OFFICE Homerville Ga

J. G. Kirkland Ex-J.P.

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

STATE OF GEORGIA,
Clinch County.

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

Given under my official signature and seal, this first day of February 1898.

Affix your seal here.

George Cornelius
Ordinary Clinch County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears S.W. Register of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the fifth day of August 1839; that he enlisted in the military service of the Confederate States (~~or of the State of~~) during the war between the States, and served as a private in Company "G", of 50th Regiment of Georgia Volunteers, Mercers's Brigade; that whilst engaged in such military service in the State of Virginia, on the 30 day of August 1862, he was wounded, injured or diseased as follows:
In the left hand causing the loss of three fingers. leaving the Index finger and Thumb.

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

Sworn to and subscribed before me, this, the 3rd day of January 1899. S.W. Register POST OFFICE Homerville Ga

George Cornelius Ordinary

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

STATE OF GEORGIA,
Clinch County.

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

Given under my official signature and seal, this Third day of January 1899.

Affix your seal here

George Cornelius
Ordinary Clinch County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, S W Register hereby authorize W A Wright Compt Genl of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to S W Register by Mail at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 26 day of February 1900.

S W Register [L. S.]

Executed in presence of

W Wilkinson

Register S. W. Clinch Co.

CODE SECTION 1250.
(For Those Already Enrolled.)

No. 3033

INVALID
SOLDIER'S PENSION.
1900.

Name S W Register
County Clinch
Disability
Amount, $ 15
Warrant issued Jan 13 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Wright

Geo. W. Harrison, State Printer, Atlanta.

No date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I S W Register hereby authorize W A Wright Compt Genl of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to me by Mail at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 31st day of December 1901.

S W Register [L. S.]

Executed in presence of

H. V. Mattox
By [illegible]
Ordinary

Register S. W. Clinch Co.

CODE SECTION 1250.
(For Those Already Enrolled.)

No. 3648

DISABLED
SOLDIER'S PENSION.
1901.

Name S W Register
County Clinch
Disability
Amount, $ 15
2/13 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Wright

Geo. W. Harrison, State Printer, Atlanta.

No date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch **County.**

Personally appeare J M Register of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State and County, and has resided therein continuously ever since the 19 day of May 1865; that he enlisted in the military service of the Confederate States (~~of the State of~~) during the war between the States, and served as a Private in Company G, of 50 th Regiment of Georgia Volunteers, Bryans 's Brigade; that whilst engaged in such military service in the State of Virginia, on the 30 day of Aug 1862, he was wounded, injured or diseased as follows:
in the left hand causing the Entire loss of all the fingers except the index finger and thumb

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1900. I have heretofore under said law as a resident of Clinch County been allowed an invalid pension of Fifteen Dollars, for the year 1899.

Sworn to and subscribed before me, this the 26th day of February 1900. } J M Register
POST OFFICE Homerville Ga

George Cornelius Ordinary

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

STATE OF GEORGIA,
Clinch **County.**

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

Given under my official signature and seal, this 26th day of February 1900.

Affix your seal here.

George Cornelius
Ordinary Clinch County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch **County.**

Personally appears J M Register of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 19th day of May 1865; that he enlisted in the military service of the Confederate States (~~or of the State of~~) during the war between the States, and served as a Private in Company "G", of 50 th Regiment of Georgia Volunteers, Mercers 's Brigade; that whilst engaged in such military service in the State of Virginia, on the 30 day of August 1862, he was wounded, injured or diseased as follows:
~~in~~ the left hand causing loss of three fingers, leaving the thumb and index finger on the left hand

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

Sworn to and subscribed before me, this the 31st day of December 1901. } J M Register
Postoffice Homerville Ga

George Cornelius Ord

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

STATE OF GEORGIA,
Clinch **County.**

I, George Cornelius Ordinary of said County, do certify that I am well acquainted with J M Register 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 31st day of December 1901.

Affix your seal here

George Cornelius
Ordinary Clinch County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, S. W. Register hereby authorize W. A. Wright
Compt Genl of Atlanta Ga
to receive and receipt for the pension paid hereon and request that he remit same to
me or W. T. Howell. Ordy by Mail
at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 22nd
day of January 1902.

S. W. Register [L. S.]

Executed in presence of
W. T. Howell

Register, S. W.
Clinch County
(FOR THOSE ALREADY ENROLLED.)
CODE SECTION 1760.

No. 2225

DISABLED
SOLDIER'S PENSION
1902.

Name S. W. Register
County Clinch
Co. C Regiment 50
Disability 15
Amount, $ 12 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Ex

Geo. W. Harrison, State Printer, Atlanta.

No date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, S. W. Register hereby authorize W. A. Wright
Compt Genl of Atlanta Ga
to receive and receipt for the pension paid hereon and request that he remit same to
S. W. Register by Mail
at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 2
day of Feby 1903.

S. W. Register [L. S.]

Executed in presence of
W. T. Howell Ord'y

Register, S. W.
Clinch County
(FOR THOSE ALREADY ENROLLED.)

No. 2758

DISABLED
SOLDIER'S PENSION
1903.

Name S. W. Register
County Clinch
Co. C Regiment
Disability
Amount, $ 12
12 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
By

Geo. W. Harrison, State Printer, Atlanta.

No date

16

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County.

Personally appears S.W. Register of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 19 day of May 1865; that he enlisted in the military service of the Confederate States (~~or of the State of~~) during the war between the States, and served as a Private in Company "G", of 50th Regiment of Georgia Volunteers, Mercers 's Brigade; that whilst engaged in such military service in the State of Virginia, on the 30th day of August 1862, he was wounded, injured or diseased as follows: Wounded in the left hand causing the loss of three fingers, leaving the Index finger and thumb,

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

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

S.W. Register
Post-office Homerville Ga

W. J. Howell Ordinary

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

STATE OF GEORGIA,
Clinch County.

I, W. J. Howell Ordinary of said County, do certify that I am well acquainted with S.W. Register 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 ~~25~~ Jan. 1902.

Affix your seal here

W. J. Howell
Ordinary Clinch County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County.

Personally appears S.W. Register of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 5th day of August 1839; that he enlisted in the military service of the Confederate States (~~or of the State of~~) during the war between the States, and served as a private in Company "G", of 50 th Regiment of Georgia Volunteers, Mercers 's Brigade; that whilst engaged in such military service in the State of Virginia, on the 30 day of August 1862, he was wounded, injured or diseased as follows: Wounded in the left hand causing the loss of three fingers, leaving the index finger and thumb

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

Sworn to and subscribed before me, this the 2nd day of Feby 1903.

S.W. Register
Post-office Homerville Ga

W. J. Howell

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

STATE OF GEORGIA,
Clinch County.

I, W. J. Howell Ordinary of said County, do certify that I am well acquainted with S.W. Register 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 second day of Feby 1903.

Affix your seal here

W. J. Howell
Ordinary Clinch County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, S. W. Register hereby authorize
W. A. Wright Comptroller Gen'l of Atlanta Ga
to receive and receipt for the pension paid hereon, and request that he remit same to
W. T. Howell attorney by Mail or Express
at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 6th
day of February 1904.

S. W. Register [L. S.]

Executed in the presence of

Attorney.

Register, S. W.
Clinch Co.
(FOR THOSE ALREADY ENROLLED.)
CODE SECTION 1260.

No. 2624

DISABLED
SOLDIER'S PENSION
1904.

Name S. W. Register
County Clinch
Co. Regiment
Disability
Amount, $ 12 00
FEB 24 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, S. W. Register hereby authorize
W. A. Wright Comptroller Gen'l of Atlanta
to receive and receipt for the pension paid hereon, and request that he remit same to
J. T. Dame attorney by Mail
at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 2nd
day of Feb 1905.

S. W. Register [L. S.]

Executed in the presence of
J. T. Dame

Register, S. W.
Clinch County
(FOR THOSE ALREADY ENROLLED.)
CODE SECTION 1260.

No. 3065

DISABLED
SOLDIER'S PENSION
1905.

Name S. W. Register
County Clinch
Co. Regiment
Disability
Amount, $ 15
MAR 1 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

The Franklin Printing and Publishing Co., Atlanta
Geo. W. Harrison, Manager, for State Printer

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County.

Personally appears S W Register of Clinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 5th day of August 1839; that he enlisted in the military service of the Confederate States (~~or of the State of~~) during the war between the States, and served as a Private in Company G, of 50th Regiment of Georgia Volunteers Mercer's Brigade; that whilst engaged in such military service in the State of Virginia, on the 30th day of August 1862, he was wounded, injured or diseased as follows: in the left hand loosing the first three fingers. loosing the Thumb and Index finger in the left hand.

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

Sworn to and subscribed before me, this the 6th day of February 1904.
H T Howell Ordinary
S W Register
Post-office Homerville Ga

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

STATE OF GEORGIA,
Clinch County.

I, H T Howell Ordinary of said County, do certify that I am well acquainted with S W Register 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 sixth day of February 1904.

H T Howell
Ordinary Clinch County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch COUNTY.

Personally appears S W Register of Clinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 1st day of May 1865; that he enlisted in the military service of the Confederate States (~~or of the State of~~) during the war between the States, and served as a Private in Company G, of 50th Regiment of Geo Volunteers Mercer's Brigade; that whilst engaged in such military service in the State of Virginia, on the 30 day of August 1862, he was wounded, injured or diseased as follows: in the left hand loosing the fingers. Except the Index finger & Thumb. (loss of three fingers)

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

Sworn to and subscribed before me, this the 2nd day of Feby 1905.
J T Dame Ordinary
S W Register
Post-office Homerville Ga

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

STATE OF GEORGIA,
Clinch COUNTY.

I, J T Dame Ordinary of said County, do certify that I am well acquainted with S W Register 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 Feby 1905.

Affix your seal here.

J T Dame
Ordinary Clinch County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, S. W. Register hereby authorize Hon W. A. Wright of Atlanta Ga to receive and receipt for the pension paid hereon, and request that he remit same to J. T. Dame Ordy by Mail at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this first day of Jany 1906.

S. W. Register [L. S.]

Executed in the presence of

[illegible]

Register, S. W.
Clinch County

CODE SECTION 1250.
(FOR THOSE ALREADY ENROLLED.)

G-50 No. 784

DISABLED
SOLDIER'S PENSION
1906.

Name S. W. Register
County Clinch
Co. K Regiment 50th
Disability Redess of 3 fingers
Amount, $10.00
JAN 26 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
[illegible]

THE PRINCIPAL PRINTING AND PUBLISHING CO., CIN. O., BOSTON, MASS.

no date

73

3-50 150
2-100 200
1-15 15
1-5 5
7 370

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, S. W. Register, hereby authorize W. A. Wright of Atlanta Ga to receive and receipt for the pension paid hereon, and request that he remit same to J. T. Dame Ordinary by Mail at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this Ten th day of Jan. 1907.

S. W. Register [L. S.]

Executed in presence of
J. T. Dame

Register, S. W.,
Clinch Co.,

CODE SECTION 1250.
(FOR THOSE ALREADY ENROLLED)

G-50 No. 1381

DISABLED
SOLDIER'S PENSION
1907.

Name S. W. Register
County Clinch
Co. K Regiment 50th
Disability Land of three fingers
Amount, $15.00
1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
[illegible]

GEO. W. HARRISON, [illegible]

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Clinch County.

Personally appears S W Register of Clinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 1st day of Aug 1839; that he enlisted in the military service of the Confederate States, (or of the State of Ga) during the war between the States, and served as a Private in Company G", of 50th Regiment of Georgia Volunteers Mercer 's Brigade; that whilst engaged in such military service in the State of Virginia, on the 30th day of August 1862, he was wounded, injured or diseased as follows: wounded in left hand causing the loss of three fingers. the index finger and Thumb remfainning on left hand.

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1906. I have heretofore, under said law, as a resident of Clinch County, been allowed an invalid pension of fifteen Dollars, for the year 1905.

Sworn to and subscribed before me, this the 1st day of January 1906.
J. T. Dame

S W Register
Post-Office Homerville Ga

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

State of Georgia,
Clinch County.

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

Given under my official signature and seal, this first day of January 1906.
J. T. Dame
Ordinary Clinch County.

Affix your seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
Clinch County.

Personally appears S W Register of Clinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 5th day of Aug 1839; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company G, of 50th Regiment of Georgia Volunteers Mercer 's Brigade; that whilst engaged in such military service in the State of Virginia, on the 30 day of August 1862, he was wounded, injured or diseased as follows: On the Left hand causing the Loss of Three (3) Fingers, leaving the Index Finger & Thumb.

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1907. I have heretofore, under said law, as a resident of Clinch County, been allowed an invalid pension of Fifteen Dollars, for the year 1906.

Sworn to and subscribed before me, this the 10 day of Jan. 1907.
J. T. Dame

S W Register.
Postoffice Homerville Ga.

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

State of Georgia,
Clinch County.

I, J. T. Dame Ordinary of said County, do certify that I am well acquainted with S W Register 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 Tenth day of January 1907.
J. T. Dame
Ordinary Clinch County.

Affix your seal here

NUMBER OF VOUCHERS

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

Personally appears S W Register of Glinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 1st day of Aug 1889; that he enlisted in the military service of the Confederate States, (or of the State of Ga) during the war between the States, and served as a Private in Company "G", of 50th Regiment of Georgia Volunteers Mercer 's Brigade; that whilst engaged in such military service in the State of Virginia, on the 30th day of August 1862, he was wounded, injured or diseased as follows: wounded in left hand causing the loss of three fingers. the index finger and Thumb remfainning on left hand.

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1906. I have heretofore, under said law, as a resident of Glinch County, been allowed an invalid pension of fifteen Dollars, for the year 1905.

Sworn to and subscribed before me, this the 1st day of January 1906.

J. T. Dame

S W Register

Post-Office Homerville Ga

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

State of Georgia,
Glinch County.

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

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

J. T. Dame

Ordinary Glinch County.

Affix your seal here

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

Personally appears [illegible] of [illegible] County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 5th day of Aug 1889; that he enlisted in the military service of the Confederate States (or of the State of [illegible]) during the war between the States, and served as a Private in Company G, of 50th Regiment of Georgia Volunteers Marcus 's Brigade; that whilst engaged in such military service in the State of Virginia, on the 30 day of August 1862, he was wounded, injured or diseased as follows: In the Left hand causing the loss of Three (3) Fingers, leaving the Index Finger & Thumb.

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1907. I have heretofore, under said law, as a resident of Glinch County, been allowed an invalid pension of Fifteen Dollars, for the year 1906.

Sworn to and subscribed before me, this the 10 day of Jan, 1907.

J. T. Dame

S W Register

Postoffice Homerville Ga.

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

State of Georgia,
Clinch County.

I, J. T. Dame Ordinary of said County, do certify that I am well acquainted with S W Register 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 Tenth day of January 1907.

J. T. Dame

Ordinary Clinch County.

Affix your seal here

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

BAD COPY***OR***LIGHT PRINT

Register Number 2
Co. Clinch
Regt. 10th
Div.

0

Confederate

Soldier's Application.

UNDER ACT 1910.

County Clinch

Name Samuel Register

Co. 1st Florida Cavl.

Regiment 10th Regt Fla Inf

Approved

E. W. LINDSEY,
Comptroller General.

CHAS. P. BYRD, State Printer, Atlanta.

ENTERED ROSTER OFFICE.

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,
Clinch County.

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

1. What is your name and where do you reside? (Give County and Post-office). Samuel Register Route 1 Council Ga Clinch County.

2. How long and since when have you been a continuous resident citizen of this State? About 47 years

3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? Yes

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) About November 1861 at Tarrytown Ga. 1st Fla Reb Cav.

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) Until the Surrender at Appomattox Court House Apl 9 1865

6. When and where was your Company and Regiment surrendered or discharged from the Service? At Appomattox Court House Apl 9th 1865

7. Were you actually present with your Command when it was surrendered or discharged? Yes

8. If you were not actually present, state specifically and clearly where you were. Was present

a. Where was your Command when you left it? Discharged at Appomattox Va April 9th 1865

b. When did you leave the Command? [illegible] 1865

c. For what cause did you leave? Surrender

d. By whose authority did you leave? Gen R.E. Lee

e. For how long was your leave granted? In what way? For allways

f. Why did you not return to your Command after leave expired? War over

g. In what way were you prevented? —

h. What effort did you make to return? —

i. Were you captured during the war? —

j. If so, when, and where? In what prison were you held and when were you released? —

Born McCormick Burke County Ga 1846
Died Clinch County Nov 23 1936
1936 94 42

9. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4 Nov. 1908? (Make list by items and value.) Real estate Land $400.00 Household & kitchen furniture 100.00 Horses & Cattle 640.00 Carriages 55.00 Mowing & cutting Implements 85.00

10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov., 1908. To whom and for what price? None

11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemized list). Real estate Land $300.00 Household & kitchen furniture 50.00 Horses & Cattle 805.00 Carriages & Buggy 100.00 Hogs & Mowing & cutting Implements $1267.00 Cotton 1 Bale

12. What annual or monthly income or earnings of yourself and wife and the source derived have you? None except my Labor I am 70 years of age.

13. Are you drawing a pension of any amount from this State or the United States? None

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? I was not.

Sworn to and subscribed before me, this the 29 day of July 1912

Samuel Register mark

J. T. Davis Ordinary

of Clinch County, Ga.

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA, Florida
Houston County.

D B Johnson of said State and County is hereby presented as a witness in support of the application of Samuel Royston 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? D B Johnson in Hamilton County Georgia

2. How long and since when have you known Samuel Royston the applicant? about forty one years

3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? in Chatt County State of Georgia for Continuously residing there for forty one years and I have known him

4. When, where and in what Company and Regiment did Samuel Royston enlist during war from 1861 to 1865? (Give date and place) Enlisted at Jonesboro Ga 5th Ga Battalion

5. How did you obtain your information of this Service? by being acquainted with him and we were in Battalion

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) about 6 months from 1864 until last 1865

7. When and where was his Command surrendered or discharged (give date and place) 9th day of April 1865 at Appomattox Court House Virginia

8. Were you personally present at the Surrender? Yes

9. If not, where were you and how came you there?

10. Was the applicant personally present with his Command at surrender? Yes

11. If not where was he and how came him there?

12. When did he leave his Command? 9th April 1865 Where was his Command when he left it? for what cause did he leave? Surrender By whose authority did he leave R E Lee and how long was he granted leave? Indefinite How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) I was present with the applicant and Command was

13. In what way was he prevented from returning to his Command? by the Surrender How do you know? he had no command to go to after the 9th

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? How he was paroled? and when released? April 11th 1865

Sworn to and subscribed before me, this the 19th day of Oct 1911 / 1912

J B Washington Court of Ordinary,
By Gd Frank D.C.

D B Johnson

of Hamilton County

STATE OF GEORGIA, Clinch County.

Personally came and appeared D B Johnson and H N Allen who on oath says that they are freeholders residing in said County and we have known Samuel Royston the applicant for pension and we know the property that is now in the use, possession and control of himself and wife and of the cash value to wit: (Make List by items and value) 1 Mule 1 Horse Worth not to exceed $100 Household & Kitchen furniture not to exceed $100 Some cattle hogs worth not more than $100 Wagon Buggy & other farming implements worth not to exceed $100 Making property worth not to exceed $300

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov. 1908? (State in fully by items) None that we have knowledge of

2. When and to whom was it sold or given to? —

3. What was the price paid or stated to be paid? —

4. What relation is the party to applicant? —

5. What disposition was made of the proceeds of the sale? —

6. Was the disposition of this property made in good faith and full value? — or was it made to obtain a pension? —

Sworn to and subscribed before me, this the 19th day of Oct 1912.

J T Davis Ordinary, of Clinch County.

A L Swearinger
Norman Allen

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, Clinch County.

I J T Davis Ordinary of said County, certify that I know the applicant Samuel Royston for Pension in the person he represents himself to be and resides in said County. That I also know D B Johnson the witness swearing to the service and A L Swearinger & N Allen 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 Samuel Royston shows that he and wife value for tax is in 1908 $ 115.00 for 1909 $ 240.00 for 1910 $ 175.00 1911 $ 400.00 Sworn under my hand and official seal of office this day of 1912 Oct 19th

J T Davis Ordinary, of Clinch County.

NOTES 1. Before any witness can sign said the Ordinary must answer each and all questions and all the answer in the handwriting of the witness.
2. Answers must be given to all questions.
3. All witnesses must be present when the application is sworn to and sign.
4. All witnesses must be present when the property is appraised and sign said affidavit at freeholders testimony.

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Clinch County.

I, Kate C. Pafford, Ordinary of said County, do certify that I personally know Mrs. Nancy Register, the applicant, and that she is the lawful widow of Samuel Register, who was on the Pension Roll of said Clinch County, and was paid a Pension from Clinch County for 1936, and at the time of his death on the 23rd. day of November, 1936, there was due to him and unpaid his Pension of Thirty ($30.00) Dollars from the State of Georgia, and I know ....., the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 21st. day of December, 1937.

(Seal of Ordinary)

Kate C. Pafford, Ordinary
Clinch, County

Clinch, County

1937

Application for Pension Due Deceased Soldier
(UNDER ACT 1891)
(To be paid to his Widow)

BY

Mrs. Mrs. Nancy Register
Widow of Samuel Register
Date of Marriage December 15, 1880
Date of Death Nov. 23, 1936

Approved and ordered paid.

[illegible], 1937
[illegible]
Ordinary: Fill out above in full and send this blank to Pension Department for approval before you pay out the money.

CONFEDERATE DIVISION
STATE DEPARTMENT OF PUBLIC WELFARE

Register's Samuel
Clinch Co
1936

RECEIVED
JAN 5 1938
L. THOS. GILLEN
DIRECTOR

Rec'd 2 copies
Dec 1936
Vouch
11 Feb 36

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Clinch County.

I, Kate C. Pafford, Ordinary of said County, do certify that I personally know Mrs. Nancy Register, the applicant, and that she is the lawful widow of Samuel Register, who was on the Pension Roll of said Clinch County, and was paid a Pension from Clinch County for 1936, and at the time of his death on the 23rd. day of November 1936, there was due to him and unpaid his Pension of $30.00 (for December, 1936) Dollars from the State of Georgia, and I know J.J. Langdale and N. Allen, the within witnesses and they are ~~witness, and he is~~ of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 18th. day of January, 1937.

(Seal of Ordinary)

Kate C. Pafford, Ordinary
Clinch, County

Paid $30.00
Sec 36.
Clinch, County

1937

Application for Pension Due Deceased Soldier
(UNDER ACT 1891)
(To be paid to his Widow)

BY

Mrs. Nancy Register
Widow of Samuel Register
Date of Marriage Dec. 15, 1880
Date of Death Nov. 23, 1936

Approved and ordered paid.

, 193

R. de T. LAWRENCE,
Commissioner of Pensions.

Ordinary: Fill out above in full and send this blank to Pension Department for approval before you pay out the money.

Application for Pension Due Deceased Soldier

(To Be Paid to His Widow)
(UNDER ACT APPROVED OCTOBER 9, 1891)

STATE OF GEORGIA, Clinch County.

Personally before me, the Ordinary of said County, comes Mrs. Nancy Register of said County, who after being duly sworn, on oath says that she is the widow of Samuel Register and that said Pensioner was on the Pension Roll of Clinch County and was paid a Pension of Thirty ($ 30.00) Dollars from said County for the month of November, 1936, and that said Pensioner died in Clinch County on the 23rd. day of November, 1936, Applicant further swears that she married the said Samuel Register on the 15th. day of December, 1889, in Hamilton County and State of Florida, and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks that the Pension for 1937, due and unpaid be paid to her.

Sworn to and subscribed before me this 21st day of December, 1937.

Kate C. Pafford, Ordinary
Clinch, County
(Seal of Ordinary)

Mrs Nancy Register (L. S.)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA Clinch County.

Personally before me comes Mrs. Belle Allen, who on oath says that he knew Samuel Register while in life and that he knows Mrs. Nancy Register, the above applicant; and knows that the said Samuel Register and Mrs. Nancy Register were ~~[illegible]~~ married in the County of ~~[illegible]~~ when she was five years of age and she is now 53 years of age ~~[illegible]~~ in the State of ~~[illegible]~~, and that they were residing together as husband and wife at the time of his death on the 23rd. day of November, 1936, and that she is his dependent widow.

Sworn to and subscribed before me this 21st day of December, 1937.

Kate C. Pafford, Ordinary
Clinch, County
(Seal of Ordinary)

Mrs Belle Allen

INSTRUCTIONS:

1st. Proof of marriage must be made.
2nd. Do not use the enormously large form of marriage certificate in common vogue throughout the State, suitable only for framing. Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage license is the proper thing.
3rd. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the seals affixed, and that back of application, when folded, is filled in.
4th. Pay out no money on this application until approved in the Pension Department.
5th. The widow or person holding her proper power-of-attorney receipts for this pension by signing name, as widow, opposite the name of husband on the soldier pay roll.
6th. Only the unpaid pension for the year is covered by this application. Take another application, on the white blank, to admit widow to rolls in her own right.

Application for Pension Due Deceased Soldier

(To Be Paid to His Widow)
(UNDER ACT APPROVED OCTOBER 9, 1891)

STATE OF GEORGIA, Clinch County.

Personally before me, the Ordinary of said County, comes Mrs. Nancy Register of said County, who after being duly sworn, on oath says that she is the widow of Samuel Register and that said Pensioner was on the Pension Roll of Clinch County and was paid a Pension of Thirty ($ 30.00) Dollars from said County for the month of November 1936, and that said Pensioner died in Clinch County on the 23 day of November, 1936, Applicant further swears that she married the said Samuel Register on the 15 day of December, 1889, in Clinch County and State of Georgia, and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks that the Pension for 1936, due and unpaid be paid to her.

Sworn to and subscribed before me this 18 day of Jan., 1937.

Kate C. Pafford, Ordinary
Clinch, County
(Seal of Ordinary)

Nancy Register (L. S.)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA Clinch County.

Personally before me comes J.J. Langdale and W. Allen, who on oath says that they knew Samuel Register while in life and that he knows Mrs. Nancy Register, the above applicant; and knows that the said Samuel Register and Mrs. Nancy Register resided together as man and wife for 40 years ~~[illegible]~~ married in the County of Clinch in the State of Georgia ~~[illegible]~~, and that they were residing together as husband and wife at the time of his death on the 23rd. day of November, 1936, and that she is his dependent widow.

Sworn to and subscribed before me this 18th day of January, 1937.

Kate C. Pafford, Ordinary
Clinch, County
(Seal of Ordinary)

Affidavit on separate sheet.

INSTRUCTIONS:

1st. Proof of marriage must be made.
2nd. Do not use the enormously large form of marriage certificate in common vogue throughout the State, suitable only for framing. Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage license is the proper thing.
3rd. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the seals affixed, and that back of application, when folded, is filled in.
4th. Pay out no money on this application until approved in the Pension Department.
5th. The widow or person holding her proper power-of-attorney receipts for this pension by signing name, as widow, opposite the name of husband on the soldier pay roll.
6th. Only the unpaid pension for the year is covered by this application. Take another application, on the white blank, to admit widow to rolls in her own right.

etc. The widow or person holding her proper power-of-attorney receipts for this pension by signing name, as widow, opposite the name of husband on the soldier par roll.

5th. Only the unpaid pension for the year is covered by this application. Take another application, on the white blank, to admit widow to rolls in her own right.

Audited May 28 1889.

Wm A Wright

COMPTROLLER-GENERAL.

Clinch

Maimed Soldiers.

Voucher No. 2259

Amount, $ 15

Paid to E. W. Register

For Loss of 3 fingers

May 18 1889.

Included in Warrant No.

issued to Treasurer.

Ex Homerville 1889.

WARRANT CLERK.

W. J. Campbell, State Printer, Constitution Job Office.

Audited Mch 12 1890

Wm A Wright

COMPTROLLER-GENERAL.

Clinch

Maimed Soldiers.

Voucher No. 2437

Amount $ 15.00

Paid to E. W. Register

For Loss of 3 fingers

Mch 10 1890

Included in warrant No.

issued to Treasurer.

Ex 18

Homerville

WARRANT CLERK.

W. J. Campbell, State Printer, Constitution Job Office.

W. D. Wright

No. 2259

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. } Atlanta, Ga May 18 1889.

Mr S W Register of the County of Clinch having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Act, Dec. 24, 1888, and the same having been allowed for

Loss of three fingers

He is entitled to receive the sum of Fifteen 00/ Dollars for such disability, the same being the allowance due for the year ending October 24, 1889

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

J W Gordon
GOVERNOR.

By the Governor
W H Harrison
CLERK EXECUTIVE DEPARTMENT.

TREASURER'S OFFICE STATE OF GEORGIA PAID

$15/

RECEIVED OF STATE TREASURER, R U. HARDEMAN,

Fifteen 00/ Dollars,

per above voucher, this 18 of May 1889.

S W Register

W A Wright

No. 2407

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. } Atlanta, Ga., Mch 10th 1890

Mr. S W. Register of the County of Clinch having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Act, approved, Dec. 24, 1888, and the same having been examined and allowed for

Loss of 3 fingers

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

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

J W Gordon
GOVERNOR.

By the Governor,
W H Harrison
CLERK EXECUTIVE DEPARTMENT.

TREASURER'S OFFICE STATE OF GEORGIA PAID

$15.00

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifteen Dollars,

per above voucher, this 10 of Mch 1890

S W Register

W A W

GEORGIA, CLINCH COUNTY.

Personally before me came J. J. Lansdale and _____ known to be responsible and truthful persons, residing in said County, who after having been duly sworn, says that of deponent's own knowledge, Mrs. Nancy Register who made the foregoing affadavit, is the lawful widow of Samuel Register who died in Clinch County, in said State of Georgia, on the 23rd. day of November, 1936, and that she has not since remarried.

Deponent further states that he is 51 years of age, and has resided within one mile of the home all his life formerly occupied by the late Samuel Register, and to his own knowledge Mrs. Nancy Register resided with the the late Samuel Register as his wife, for 40 years.

Sworn to and subscribed before me this Jan. 18, 1937.
Kate C. Pafford
Ordinary Clinch Co., Ga.

J. J. Lansdale

GEORGIA, CLINCH COUNTY.

Personally before me came N. Allen known to me to be responsible and truthful, and a resident of Clinch County, who after having been duly sworn, says that of deponents own knowledge, Mrs. Nancy Register, who made the foregoing affidavit, is the lawful widow of Samuel Register who died in Clinch County November 23, 1936, and that she has not since remarried.

Deponent further states that he has known Mrs. Nancy Register continually since she was married to the late Samuel Register, and that she has resided with the late Samuel Register continuously as his wife, since she was married to him.

Sworn to and subscribed before me this Jan. 18, 1937.
Kate C. Pafford
Ordinary Clinch County, Ga.

N. Allen

AUDITED

Audited MAR 17 1891 1891.

Wm. A. Wright
COMPTROLLER GENERAL.

Register, S. W.

Clinch

1891.

Maimed Soldiers.

Voucher No. 7698

Amount $ 15

Paid to W. Register

For Loss of Fingers

Mch 17 1891.

Included in warrant No.

issued to Treasurer.

1891.

WARRANT CLERK.

Geo. W. Harrison, State Printer, Atlanta.

W. A. Wright

GEORGIA,
CLINCH COUNTY.

Personally appeared me the undersigned officer, J. J. Langdale to me well known, who on oath says that he is 52 years of age, and has resided in Clinch County all his life, and has known Mrs. Nancy Register all his life, and that she resided with the late Mr. Samuel Register, as his wife for forty years prior to the death of her husband, the late Samuel Register, whose death occurred during November 1936.

Sworn to and subscribed before me this 3d days of January, 1938

J. J. Langdale

Kate C. Pafford
ordinary Clinch Co. Ga.

Georgia, Clinch County.

Personally appeared before me the undersigned Officer, J.T. Dame, to me well known, who on oath says that he has resided in Clinch County, about forty five years, that he was Ordinary of said County for 12 years, and that Samuel Register, deceased pensioner was on the pension roll during his terms in Office, and that he knows from general reputation that Mrs Nancy Register and Samuel Register resided together as man and wife for at least forty years prior to his death on Nov. 23, 1936.

Sworn to and subscribed before me this Jan. 4th. 1938.

J.T. Dame

Kate C. Pafford
Ordinary Clinch County, Georgia.

1891.

No. 2693

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga. Mch 17 1891.

Mr. S.W. Register of the County of Clinch having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Acts approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for Loss of 3 fingers

He is entitled to receive the sum of Fifteen Dollars for such disability, the same being the allowance due for the year ending October 24, 1891.

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

TREASURER'S PAID STATE OF GEORGIA.

W. J. Northen,
GOVERNOR.

By the Governor,

R. H. Harrison
SEC'Y EXECUTIVE DEPARTMENT.

$ 15

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

Fifteen 00/100 Dollars,

per above voucher, this 19 of Mch 1891.

S W Register

W M M

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 Pension money due my deceased soldier husband, for the month of December, 1936.

This 21 day of January, 1938.

Mrs Nancy her Register
Widow pensioner. mark
Witness
Mrs Belle Allen
J. J. Langdale

Homerville, Ga.
Jan. "rd. 1937.

Pension Director,
State Capitol.

Dear Sir:
Find enclosed application of Mrs. Nancy Register, widow of Samuel Register, deceased, soldier pensioner of Clinch County, Mr. Register was due pension for December, 1936.

Mrs. Register cannot obtain a copy of her marriage license or a witness cannot be located at this time, but we have two of her neighbors to make affadavits for her.

Yours very truly,
Kate C. Pafford
Ordinary.

A. L. HENSON, DIRECTOR
C. ARTHUR CHEATHAM, ASST. DIRECTOR
MISS LILLIAN HENDERSON, ASST. DIRECTOR

THE VETERANS SERVICE OFFICE

STATE CAPITOL
ATLANTA

February 9, 1937.

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

Dear Mrs. Pafford:

The application of Mrs. Nancy Register, widow of Samuel Register, late a pensioner of Clinch County, whose death occurred November 25, 1936, for pension payments accrued to the husband for the year 1936 and unpaid at the time of his death, appears to meet the conditions of the Act of the General Assembly, approved October 9th, 1891; therefore, you are respectfully authorized to continue the name of the soldier on the pension roll of your county, just as if he were alive, and make the December, 1936 payment to his widow.

Mrs. Register cannot be admitted to the pension roll in her own right, for the reason that her marriage took place after January 1st, 1881.

I will make special requisition to Governor Rivers, in a few days, for the necessary $30.00 to make the payment to Mrs. Register.

With kindest regards,

Yours very truly,

Director.

PG-A

Kate C. Pafford
Ordinary.

GEORGIA, CLINCH COUNTY.

I, Kate C. Pafford, Ordinary Clinch County Georgia, do hereby certify that the within and foregoing is a true and correct copy of the death certificate of Samuel Register which is of file and on record in my Office.

This Jan. 3rd. 1938.

Kate C. Pafford
Ordinary Clinch County Georgia and
Ex-Officio Clerk thereof.

CERTIFICATE OF DEATH

GEORGIA DEPARTMENT OF PUBLIC HEALTH

BUREAU OF VITAL STATISTICS

Registered No. 1076

1. PLACE OF DEATH
County Clinch Militia District (Number and Name) 1219, Fargo State of Georgia
City or Town _____ Length of residence in this city or town: Yrs. ____ Mos. ____ Ds. ____ NON-RESIDENT (Yes or No) _____
Street and Number (No.) _____ (Street) _____ Ward _____
(If death occurred in a hospital, give its name instead of street and number)

2. FULL NAME Samuel Register
Residence (City or Town) Council Ga. (Street and Number) _____ (State) _____

PERSONAL AND STATISTICAL PARTICULARS

3. SEX	4. COLOR or RACE	5. Single, Married, Widowed, Divorced (write the word)
male	white	married

6. DATE OF BIRTH (month, day, year) _____

7. AGE	Years	Months	Days	If less than one day
	94	6	9	Hours ____ Minutes ____

8. OCCUPATION
(a) Trade, profession or particular kind of work done, as spinner, sawyer, bookkeeper, etc. Retired Farmer
(b) Industry or business in which work was done, as cotton mill, sawmill, bank, etc. _____
(c) Date deceased last work at this occupation (month and year) _____ (d) Total years spent in this occupation _____

9. BIRTHPLACE (P. O. Address) Stockton Ga. R #2

FATHER
10. NAME David Register
11. BIRTHPLACE (P. O. Address) North Carolina

MOTHER
12. MAIDEN NAME Matilda McDaniel
13. BIRTHPLACE (P. O. Address) D.K.

14. INFORMANT
(Signed) Dave Register
(Address) Fargo Ga.

19. BURIAL PLACE
(Cemetery) Bony Bluff
(Postoffice) Fargo Ga. Date 11-25-1936

20. UNDERTAKER
(Signed) John Swiecith
(Address) Valdosta Ga.

MEDICAL CERTIFICATE OF DEATH

16. DATE OF DEATH Nov. 23. 1936 at 6 P. M.
(Month, Day, Year) (Hour)

17. I HEREBY CERTIFY, That I attended the deceased from _____ 19__, to _____ 19__
I last saw h____ alive on _____ 19__, death is said to have occurred on the date and hour stated above.
The principal cause of death and related causes of importance in the order of onset and duration of each:

Other contributory causes of importance:
Mr. Register had no attending Doctor for about one year

What test confirmed diagnosis? _____
(Specify whether autopsy, operation, laboratory, or clinical)

If death was due to external causes (violence) fill in also the following:

Was injury an accident, suicide, or homicide? _____

Where did injury occur? _____
(Specify city or town, if outside of limits, the county, and also the state)

Did injury occur in a home, public place or industry? _____

Manner of injury _____

Nature of injury _____

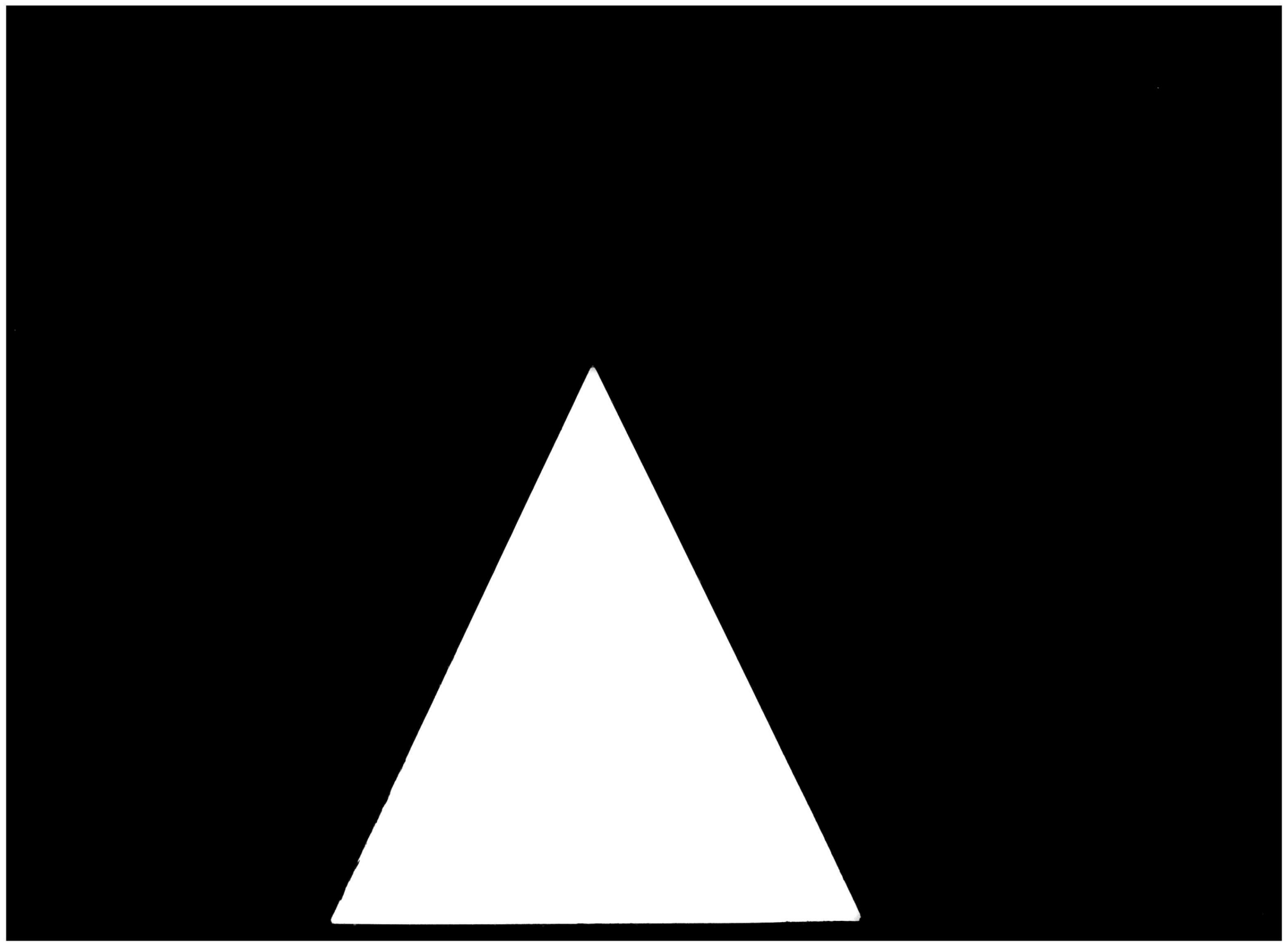
(Signed) _____ M. D.

(Address) _____

15. FILED Sept. 15 1937
(Signed) S. H. Tomlinson
(Local Registrar)

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. Cause of death should be stated in plain terms, so that it may be properly classified. Exact statement of occupation is very important. Was disease or injury caused by dangerous or insanitary conditions or occupation? _____ Where was disease contracted if not at place of death? _____

V. S.—2



Riberon, D.M.

No. 2113

Clinch Co.

INDIGENT PENSION

R 26 **1897.**

Name D McRiberon

County Clinch

Approved 7/1 1897.

E/1956

WARRANT HANDED TO

W. A. W

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

3/9/97

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, D. McRiberon hereby authorize
Wm A. Wright cust of Atlanta Ga
to receive and receipt for the pension allowed and request that he remit same to D. McRiberon
at Homerville by Mail
in care of Ordinary Ga
Witness my hand and seal this 1st day of March 1897.

Executed in presence of
Ralph Beale
Geo. Cornelius
Ordinary

David. M. Riberon

POWER OF ATTORNEY.

STATE OF GEORGIA,
Glynch County.

I, D. M. Riberon hereby authorize
Wm a Wright att'y at Attorney to Jas
to receive and receipt for the pension allowed and request that he remit same to D. M. Riberon
at Hamersville by Mail
in care of Ordinary

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

Executed in presence of
Richd Nichols
Geo. Comlens
Ordinary

David M. Riberon

Riberon D. M.
No. 2113 Co. Glynch
INDIGENT PENSION
1896 1897.
Name D. M. Riberon
County Glynch
Approved 7/1 1897.
7/1 1897
7/1 1897

Questions for Applicant.

STATE OF GEORGIA,
Glynch County.

David M Riberon of said State and County, desiring to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (give State, County and post office.) David M Riberon Wingus Glynch Co. Ga
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? above named place been a resident 60 years
3. When and where were you born? Born 20 July 1835 in Camden Co Ga
4. When and where and in what company and regiment did you enlist or serve? in March 1862 At Waynesville Ga Company "K" 26 Ga. Reg.
5. How long did you remain in such company and regiment? until the Surrender from the date of my enlistment
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 Gen Lee at Appomattox Court House in Va
8. What is your present occupation? Principally a farm labor
9. How much can you earn (gross) per annum by your own exertions or labor? about $125 per annum
10. What has been your occupation since 1865? farming, teaching and doing job work
11. Upon which of the following grounds do you base your application for pension, viz.: first "age and poverty," second "infirmity and poverty" or third "blindness and poverty"? Age, 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 paralisis 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? None whatever except a county warrant of $50
14. What property, effects or income did you possess in 1894, 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 Glynch Co I returned nothing at all
16. How were you supported during the years 1895 and 1896? By doing job work testing a little and by friends and relatives
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? Cant 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 Cant 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? None whatever

Sworn to and subscribed before me this the 1st day of March 1897.

David M. Riberon
Applicant.

Geo. Comlens Ordinary
of Glynch County.

Every Question MUST be Answered.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Clinch County.

Jno C. Highsmith, of said State and County, having been presented as a witness in support of the application of David M. Rebran 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? Jno C. Highsmith and reside at Hybert Clinch Co Ga

2. Are you acquainted with David M Rebran, 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 Wingress Clinch Co Ga. having been a resident of Ga 62 years

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 1862 at Waynesville Ga in Company "K" 26 Ga Reg

6. Were you a member of the same company and regiment? Same Reg.

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 years. he was when not in the field generally engaged in detailed duty always found at his post of duty and made a good soldier discharged at Appomattox Court house at the Surrender by Mr Grant

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 years

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 small school when able, his Physical Condition Extremely 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 vitruals and clothes

13. What portion of his 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 hard labor, or do any work whatever, he is very feeble and has partial paralisis

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

Sworn to and subscribed before me, this the 1st day of March 1897.

John C. Highsmith
Witness.

George Comelius Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Clinch County.

Personally came before me J. E. Lee M. D. and L. C. Mattox 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. Rebran 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 infirmities

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 8th day of March 1897.

J. E. Lee M.D.
L. C. Mattox

George Comelius Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch County.

I, George Comelius, Ordinary in and for said County, hereby certify that the applicant David M. Rebran 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 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 Comelius 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,
Clinch County.

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

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

D M Riberon [L. S.]

Executed in presence of
H. M. Anderson
George Cornelius
Ordinary

Riberon, D. M.
Clinch Co.
(For Those Already Enrolled.)
NO. 2100

INDIGENT
SOLDIER'S PENSION,
1898.

Name D M Riberon
County Clinch

WARRANT ISSUED
1/21 1898.

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, D. M. Riberon, hereby authorize
William A Wright Com G of Atlanta
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 16th day of January 1899.

Executed in presence of
J G Griffis
George Cornelius
Ordinary

D M Riberon (L. S.)

Riberon, D. M.
Clinch County
CODE SEC. 1254.
(For Those Already Enrolled.)
No. 1966

INDIGENT
SOLDIER'S PENSION,
1899.

Name D M Riberon
County Clinch
Georgia

WARRANT ISSUED
1/17 1899

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
W A W

Geo. W. Harrison, State Printer, Atlanta.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears D M Riberon 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 20th day of February 1865; that he is 62 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of three years in Company R, of 26th Regiment of Georgia; that his physical condition is as follows: Paralisis, 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 10th day of January 1898. — D. M. Riberon.

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

Given under my official signature and seal this 10th day of January 1898.

Affix your seal here.

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 Riberon 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 1861; 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 3 Years in Company K, of 26th Regiment of Georgia Volunteers; that his physical condition is as follows: Old age, public charities

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 1899. I have heretofore as a resident of Clinch county been allowed a pension for the year 1898

16th day of January 1899. Sworn to and subscribed before me, this, the

Ordinary.

State of Georgia,
Clinch County.

I, George Cornelius Ordinary of said County, do certify that I am well acquainted with D M Riberon 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 16th day of January 1899.

Affix your seal here.

George Cornelius
Ordinary Clinch County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County,

I, D. M. Riberon hereby authorize William F. Wright of Atlanta Georgia Comp Genl 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 8th day of January 1900.

D M Riberon [L. S.]

Executed in presence of

George Cornelius
Ordinary

Riberon D. M.
Clinch Co.

CODE SEC. 1254.
(For These Already Enrolled.)

NO. 2020

INDIGENT
SOLDIER'S PENSION,
1900.

Name D. M. Riberon
County Clinch

WARRANT ISSUED
January 25 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,
Clinch County.

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

Witness my hand and seal, this 28 day of January 1901.

D M Riberon [L. S.]

Executed in presence of
W. T. Howell Ordinary

Riberon, D. M.
Clinch County
Ga

CODE SECTION 1254
(For These Already Enrolled.)

No. 3941

INDIGENT
SOLDIER'S PENSION.
1901.

Name D M Riberon
County Clinch

WARRANT ISSUED
2/13 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 Riberon 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 1835; 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 K, of 26th Regiment of Georgia Volunteers; that his physical condition is as follows: Infirmity Paralesis old age and 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 1900. I have heretofore as a resident of Clinch county been allowed a pension for the year 1899

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

[redacted] Ordinary.

State of Georgia,
Clinch **County.**

I, George Lomelin Ordinary of said County, do certify that I am well acquainted with D M Riberon 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.

Affix your seal here.

George Lomelin
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 K, of 26 th 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.

D M Riberon
Riberon

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 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.

Affix your seal here

W, Z, 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,
Clinch County.

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

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

Executed in presence of
W. Z. Howell

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)
No. 5132

INDIGENT
SOLDIER'S PENSION
1902.

Name D M Ribron
County Clinch
Co. K Regiment 26

WARRANT ISSUED
Jan 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

Ribron D. M.
Clinch Co,

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, D. M. Ribron hereby authorize W. A. Wright
of Fulton Co Ga
to receive and receipt for the pension allowed and request that he remit same to
W. Z. Howell at Homerville 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. Z. Howell

Ribron D. M,
Clinch Co

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)
No. 5656.

INDIGENT
SOLDIER'S PENSION
1903.

Name D M Ribron
County Clinch
Co. 26th Regiment

WARRANT ISSUED
Jan 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. Harrison, State Printer, Atlanta.

No date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County.

Personally appears D. M. Ribron of Clinch County, State of Geoogia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 20 day of Feb. 18 35; 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 4 Years in Company K, of 26th Regiment of Georgia Volunteers; that his physical condition is as follows: Has partial hearing 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 June 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 3rd day of January 1902.
W. L. Howell
Ordinary Clinch County.

Affix your seal here

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 1835; 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 K, of 26 th Regiment of Georgia Volunteers; that his physical condition is as follows: Old from 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.
D. M. Ribron
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 26 day of January 1903.
W. L. Howell
Ordinary Clinch County.

Affix your seal here

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 Rib[illegible] hereby authorize W A Wright of Fulton Co Ga to receive and receipt for the pension allowed, and request that he remit same to W. T. Howell at Homerville Ga by mail

WITNESS my hand and seal, this 18 day of January 1904.

David M Ribeson [L. S.]

Executed in the presence of
W T Howell

Ribeson, David M.
Clinch County
CODE SECTION 1254
(FOR THOSE ALREADY ENROLLED.)
No. 5760

INDIGENT
SOLDIER'S PENSION
1904.

Name David M. Ribeson
County Clinch
Co. Regiment

WARRANT ISSUED
FEB 24 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
~~Stat Grady~~
Geo. W. Harrison, State Printer, Atlanta.

No date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, D M Ribeson hereby authorize W A Wright of Fulton County to receive and receipt for the pension allowed, and request that he remit same to mill at Hammerville Ga by Check or Draft

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

D M Ribeson [L. S.]

Executed in the presence of
R. G. Dickerson

Ribeson, D. M.
Clinch County
CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)
No. 6358
H 26

INDIGENT
SOLDIER'S PENSION
1905.

Name D M Ribeson
County Clinch
Co. Regiment

WARRANT ISSUED
MAR 1 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
W

GEO. W. HARRISON, MANAGER, FOR 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. 1895; that he is 69 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 years 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 Nil 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 4

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

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 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.

W. L. Howell

Ordinary Clinch County.

Affix your seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
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. 1895; that he is 69 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 yrs in Company H, of 26 th Regiment of Georgia Infantry; that his physical condition is as follows: Poor old infirm man unable to work

that his property consists of the following items: nothing

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

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes 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. D. M. Ribron

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 2 day of Jan 1905.

W. L. Howell

Ordinary Clinch County.

Affix your seal here

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

Seal here

Ordinary.....County.

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

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

CLINCH COUNTY.

I, W. V. Musgrove Ordinary of said County, do certify that I know Mrs. Ellen Riberon 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 1919.

That I also know Nathaniel Knight witness as to marriage, ~~and I also know~~ ~~; that both of the foregoing were duly sworn by me before signing the respective affidavits~~ and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 1st day of Sept. 1919.

(SEAL.) W. V. Musgrove 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.

Ordered Riberon Ellen Riberon
Approved W. V. Clinch Co.
No. 4 V 6

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 Clinch
Name Mrs Ellen Riberon RIBERON
Widow of D. W. Riberon 11-2-1919
Company K
Regiment 26th Ga Infty
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. Musgrove, Ordinary of said County, do certify that I know Mrs. Ellen Riberon, 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 I know~~ ~~that both of the foregoing were duly sworn by me~~ ~~before signing the respective affidavits~~ and that they ~~is~~ 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. Musgrove 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.

Riberon, Ellen (Mrs.) Clinch Co. No. 11-2-1919

Widow's Application

To Be Filled in Blue Ink by Widow Who Married Prior to the Act of July 14, 1890, and Prior to the Act of July 11, 1919.

County Clinch
Name Ellen Riberon
Widow of A. W. Riberon
Co. Co. Ga. 26th Infy.
Regiment
Appointed
Date of Death
Commissioner of Pensions
Rec'd Bureau of Pensions
9-3-1919

Riberon, Ellen (Mrs.)
Clinch Co.

1923

Application for Pension Due Deceased Pensioner

(UNDER ACT 1904)

(To pay expenses of last illness or funeral)

Kate C. Pappord Ordinary

For Mrs Ellen Riberon

of Clinch County

Old or New Class?

Died July - 26th, 1923

Amount, $ 100

Approved and ordered paid.

John W. Clark 14 Dec, 1923

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 pemarmently filed with them. Do not keep this application in your office.

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,
CLINCH, COUNTY.

I, W. V. Musgrove, Ordinary of said County, do certify that I know Mrs. Ellen Riberon, 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 Nathniel Knight witness as to marriage, and I believe him 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. 1919.

(SEAL) W. V. Musgrove 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.

Riberon, Ellen
Clinch Co. Ga.
No. 11 73

Widow's Application

To Be Filed in Ordinary's Office. Widow Entitled Who on the Indigent Roll or Pension Under Act of July 11, 1919—As Amended by Act of 1922.

County Clinch
Name Mrs. Ellen Riberon
Widow of A. M. Riberon

Enrolled 1912
Age 76
Allowed 24
Paid 24 Sept 1919

J. W. Lindsey Commissioner of Pensions
Dep. Examiner Co. Pension Office
9/5-1919

Riberon, Elled (Mrs.)
Clinch Co.

1923

Application for Pension Due Deceased Pensioner

(UNDER ACT 1904)

(To pay expenses of last illness or funeral)

Kate C. Pappord Ordinary
For Mrs. Ellen Riberon
of Clinch County
Old or New Class?
Died July - 26th, 1923
Amount, $ 180 00

Approved and ordered paid.
John W. Clark 14 Dec, 1923
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 pemarnently filed with them. Do not keep this application in your office.

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 24th 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. 1856. 19

Sworn to and subscribed before me, this the 1st day of Sept. 1917.

W.H.Thompson C. Ordinary
of CLINCH County.
(SEAL)

Mrs. Ellen Riberon.

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

STATE OF GEORGIA, Clinch, COUNTY

Personally before me come Nathanal 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 19 17, 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 5 day July 1917

J.L. Sharpe Gleaton Co
of Georgia County.
(SEAL)

his
Nathnil X. Knight
mark
X

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 1921, 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 $ 102.50 per sworn statement fully and completely itemized, hereto attached.

Sworn to and subscribed before me this 4th day of Dec. 1921
Kate C. Pafford, Ordinary.
County.

J.J. Riberon

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 of 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 1921, and I now believe said pensioner to be dead.

Given under my hand and official seal, this 4th day of Dec. 1921

(SEAL)
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 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. 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 filled out.
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 5 day of July 1917

Nathniel X. Knight X
Mark

J L Beach Glynn Co
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. 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 filled out.

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.

Funeral expenses of Mrs. Ellen Riberon.

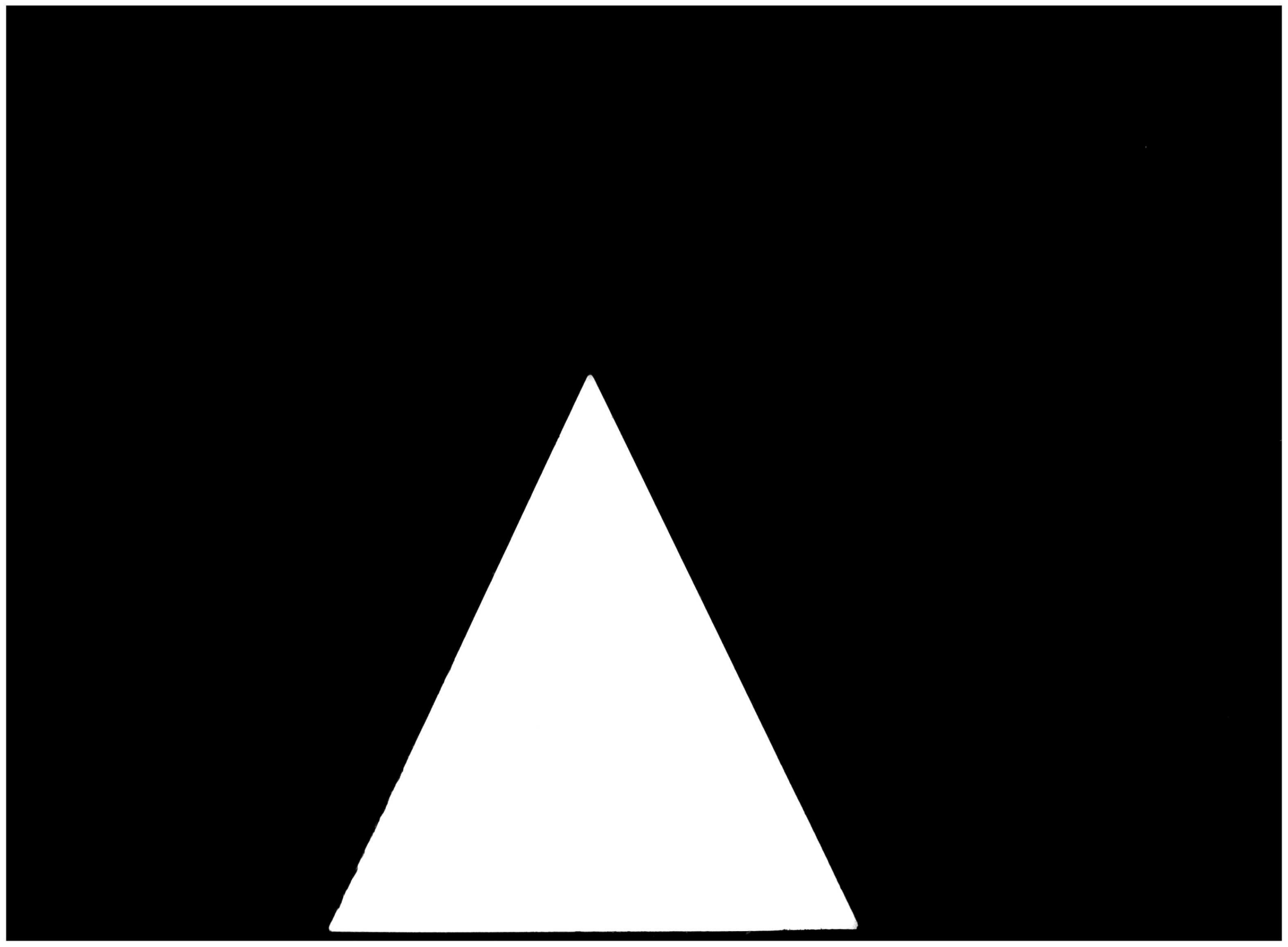
July, 26th. 1925.	Casket,	$70.00
" " "	Shroud	20.00
Jul.1st.to Jul. 26th.1925.	Drugs	12.00
$100.00		$102.00

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



Rives, W. J.
Dn 1905
No. Clinch Co.

INDIGENT PENSIO[illegible]

South Carolina

1902.

Name W. J. Rives

County Clinch

Co. S. C. Light Arty Re[illegible]

Approved

JOHN W. LINDSEY,
Commissioner of Pensio[illegible]

WARRANT HANDED TO

Ordinary will write Name of Applicant, Co[illegible] and Regiment on back as indicated above.

Geo. W. Harrison, State Printer, Atlanta.

9/2 1902 1/27 19[illegible]
8/29/04

[illegible] been [illegible]

J. W. Lindsey,
Com. Of Pensions

[illegible] Office, 8/20/03.

[illegible] must support his [illegible] by testimony that [illegible] is true. [illegible] away from duty [illegible]. Pensions [illegible] be those on [illegible] those who stay [illegible] show a good [illegible] staying away from [illegible]

J. W. Lindsey,
[illegible] of Pensions.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, W. J. Rives of Goulton County Ga hereby authorize W. A. Right to receive and receipt for the pension allowed, and request that he remit same to Mrs at Homerville by Register

Witness my hand and seal, this 1 day of Sept 1902.

W. J. Rives [L. S.]

Executed in presence of
W. J. Lindsey
Bd
C C

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, W J Rives hereby authorize
W A Right of Toulton County Ga
to receive and receipt for the pension allowed, and request that he remit same to Mail
at Homerville by Register.

Witness my hand and seal, this day of Sept 1902.

W J Rives [L. S.]

Executed in presence of
W T Howell
Ord
C C

Pension Office, 8/20/05.
Applicant must support his statement by testimony that this man was away from duty nine months. Pensions are to be paid to those on the rolls to those who stay home for staying away from home.
J.J. Lindsey,
Com. of Pensions.

Rives, W. J.
Pvt. Co. K, 64 Ga.
Clinch Co.

INDIGENT PENSION
1902.

Name W J Rives
County Clinch
Co. M. C. Light Cav. Regt.
Approved
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO
Ordinary will write Name of Applicant, Co. and Regiment on back as indicated above.
Gen. W. Harrison, Solicitor, Atlanta.
9/2-1902. 1/27-1904

Questions for Applicant.

STATE OF GEORGIA,
Clinch County.

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

1. What is your name and where do you reside? (give State, County and post office) W J Rives residing in Clinch County Taylors G a
2. How long and since when have you been a resident of this State? Since 1850
3. When and where were you born? North Carolina Jan 15 1834
4. When and where and in what company and regiment did you enlist or serve? Sept 15 1863 Wamsville Ga Clinchs Lt Battery and Gilmers Brigade
5. How long did you remain in such company and regiment? 11 months 15 Day
6. When and where was your company and regiment surrendered and discharged? the 19 Day of December 1864 at ft McAlister
7. Were you present with your company and regiment when it was surrendered? no
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? home on sick furlow by J W Callinhan Lt Surgeon & Examiner Board Savannah
9. How much can you earn (gross) per annum by your own exertions or labor? about $25.00
10. What has been your occupation since 1865? farmer
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"? Infirmity 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? a Gd 60 or 1865 have not been able to earn my support in four years
13. What property, real or personal, or income, do you possess, and its gross value? $25
14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900 and 1901, and what disposition, if any, by sale or gift, have you made of same? 1894 no property that year 1895 $25
15. In what County did you reside during those years, and what property did you then return for taxation? in Clinch Co a tract of wild land worth at $25
16. How were you supported during the years 1899, 1900 and 1901? By my Children
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 100 I earned 25 Dollars
18. What was your employment during 1898, 1899 and 1901? What pay did you receive in each year? I had no employment those years
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? Wife one Daughter no Support all but Support by my Children
20. Are you receiving any pension? If so, what amount and for what disability? none
21. Have you ever made an application for pension before? no
22. How many applications have you ever made and under what class? none

Every Question MUST be Answered.

Sworn to and subscribed before me this the 1 day of Sept 1902.
W J Rives Applicant.
W J Howell Ordinary,
of Clinch County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Clinch COUNTY.

W H Chancy, of said State and County, having been presented as a witness in support of the application of W J Rives 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 Chancy in Clinch County Ga
2. Are you acquainted with W J Rives, 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 Clinch County now him 42 years
4. When, where and in what company and regiment did he enlist, and how do you know? in Wainesville 15 of Sept 1863 Clinch St Batry anderson Brigade
5. Were you a member of the same company and regiment? yes
6. How long did he perform regular military duty? 11 months an 15 Days
7. When and where was his command surrendered? on Dec the 13 1864 at ft macastle
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 furlow
When did he leave his command? 1 Sept 1864 For what cause? sickness
By what authority he left? J W Calenhamsr How do you know all of this? Sergeon examing Board Savanah Because I was with him
11. What property, effects or income has the applicant? (Give your means of knowledge?) Dont 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? dont no
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? Dont no
14. What is the applicant's occupation and physical condition? has bin farmer 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 infernity
16. How was he supported during the years 1898, 1899, 1900 and 1901? dont no
17. What portion of his support for these four years was derived from his own labor or income? dont 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 the 1 day of Sept 1902.
W. H. Chancy Witness.
W T Howell Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Clinch COUNTY.

Personally came before me Drs T. 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 Rives, 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 the 1 day of Sept 1902.
W T Howell Ordinary.

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

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch COUNTY.

I, W T Howell Ordinary in and for said County, hereby certify that the applicant W J Rives resides in said County, and has been a bona fide resident of this State since the 15 day of February 1863 and that the witnesses, viz.: W H Chancy 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 show that applicant returned for taxation in his name in 1899 [illegible] Dollars of property, and in 1900 Tax digest dont show 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 T Howell Ordinary,
of Clinch 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, W. J. Rivers 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. Drum Ordinary at Homerville Ga
by

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

W. J. Rivers [L. S.]

Executed in the presence of
J. T. Drum
Ordinary

Rivers W. J.
Clinch County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)
No. 4307

INDIGENT
SOLDIER'S PENSION
1905.

Name W. J. Rivers
County Clinch
Co. Regiment

WARRANT ISSUED
MAR 1 3 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
W. J. Rivers

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

NO DATA

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, W. J. Rivers hereby authorize
W. A. Wright of Fulton Co. Ga
to receive and receipt for the pension allowed, and request that he remit same to
J. T. Drum Ordinary at Homerville Ga
by mail

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

W. J. Rivers [L. S.]

Executed in the presence of
J. T. Drum

Rivers W. J.
Clinch County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)
No. 1836

INDIGENT
SOLDIER'S PENSION
1906.

Name W. J. Rivers
County Clinch
Co. Regiment Light Battery Artillery Brigade

WARRANT ISSUED
JAN 26 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
W. J. Rivers

THE FOSTER PRINTING AND PUBLISHING CO., ATLANTA, GA.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County.

Personally appears W. J. Rives 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 Feby 1850; that he is 70 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 Clinch Lt Anderson Battery, of Brigade Regiment of Georgia Vol; 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, 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~~. New pension for 1905

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

W J Rives

J. T. Dame Ordinary.

STATE OF GEORGIA,
Clinch County.

I, J. T. Dame Ordinary of said County, do certify that I am well acquainted with W. J. Rives 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. Rives 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 _____ 1850; 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 Gov'd Clinch Light Battery Anderson Brigade; 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. Rives

J. T. Dame Ordinary.

State of Georgia,
Clinch County.

I, J. T. Dame Ordinary of said County, do certify that I am well acquainted with W. J. Rives 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. Rives 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 Feby 1850; that he is 70 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 Clinch Light Artillery, of Anderson Brigade th Regiment of Georgia Vol; 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, 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~~. New pension for 1905

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

W J Rives

J. T. Dame Ordinary.

STATE OF GEORGIA,
Clinch County.

I, J. T. Dame Ordinary of said County, do certify that I am well acquainted with W. J. Rives 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

Affix your Seal here

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. Rives 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 ____ 1850; 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 Gov'd Clinch Light Battery Anderson Brigade; 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. Rives

J. T. Dame Ordinary.

State of Georgia,
Clinch County.

I, J. T. Dame Ordinary of said County, do certify that I am well acquainted with W. J. Rives 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

Affix your seal here

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. Rivers, 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. Dame ordinary at Homerville Ga by mail

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

W. J. Rivers [L. S.]

Executed in presence of

J. T. Dame

Rivers, W. J.,
Clinch Co.,
Coon Section 1254.
(FOR THOSE ALREADY ENROLLED)

No. 4659

INDIGENT
SOLDIER'S PENSION
1907.

Name W. J. Rivers
County Clinch
Clinch Light Battery
Co. Regiment
Anderson Brigade

WARRANT ISSUED
1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

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 — day of — 18— ; 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 Clinch Light Battery, of — th Regiment Hudson's Brigade; that his physical condition is as follows: Infirmity Poverty 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 Clinch County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 1st day of Jan 1907. W. J. Rivers

J. T. Dame Ordinary.

State of Georgia,
Clinch **County.**

I, J. T. Dame 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 1st day of Jan 1907.

J. T. Dame

Ordinary Clinch County.

Affix your seal here

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

Georgia, Clinch County:
Per-
sonally 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 diarrhoe that said disease and the Rail Road being cut prevented him from returning to his command. He was under Dr W. B. Folks and Dr L. C. Mattox for two years after the war closed suffering from the above named 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 Jan 26 - 1903

W. L. Howell,
Ordinary.

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

Georgia, Clinch County:
Per-
sonally 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 the 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 Raild Road was cut and he suffered badly from chronic diarrhoe till the end of the war and for two years thereafter.

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

the applicant is entitled to full faith and credit and that I believe the facts above set forth are true. Jan 26 1903 —
W. F. Howell,
Ordinary C.C.

This man W. 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.
J. L. Morgan

Sworn to and subscribed before me this — ~~April~~ June 18 1904 —
W. F. Howell,
Ordinary.

Georgia Clinch County:

I do hereby certify that I have 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.C.

~~Sworn~~

MARSHALL & BRUCE CO.
STATIONERS,

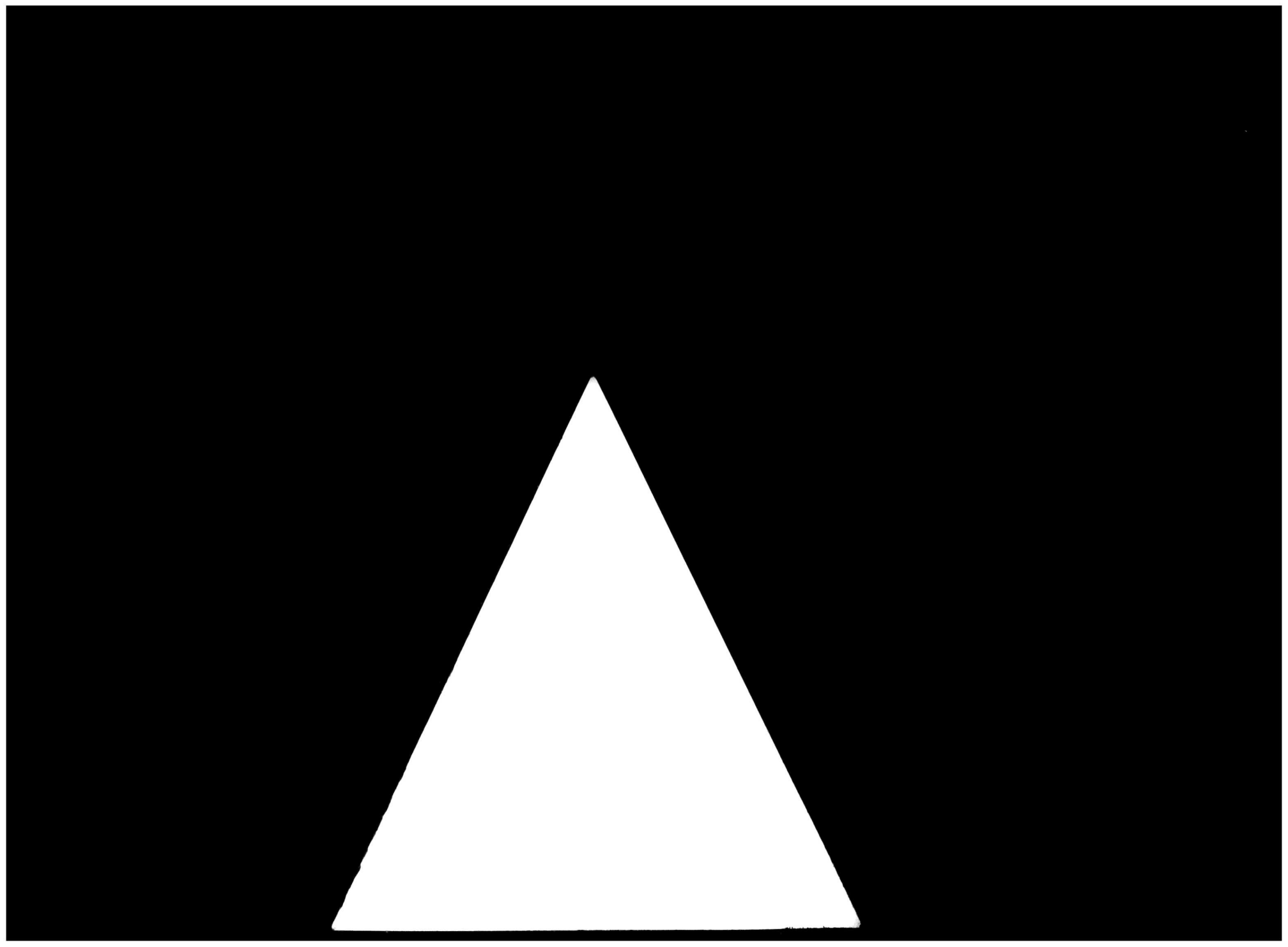
General Presentments of the Grand Jury April Term, Clinch Superior Court 1904.

We recommend that W. J. Rice and Richard Crosby be placed on the Pension Rolls of the State of Georgia.

Georgia Clinch County.

I do hereby certify that the above and foregoing is a true Abstract of the minutes of Clinch Superior Court so far as relates to two Names to be placed on the pension Rolls of the State of Georgia Given under my hand and seal of office June 18th 1904.

S. N. Register.
Clk S.C.C.C.



Isham Roberts,
Co-G-50th Ga. Regt.
Private. Mar-4-62.
Captured, Strasburg, Va., Oct-19,
1864-Released. Ft.
Lookout, Md., prison,
June-17-1865-
(W.R.)

Witness Ok-

Oct 1919
Roberts, Charity
Wid. Isam Roberts
Clinch

No. 474-75

Widow's Pension

UNDER ACT 1910.

County CLINCH.

Name Mrs Charity Roberts,

Widow of Isam Roberts,

Kirkland, Ga. R.F.D.

G-50 Ga Regt

J. W. LINDSEY,
Commissioner of Pensions.

Chas. P. 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? Isham 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 prisner
7. If he was not present state clearly where he was?
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? slitely 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 prisnner
   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 surrended he was captured at Strawsburg in 1864 was in prison at Pt 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 June 1918.

her
Charity × Roberts
mark

W. T. Musgrove Ordinary.
[illegible] County.

Roll No. 774-73

Application of Charity Roberts for Pension.

Widow's Pension
UNDER ACT 1910.

Name Mrs. Charity Roberts,
Widow of Isam Roberts,
County CLINCH.

J. W. LINDSEY,
Commissioner of Pensions.

Chas. P. Byrd, State Printer.

Roland Roberts,
Co. G. 50th Reg. Ga.
Consdt. mar-4-'62.
Captured, Strasburg, Va., Oct-19, 1864-Released, Pt. Lookout, Md., June-17-1865.
(77 R.)
Private Ab-

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

STATE OF GEORGIA,
Clinch County.

Personally before me comes C.W.Curry 2d Sist 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? Milltown 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 Aplicant and her husband living together as husband and wife at the date of his death? yes
8. If not, how long did they live apart before his death? Were they divorced?
9. When, where and in what Company and Regiment did Isham Roberts enlist? Co G. 50th Ga reg I862 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? I865 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 ## 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 prisner
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 191 8 | his C W X Curry Sr mark

W.V.Musgrove 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 nothing	$
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 50	$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 10 day of June 1918 | Irwan Corbitt Mathis Guest his X mark

of County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch County.

I W.V.Musgrove 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 [redacted] 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.Musgrove Ordinary,
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.
4 All affidavits must be made before the Ordinary.
3 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

C W x Curry Sr
his mark

W. V. Musgrove Ordinary,

of CLINCH County.

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.
4 All affidavits must be made before the Ordinary.
3 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 (Mrs.)
CLINCH CO.

For Clinch County

1923

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. 8 1927

Amount ~~$15.00~~ 100.00

Approved and ordered paid OK

Dec. 14, 1929 R. deT. Lawrence 1928

[redacted]

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 payrolls to be permanently filed with them. Do not keep this application in your office.

Georgia Clinch County,

Personally appeared before me the undersigned subscribing officer an officer of said State duly qualified by Law to administer oaths, Irwin Corbitt 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 Corbitt

M J his x mark Guest

Sworn to and subscribed before me this 10 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 widow 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 ($) Dollars was due pensioner and unpaid at the time of said widow'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 $ 112.00 per sworn statements fully and completely ITEMIZED hereto attached.

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

Tharpe Roberts

, 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 knew 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 payments during this year ($150.00) 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, and 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 ..... 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 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 receipts.*

8th. Accept no bills for mending 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 folded, is filled 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 ~~xxxx~~ 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 ~~xxx~~ 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. Tharpe 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
	$115.00

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.

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

Robinson D. M.
Clinch County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 1835

INDIGENT SOLDIER'S PENSION 1906.

Name D. M. Riberon (Robinson)

County Clinch

Co. [illegible] Regiment 26th Ga.

WARRANT ISSUED
JAN 26 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
W. A. W.

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

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, D. M. Riberon hereby authorize W. A. Wright of Fulton Co. Ga. to receive and receipt for the pension allowed, and request that he remit same to J. T. Dennis Ordinary at Homerville Ga by Mail

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

D. M. Riberon [L. S.]

Executed in the presence of
J. T. Dennis

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, D. M. Roberson, hereby authorise
W. A. Wright of Fulton Co. Ga
to receive and receipt for the pension allowed, and request that he remit same to
L. T. Dame Ordinary at Homerville Ga
by mail

WITNESS my hand and seal, this 2nd day of Jan 1906.
D. M. Roberson [L. S.]

Executed in the presence of
L. T. Dame

Robinson D. M.
Clinch County

Code Section 1234.
(FOR THOSE ALREADY ENROLLED.)
No. 480

INDIGENT
SOLDIER'S PENSION
1906.

Name D. M. Roberson (Attorney)
County Clinch
Co. F Regiment 2nd Ga
WARRANT ISSUED JAN 26 — 1906.
JOHN W. LINDSEY, Commissioner of Pensions.
WARRANT HANDED TO W. A. W.

The Franklin Printing and Publishing Co., Ga. M. Hamilton, Ga.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, D. M. Roberson, hereby authorise
W. A. Wright of Atlanta Ga
to receive and receipt for the pension allowed, and request that he remit same to
L. T. Dame Ord. at Homerville Ga
by mail

WITNESS my hand and seal, this 1st day of June 1907.
D. M. Roberson [L. S.]

Executed in presence of
L. T. Dame

Robinson, D. M.,
Clinch Co.,

Code Section 1234.
(FOR THOSE ALREADY ENROLLED)
No. 4660

INDIGENT
SOLDIER'S PENSION
1907.

Name D. M. Roberson
County Clinch
Co. F Regiment 2d Ga
WARRANT ISSUED 1907.
JOHN W. LINDSEY, Commissioner of Pensions.
WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

not dated

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Clinch County.

Personally appears D.M. Roberson 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 Feby 1835; that he is 70 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 K, of 26th Regiment of Ga Vol, ; that his physical condition is as follows: Infirmity Poverty 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 2nd day of Jan 1906. D.M. Roberson

L.T. Dame Ordinary.

State of Georgia,
Clinch County.

I, L.T. Dame Ordinary of said County, do certify that I am well acquainted with D.M. Roberson 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.

L.T. Dame

Ordinary Clinch County.

Affix your seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
Clinch County.

Personally appears D.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 Feby 1835; that he is _____ 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 yrs in Company K, of 26 th Regiment of Georgia V. ; that his physical condition is as follows: Age & Poverty

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 June 1907. D.M. Robinson

L.T. Dame Ordinary.

State of Georgia,
Clinch County.

I, L.T. Dame Ordinary of said County, do certify that I am well acquainted with D.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 1st day of June 1907.

L.T. Dame

Ordinary Clinch County.

Affix your seal here

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

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

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 23rd day of March 1893.

T. J. Sauls [L. S]

Executed in the presence of us:
George Cornelius Ordway
C. S. Vining

DIRECTION.

Send money to me as follows, by Express to Stockton Ga P. O. Clinch County, Georgia.

T. J. Sauls

See Coffee Co 1892

1893.

Sauls T. J.
Clinch Co

No. 651

Application for Allowance

For the Year Ending October 24, 1893.

FOR

Bodily Wound

Applicant, T. J. Sauls
County, Clinch
Amount, 50
Date of Warrant, 3/7
Entered on record, 1/31

1893.

W. H. HARRISON
Secretary Executive Department.

WARRANT HANDED TO
W. H. HARRISON
Geo. W. Harrison, State Printer, Atlanta.

Vo Sylvester

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 23rd day of March 1893.

T. J. Sauls [L. S.]

Executed in the presence of us:
George Cornelius Ordway
C. S. Vining

DIRECTION.

Send money to me as follows, by Express to Stockton Ga P. O. Clinch County, Georgia.

T. J. Sauls

1893.
Sauls T. J.
Clinch Co
No. 651
Application for Allowance
For the Year Ending October 31, 1893.
FOR
Rheumatism
Applicant, T. J. Sauls
County, Clinch
Amount, 50
Date of Warrant, 31
Entered on record, 31
1893.
W. H. HARRISON
Secretary Examiner's Department.
Warrant Handed to
W. H. HARRISON
Geo. W. Hartman, State Printer, Atlanta.
Vo Sylvester

For Applicants Heretofore Allowed Pensions.
STATE OF GEORGIA,

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

PERSONALLY appears J. G. Lewis of Clinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 26th day of December 1856; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company A, of 26th Regiment of Georgia Volunteers, Gordon's Brigade; that whilst engaged in such military service at the battle of Cold Harbor in the State of Virginia, on the first day of June 1864, he was wounded as follows: Gun Shot wound to the Left Side entering the right Parietal Bone of the Skull and passing obliquely through and out through the left parietal Bone causing Impaired Vision & contracting and Pending afore of Portions Muscles of the Upper Left eye Shard colinh, which Renders him essentially to Subsistently unable to work or labor

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

Sworn to and subscribed before me, this the 23rd day of March 1893.

J. G. Lewis

George Lewellen 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,
Clinch County.

I, George Lewellen Ordinary of said County, do certify that I am acquainted with J. G. Lewis the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, *and that he is disabled, to the extent he claims*, and I know he is the individual he represents himself to be, and that he resides in this County. as Sworn To by a witness

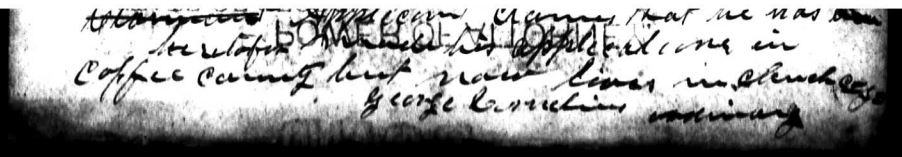
I further certify that George Lewellen ex before whom the foregoing affidavits were made and power of attorney was signed, is a Commissioner of said County, and the said affidavits and signatures thereto are genuine.

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

George Lewellen L.S.
Ordinary Clinch County.

STATE OF GEORGIA, Clinch County. I hereby certify that I have examined the within application and find that the applicant has been duly allowed a pension of fifty dollars per annum from the 26th day of October 1892 to the 26th day of October 1893, and that he has not received his pension for the year ending October 26th 1893. I have examined the records in my office and find that he has been allowed a pension for the years ending October 26th 1890, 1891, 1892 and 1893.

George Lewellen ordinary



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 D
Regiment 9th Fla.
Date of Husband's Death Dec. 1921
Date of Marriage Mar. 5, 1890
Approved

John W. Clark
~~G. E. McGREGOR,~~
Commissioner of Pensions.

11-3-28

Ordinary's Certificate

STATE OF GEORGIA,

Clinch COUNTY.

I, Mrs 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, 1928.

(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, 1881, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because Disabled Pensioners made no proof of service and were not required to do so.

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 E
Regiment 9th Fla.
Date of Husband's Death Dec. 1921
Date of Marriage Mar. 5, 1890
Approved

John W. Black
C. B. MORGAN,
Commissioner of Pensions.

11-5-28

Ordinary's Certificate

STATE OF GEORGIA,

Clinch COUNTY.

I, Mrs 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, 1928.

(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, 1881, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because Disabled Pensioners made no proof of service and were not required to do so.

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, 1931

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, 1931

Lillian 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,

Clinch COUNTY. (nonny)

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 ~~December~~ for 66 years 19 Continuously

Sworn to and subscribed before me, this the 2nd day of Jany, 1928.

Kate C. Paffford, Ordinary of Clinch County.

Mrs Nancy 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 deponent's own personal knowledge, Mrs. Nancy Sedgwick who made the 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 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 Clinch County ~~in Dec~~ 1921 when he died.

Sworn to and subscribed before me, this the 2nd day of November, 1928.

Kate C. Paffford, Ordinary of Clinch County.

G J Smith

(SEAL OF ORDINARY)

Application for Payment of Expenses of Last Illness and Funeral

(Under Act of 1919)

(To be disbursed by the Ordinary)

GEORGIA, Clinch 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 ~~died~~ left 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, 1941.

Kate C. Paffford, Ordinary.

Frank Thomas

CERTIFICATE OF THE ORDINARY

GEORGIA, Clinch 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 6 day of March, 1941.

(Seal of Ordinary) Kate C Paffford, 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 Pensioners Board 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 Pensioners Board 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 Pensioners Board of Public Welfare.

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

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

L. F. Sedgwick, or Sedgewick, enlisted as a private in Co. I, 6th Regt. Ga. Infantry Dec. 14, 1863. Roll for Apr. 30, to Aug. 31, 1864, shows him absent on furlough.

Roll for Sept.-Oct. 1864 last on file, shows him absent without leave since Sept. 5, 1864.

No later record has been found.

(Washington record.)

Was a pensioner.

Director Georgia Confederate Pensions and Records

Ledgewick Nancy
Clinch Co Ga

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 Sedgewick
Widow of W.F. Sedgewick
Date of Marriage March 6th 1898
Date of Husband's Death Nov.30.1921.
Company D
Regiment 9th. Fla.
Approved [illegible] 193
Director.

AUG 6 1937

5

Ordinary's Certificate

STATE OF GEORGIA,

Clinch COUNTY.

I, Kate C. Pafford, Ordinary of said County, do certify that I know Mrs. Nancy Sedgewick 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 B.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. 1856 Age? 81.

3. (1)When, (2)where and (3)to whom were you married? W.F. Sedgewick,
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. Nov 30/1921
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 Infantry, 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?

e. What was his physical condition when he left his Command?
f. What effort did he make to return to his Command?
g. In what way was he prevented from going back to his Command?
h. Was he captured by the enemy at any time?
i. If so, when and where? In what prison was he held and when was he released?

Sworn to and subscribed before me, this the 28 day of July, 1937.

Kate C. Pafford, Ordinary

of Clinch County.

(SEAL OF ORDINARY)

her
Mrs. Nancy Sedgewick
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 , 193

, Ordinary,

County.

Questions for Witness as to Marriage and Service of Husband.

STATE OF GEORGIA,
Clinch 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

4. When and to whom was she married? to W.F. Sedgewick Ware County Ga. 4/6/1898 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, Cl inch 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? amd when released?

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

B. F. Thomas
(Witness)

of ..... County.
(SEAL OF ORDINARY)

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. Sedgewick 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 6th day of March 1895

Marvin Lott. [SEAL]
Ordinary

CERTIFICATE

GEORGIA, Ware County.

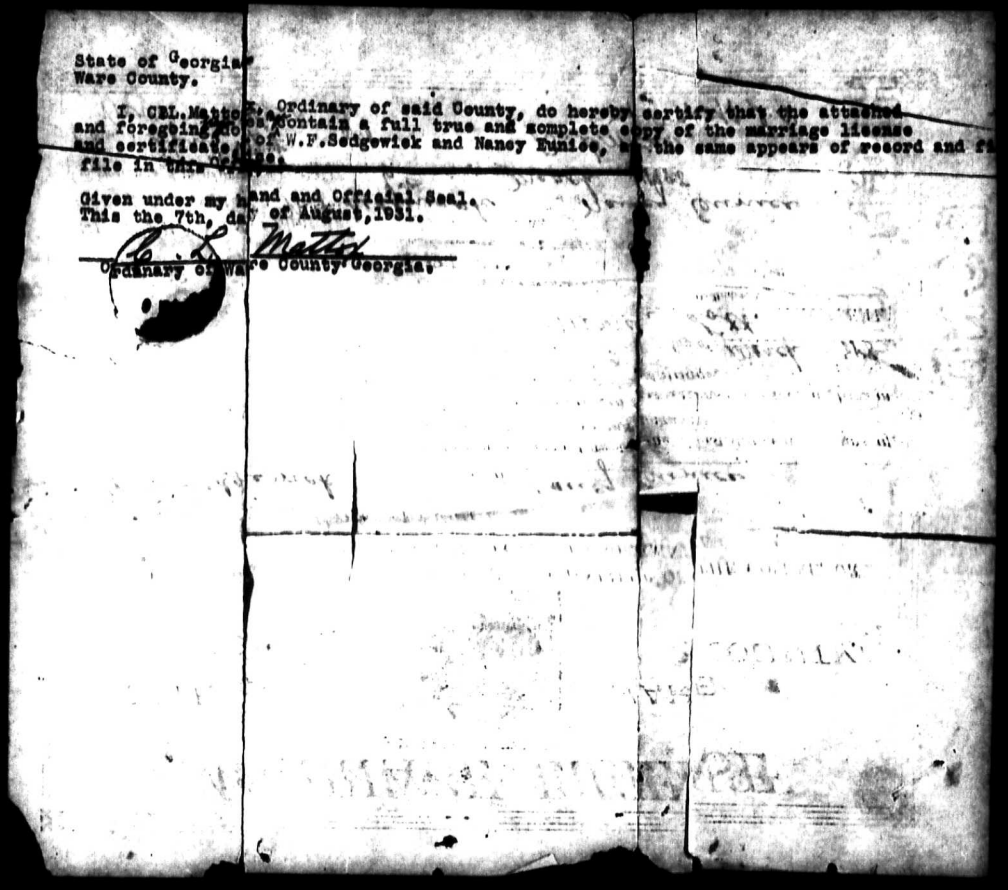
I Certify that W. F. Sedgwick and Nancy Eunice were joined in Marimony by me this 6th day of March 1895

Recorded April 4th 1895

Marvin Lott. Ordinary.

B. Smeat
M. P. & ex. J. P.

BAD COPY***OR**LIGHT PRINT



State of Georgia
Ware County.

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

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

C. L. Matt[illegible]
Ordinary of Ware County, Georgia.

~~PIEDMONT HOTEL~~
~~ATLANTA, GA.~~

PIEDMONT HOTEL
ATLANTA, GA.

1

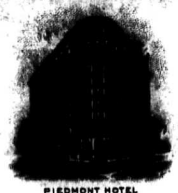
Dupont Ga
Nov 7-28

Hon Judge Clark Pension Commission
Atlanta Ga

Dear Judge Clark

Col [illegible] mailed some pension papers to me in your care & ~~[illegible]~~ wanted [illegible] called for them but was called back home before had time to go to your office - Mrs Arnold will please recall these papers are the ones

PIEDMONT HOTEL
ATLANTA, GA.



PIEDMONT HOTEL
ATLANTA, GA.

2

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

Thank you for your promptness

Your truly
A. L. Hughes

E. C. LOCKLIEAR

LOCKLIEAR & HUXFORD

FOLKS HUXFORD

PARTNERSHIP LIMITED TO CIVIL PRACTICE

ATTORNEYS-AT-LAW

FOLKS HUXFORD, SOLICITOR CLINCH COUNTY COURT

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, desceased, 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 oroceed 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,
Lockliear & Huxford.
By E C Lockliear

Personally before me came Dr H G Henry 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. Clin.

H G Henry

Personally before me came Dr H. G. Hmay 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. Clin.

H. G. Hmay

Commissioneref 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 Clingh County on this date.

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

E. C. LOCKLIEAR — FOLKS HUXFORD

LOCKLIEAR & 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,
Lockliear & Huxford.
By E C Lockliear

State of Georgia
Pension Department
Atlanta

R. deT. Lawrence
COMMISSIONER OF PENSIONS

December 11, 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 [redacted] Nancy Sedgwick and H. O. Macy and of letter of E. C. Lockliear.

Clerk Pension Department

This 11th day of December, 1911.

Notary Public

STATE OF GEORGIA
ATTORNEY-GENERAL'S OFFICE
ATLANTA

GEO. M. NAPIER
ATTORNEY-GENERAL
RESIDENCE TEL. DEARBORN 0039
T. R. GRESS
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 application for pension, submits proof to show that by reason of her age, infirmity or blindess, coupled with poverty, is entitled to a pension, un the pension laws of this State.

Very respectfully,
J R [redacted]
Assistant Attorney-General.

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 respectfully submit for your consideration the application of Mrs. Nancy Sedgewick for a pension as the widow of W. F. Sedgwick.

This application was disapproved on account of the marriage date of Mrs. Sedgewick 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

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.

Deponent 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.

her
Signed Mrs. Nancy X Sedgwick
Applicant
mark

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

Deponent 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 husbands application filed in said office.

This 2nd day of November, 1928.

Kate C. Pafford
Ordinary, Clinch County, Ga.

her
Signed Mrs Nancy X Sedgwick
mark
Applicant

STATE OF GEORGIA
ATTORNEY-GENERAL'S OFFICE
ATLANTA

GEO. M. NAPIER
ATTORNEY-GENERAL
RESIDENCE TEL. DEARBORN 0039
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 1881 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

(Nancy)
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 8th day of March 1880, 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 10 years continuously.

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

Kate C. Pafford, Ordinary of Clinch County

her
Mrs Nancy F Sedgwick
mark
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 Applicant's own personal knowledge, Mrs. Nancy Sedgwick, the applicant forgoing 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 has not since remarried; that she became the wife of W. F. Sedgwick on the 8th day of March, 1880; that she and he had resided together as husband and wife, continuously, since 8th day of March 1880; and that he was the same 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. Thos. "Pat" Gilleam

Director, Confederate Division
State Department of Public
Welfare

Disapproved

Widows Application
To Be Put on Roll in Her
Own Right When Husband
Has an Old 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, 1900

John W. Clark
Commissioner of Pensions

11 - 3 - 38

ORDINARY'S CERTIFICATE

STATE OF GEORGIA
Clinch County

I, Mrs. Kate C. Pafford Ordinary of said County, do certify that I know Mrs. N. 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 C. 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
		$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 this March, 6th. 1941. Frank Thomas.

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

PHILCO RADIOS
ELECTRIC AND KEROSENE BURNING REFRIGERATORS

FUNERAL DIRECTORS AND EMBALMERS

HOMERVILLE, GEORGIA

TO FRANK THOMAS

MONTH OF TERMS:

DATE	ITEM	CHARGES	CREDITS	BALANCE
	To Account Rendered			
MAR 1/41	CASKET	35.00		
	DRESS	10.00		
	H SERVICES	5.00		50.00

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

This Mar. 8, 1941

F. A. Brink
Clinch County Comm. of Health

DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

CERTIFICATE OF DEATH
GEORGIA DEPARTMENT OF PUBLIC HEALTH

State File No.
L. R. File No.

1. Place of Death
(a) County Clinch Militia Dist. No.
(b) City or Town Homerville, Ga. (If Outside City or Town Limits, Write Rural)
(c) Name of Hosp. or Institution
(d) Length of Stay Before Death: Hosp. or Institution In This Community

2. Usual Residence of Deceased
(a) State Ga. (b) County Clinch
(c) City or Town (If Outside City or Town Limits, Write Rural)
(d) R.F.D. and Box No.
(d) St. and No. or R.F.D. and Box No.

3. Full Name Nancy Nunez Sedgwick | If Veteran Name War | Social Security Number

PERSONAL AND STATISTICAL PARTICULARS

4. Sex Female | 5. Race white | Marital 6. Status (circle) S. M. (W) D.
7. If Married or Widowed Give Name of Spouse
8. Age Years 84 Months unknown Days If less than 24 hrs. Hrs. Min.
9. Date of Birth unknown 1857 Mo. Day Year Birth Place Appling Co., Ga.
10. Usual Occupation Housework
11. Industry or Business —
Father 12. Name (unknown) Nunez
13. Birthplace Appling Co., Ga.
Mother 14. Maiden Name unknown
15. Birth Place "
16. Informants Own Signature B. F. Thomas
17. Informants P. O. Address Homerville, Ga.
18. Burial, Cremation or Removal Burial (a) Date 3-1-'41
19. P. O. Address of Place of Burial Homerville, Ga.
20. Signature of Person Burying Body J. C. Chambers
21. P. O. Address of Undertaker Homerville, Ga. Date Filed With L. R. 3-1-'41
22. Registrar's Own Signature Folks Hurford (Which Certificate Sensitive Before Signing)

MEDICAL CERTIFICATION

23. Date of Death March 1 1941 Time 1:15 A.M. (Hour 1 Minute)
24. I hereby certify that I attended the deceased who died on the above date. I last saw her Alive on Feb. 26 1941
Primary Cause of Death Cerebral Hemmorrhage. Duration
(Please Underline the Cause to Which This Death Should Be Charged)
Contributory Causes Senility
(Including Any Pregnancy Within Three Months of Death)
Operation
Date of Operation Diagnosis: Clinical, Lab., X-Ray (Check) Was Autopsy Performed:
25. If death was due to external violence please answer the following questions:
(a) Accident, Suicide Homicide (Specify) (b) Date of Occurrence
(c) Place of Accident (City) (County) (State)
(d) Where: Home, Farm, Industry, Public Place While at Work
(e) Means of Injury
26. Physician's Own Signature F. M. Bruce, M. D.
Physician's P. O. Address Homerville, Ga. Date Signed 3-6-'41

Please answer carefully all questions to avoid receiving queries for omitted information. Please give age, occupation and Social Security No. to assist in selling U. S. claims.

Clinch

September 26, 1928.

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

Dear Sir:

Your letter of September 24, regarding the eligibility of a widow who was married after 1891 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, 1881.

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. W. 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 _____ Clerk

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

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, 9th. Fla., has not been approved for the reason that she was not married to her soldier husband prior to January 1, 1881.

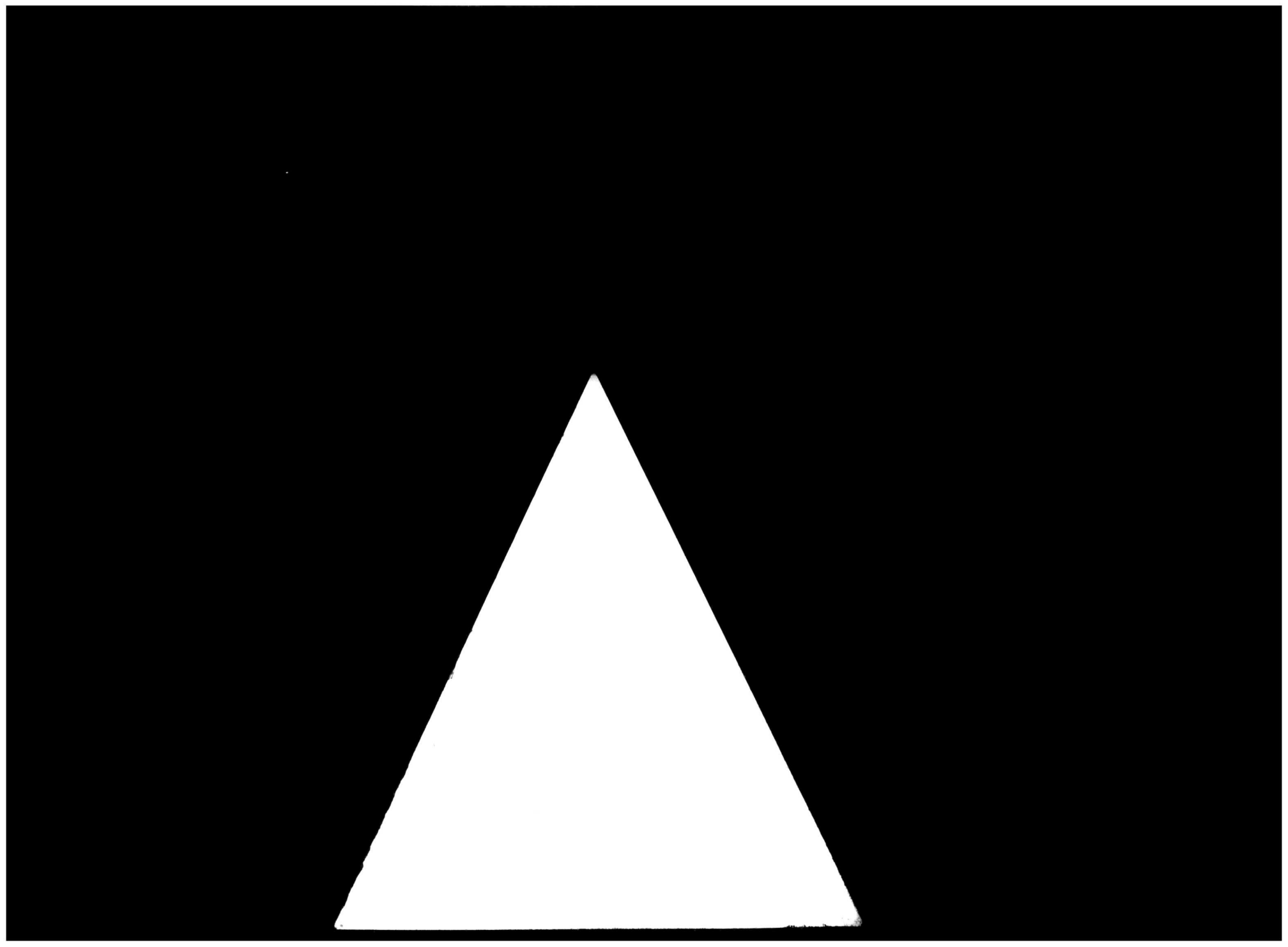
Should the law be amended to include those widows who were married in 1890, Mrs. Sedgwick should then make application to be enrolled as a pensioner.

With kind regards,

Very truly yours,

John W. Clark
Commissioner of Pensions

By:_____ Clerk



Sedgwick, W. F.
Clinch County

No. OR 1906

INDIGENT PENSION

1906

Name W. F. Sedgwick

County Clinch

Co. D. 9th Fla Regt.

Approved _____ 190_

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

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

8/24/15.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, W. F. Sedgwick hereby authorize W. A. Wright of Atlanta Ga to receive and receipt for the pension allowed and request that he remit same to J. F. Dane at Hazlehurst Ga by mail

Witness my hand and seal, this 28 day of May 190 5

W. F. Sedgwick [L. S.]

Executed in presence of
J. F. Dane
Ordinary C.C.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, W F. Ledgewick hereby authorise
W. A. Wright of Atlanta Ga
to receive and receipt for the pension allowed and request that he remit same to J T Dame
at Homerville Ga by mail

Witness my hand and seal, this 23 day of Aug 1905

W F Ledgewick [L. S.]

Executed in presence of
J. T. Dame
T Dame Q C

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,
Clinch COUNTY.

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

1. What is your name and where do you reside? (Give State County and post-office). William F. Ledgewick Homerville 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 Wilkinson County Ga
4. When and where and in what company and regiment did you enlist or serve? Dec 1862 in 1862 in Company D 9th Ga Regt Ga Volunteers
5. How long did you remain in such company and regiment? from June to December 1862 when the Surrender of Gen Lee April 9 1865 except 60 days furlough
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? No
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? Sick
9. How much can you earn (gross) per annum by your own exertions or labor? About Three Dollars per week
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, "infirmity and poverty," or third, "blindness and poverty" Infirmity 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? Shell wounded in Left Arm Gilmers Farm 1863. Lame in Right Leg about Four 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? Ware and Clinch Co Ga a few town lots and no property returned
16. How were you supported during the years 1899, 1900, 1901 and 1902? by myself and 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 $200.00 a year about $40.00
18. What was your employment during 1898, 1899, 1901 and 1902? What pay did you receive in each year? Small Jobs About $40.00
19. Have you a family? If so, [illegible]
20. [illegible]
21. [illegible]
22. [illegible]

Sworn to and subscribed before me this 17 day of Feby 1906
J. T. Dame C.C.
of Clinch County.

Every Question MUST Be Answered.

Ledgewick, W. F.
Clinch County.

No. Oct 1906

INDIGENT PENSION
1906

Name W. F. Ledgewick
County Clinch
Co. A 9th Ga Regt
Approved 190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Gen. W. Higgins, Assistant Secretary, Atlanta, Ga.

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 make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? Clinch County Ga.
Names O. P. Register and A. B. Swearingen
2. Are you acquainted with W. F. Sedgwick, the applicant; if so, how long have you known him? about Sixty years and Ingrain
3. Where does he reside, and how long and since when has he been a resident of this State?
All his life, and has resided in Clinch county Ga
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 I was
6. How long did he perform regular military duty? from 1862 until 1865
7. When and where was his command surrendered? Appomattox Court house in the State of Virginia.
8. Were you present when it surrendered? Was near there (forgot exact place)
9. Was applicant present? he was I think
10. If he was not present, where was he? but supposed was present
When did he leave his command? at the surrender of Gen Lee 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 Upon the Surrender
11. What property, effects or income has the applicant? (Give your means of knowledge.)
dont know of any, from general appearance only little if 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? Cant say but dont think he had but very little if any
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom?
dont 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 rec'd at Cold harbor 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 wife and two little Daughters at home
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 Shell wound in L. Arm
19. Who composes family? What property have they? Children's age and their earning capacity?
Wife and two Daughters none that was known of, small girls able to earn but very little. Cant say of Estate
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 Aug 1902
W. D. Howell Ordinary.

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

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Clinch COUNTY.

Personally came before me Dr G. 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 precise physical condition is as follows:

He said left forearm has been broken and knocked out of joint at elbow by piece of shell was near at which is Capacitates 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 1902
L. T. Dame Ordinary.

A. H. Culpepper M. D.
G. R. Thigpen M. D

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch COUNTY.

I, L. T. Dame 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 1866 and that the witnesses, viz.: O. P. Register A. B. Swearingen and Dr G. 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 $210.00 Dollars of property, and in 1900 $205.00 Dollars of property; in 1903 $175.00 Dollars of property; in 1903 $150.00 Dollars of property, in 1905

In my opinion the foregoing affidavits were made in good faith.

Witness my hand and seal of office, this 28 day of August 1902
L. T. Dame Ordinary,
of Clinch County.

1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answers make to such questions as shall be 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 necessary to further corroborate.
3. In every case the Ordinary must satisfy himself of 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, W. F. Sedgewick hereby authorize W. A. Wright of Fulton Co Ga to receive and receipt for the pension allowed, and request that he remit same to J. T. Dame Ordinary at Homerville Ga by Mail

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

[L. S.]

Executed in the presence of W. F. Sedgewick

Sedgwick, W. F.
Clinch Co. Ga

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 1836

INDIGENT
SOLDIER'S PENSION
1906.

Name W. F. Sedgewick
County Clinch
Co. D Regiment 2nd Ga

WARRANT ISSUED
JAN 26 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
W. A. W.

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

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, W. F. Sedgewick, 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. Dame Ord. at Homerville Ga by Mail

WITNESS my hand and seal, this 12th day of June 1907.

W. F. Sedgewick [L. S.]

Executed in presence of J. T. Dame

Sedgwick, W. F.
Clinch Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED)

No. 4656

INDIGENT
SOLDIER'S PENSION
1907.

Name W. F. Sedgewick
County Clinch
Co. D Regiment 2nd Ga

WARRANT ISSUED
1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Clinch County,

Personally appears W. F. Sedgewick 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 26 day of Nov 1842; that he is 63 years old and by occupation a Laborer, 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 years in Company D, of 9th Regiment of Fla.; 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. this is a new Pensioner.

Sworn to and subscribed before me, this the 2 day of Jan 1906.

J. T. Dame Ordinary. W. F. Sedgewick

State of Georgia,
Clinch County.

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

J. T. Dame
Ordinary Clinch County.

Affix your seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
Clinch County.

Personally appears W. F. Sedgewick 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 22 day of Nov 1840; 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 4 years in Company D, of 9th Regiment of Florida Vol; that his physical condition is as follows: Age & Poverty

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 12 day of Jan 1907.

W. F. Sedgewick

J. T. Dame Ordinary.

State of Georgia,
Clinch County.

I, J. T. Dame Ordinary of said County, do certify that I am well acquainted with W. F. Sedgewick 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. Dame
Ordinary Clinch County.

Affix your seal here

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

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

Sellers, J. D.
Clinch County
Ctd. Jan 1906

No.

INDIGENT PENSION.

1905 1906

Name J. D. Sellers

County Clinch

Co. F. 3rd N.C. 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. Harrison, State Printer, Atlanta, Ga.

8/24/605

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, J. D. Sellers hereby authorize W. A. Wright of Fulton Co. Ga. to receive and receipt for the pension allowed and request that he remit same to J. D. Donald Ordinary at Homerville Ga. by mail

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

J. D. Sellers [L. S.]

Witness in presence of
J. T. Donald
Ordinary Ga.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, J. D. Sellers hereby authorize W. A. Wright of Fulton 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 Dec 1906

J D Sellars [L. S.]

Executed in presence of

[illegible]

Sellars, J. D.
Clinch County
Ga.
No.

INDIGENT PENSION.
1905 1906

Name J. D. Sellers
County Clinch
Co. H. 3rd N. C. 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. Harrison, Stable Printer, Atlanta, Ga.

8/2/1905

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,
Clinch COUNTY.

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

1. What is your name and where do you reside? (Give State County and post-office). J. D. Sellars, Clinch County Georgia
2. How long and since when have you been a resident of this State? since 1865 about seventeen (17) years, May 8. 1831.
3. When and where were you born? in Brunswick County N. C.
4. When and where and in what company and regiment did you enlist or serve? Co. E 3rd N. C. Regiment Co. 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 Appomatox C. H. 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 Petersburg Va. May 12th '64. by the Yanks.
9. How much can you earn (gross) per annum by your own exertions of labor? not anything
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 2 years owing I suppose to Kidney + Bladder trouble I suppose my failing sight is the effect Old age probably
13. What property, real and personal, or income, 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 little money which belongs to her children. Lives 14 miles from depot
15. In what County did you reside during those years, and what property did you then return for taxation? Clinch County None only ag gds for wife
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 used to Stand jay. I taught some, and did Carpenter work
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 aforementioned with my two little children Jessie aged 12 and Leroy age 8
20. Are you receiving any pension? If so, what amount and for what disability? Not any
21. Have you ever made an application for pension before? No.
22. How many applications have you ever made and under what class? None.

Every Question MUST Be Answered.

Sworn to and subscribed before me this the 15 day of July 1906.
J. T. Dalee Ordinary,
of Clinch County.

J. D. Sellars Applicant.

Also I was with Wilson's raid in Miss. in 1865 was in battle at Selma Ala. and Macon Ga. and Columbus Ga.

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. Sellars 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. Sellars, the applicant; if so, how long have you known him? Every since march 1861
3. Where does he reside, and how long and since when has he been a resident of this State? he resids in Clinch county Georgia 18 years
4. When, where and in what company and regiment did he enlist, and how do you know? I was there he Enlisted in Wilmington north North Carolina Company I
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 C. H in Virginiar
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 th has any I dont no 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 Rhrumatism 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 A teaching Schol in 1898 and 1899
17. What portion of his support for these four years was derived from his own labor or income? and has 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 affliction 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 18. 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. H. his x mark Harden Witness.

J. E. Parrish Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Clinch COUNTY.

Personally came before me A. H. Culpepper and G. R. Thigpen, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully ~~Examined~~ J. D. Sellars, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows: Spot through left thigh leaving high some May 12. 1863 and he now has Rheumatism in same knee and hip of wound. Also kidney and bladder trouble Combined with old age makes him unable to earn and that we have no interest in said pension being allowed. A bi ding by work.

Sworn to and subscribed before me, this, the 15 day of July 1905

A. H. Culpepper M. D.
G. R. Thigpen " "
Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch COUNTY.

I, J. T. Dame 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. Culpeper G. R. Thigpen and J. H. Harden and J. D. Sellers are worthy of belief 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 1899 68 00 Dollars of property, and in 1900 68 00 Dollars of property; in 1901 68 00 Dollars of property; in 1902 68 00 Dollars of property. also some in 1904 & 1905

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. T. Dame Ordinary,
of Clinch 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. Sellars hereby authorize
W. A. Wright of Atlanta Ga
to receive and receipt for the pension allowed, and request that he remit same to
C. T. Dame Ordinary at Homerville Ga
by mail

WITNESS my hand and seal, this ____ day of ____ 1906.

J D Sellars [L. S.]

Executed in the presence of
C. T. Dame

Sellars, J. D.
Clinch County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)
No. 1838

INDIGENT
SOLDIER'S PENSION
1906.

Name J. D. Sellars
County Clinch
Co. H Regiment 32nd Ga

WARRANT ISSUED
JAN 26 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, J. D. Sellars, 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. Dame ordinary at Homerville Ga
by mail

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

J. D. Sellars [L. S.]

Executed in presence of
J. T. Dame

Sellars, J. D.
Clinch Co. Ga

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED)
No. 4657

INDIGENT
SOLDIER'S PENSION
1907.

Name J. D. Sellars
County Clinch
Co. — Regiment 32nd Ga Vol

WARRANT ISSUED
1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

no date

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 4 years in Company F, of 3rd N.C. th Regiment of Val; that his physical condition is as follows: Infirmity Poverty 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 this is a new Pensioner. County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the 2nd day of Jan 1906. J. D. Sellars

J. T. Dame Ordinary.

State of Georgia,
Clinch County.

I, J. T. Dame 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 2nd day of Jan 1906.

J. T. Dame
Ordinary Clinch County.

Affix your seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
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 69 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 F, of 3rd N.C. th Regiment of North Carolina Val; that his physical condition is as follows: Infirmity Poverty 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 Clinch County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 1st day of Jan 1907. J. D. Sellers

J. T. Dame Ordinary.

State of Georgia,
Clinch County.

I, J. T. Dame 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 1st day of Jan 1907.

J. T. Dame
Ordinary Clinch County.

Affix your seal here

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

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

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

Pension office 10-27-13

Applicant must amend and state to whom he dole all his property and then apply for pension. State all the facts and prove them to be true.

J. W. Lindsey Com of Pensions

Pension office
11/13-1914

Applicant [illegible] his property away [illegible] a [illegible]

[illegible]

Simmons Harris
Clinch

[illegible]
11/13-1914

Oct 1914

[illegible]
10-1914

Confederate Soldier's Application.

UNDER ACT 1910.

County Clinch

Name Harris Simmons

Company [illegible]

Regiment

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. F. BYRD, State Printer, Atlanta.

10/7/1913 10/19-1914

Pension office
11/13-1914

Pension office 10-27-13

Applicant must amend and state to whom he sold all his [illegible] the price sold for, then to whom he paid it to [illegible] each, and what he gave away and its cash value. [illegible] property and then apply for pension. State all [illegible] prove them to be true.

J. W. Lindsey Com [illegible]

[illegible]

Oct 1914

[illegible]

10-19-1914

Confederate Soldier's Application.

UNDER ACT 1910.

County Clinch

Name Harris Simmons

Company [illegible]

Regiment

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

11/7/1913 10/19-1914

BAD COPY OR LIGHT PRINT

Pension office 10-27-15

Applicant must swear and state as when he sold [illegible] the price sold for, then to whom he gave it [illegible] each, and what he gave away and its cash value [illegible] property and then apply for pension. State [illegible] prove them to be true.

J.W Lindsey Com [illegible]

Georgia Veteran

Confederate

Soldier's Application

UNDER ACT 1910

Co. [illegible]

Regiment

Command

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

1/7/1916 Refused

APPLICATION FOR CONFEDERATE PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

Chatham County,

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

1. What is your name and where do you reside? (Give County and Post-office) Harris Simmons Chatham County Milltown Ga R 8 Box 8

2. How long and since when have you been a continuous resident citizen of this State? All my Life Born & Raised here

3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? Yes

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) At Savannah 1863 Mc Allister Co Chatham County 4 Ga Battery

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) Until Surrender April 1865

6. When and where was your Company and Regiment surrendered or discharged from the Service? At Savannah Ga April 1865

7. Were you actually present with your Command when it was surrendered or discharged? Yes

8. If you were not actually present, state specifically and clearly where you were and why. Was with Command

a. Where was your Command when you left it? At Savannah Ga

b. When did you leave the Command? At Surrender

c. For what cause did you leave? Discharged

d. By whose authority did you leave? ?

e. For how long was your leave granted? In what way? Was given Verbal

f. Why did you not return to your Command after leave expired?

g. In what way were you prevented?

h. What effort did you make to return?

i. Were you captured during the war?

j. If so, when, and where? In what prison were you held and when were you released?

9. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4 Nov. 1908? (Make list by items and value.) 6 Acres of Land with Dwelling House & Personal Property & the value $625.00 Consisted of Household & Kitchen Furniture

10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov., 1908. To whom and for what price? I have deed it to my Husband Children and Grandchildren I had my wife in 1911 I have deed Property to her Children & Grandchildren

11. What property of any description of any kind and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemized list) Personal Property Household & Kitchen Furniture I own not on Acre Property Dwelling My Children & Grandchildren

12. What annual or monthly income or earnings of yourself and wife and the source derived have you? Nothing

13. Are you drawing a pension of any amount from this State or the United States? No

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? No

Sworn to and subscribed before me, this the 4 day of Feb 1916

Harris Simmons

J. [illegible] Ordinary,

Chatham County.

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 Sirmans 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 Sirmans the applicant? I have known same since the year 1858

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 remember — 1858.

4. When, where and in what Company and Regiment did Harris Sirmans enlist during war from 1861 to 1865? (Give date and place) Joined the Company the 4th day of February 1864 at Folkston Ga.

5. How did you obtain your information of this Service?
By being with him in same Regiment & was 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 Screven 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? Screven Ga for what cause did he leave? Discharged By whose authority did he leave Officers in 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 the 4th day of October 1913
J. I. Dame Ordinary,
of Clinch County.

J R Dickerson

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,
Clinch County.

Personally before me came W. J. Folkston who on oath says that they are freeholders residing in said County and we know Harris Sirmans 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) 1 Lot & House & Lot Real & personal property of all at present & to any way with

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov 1908? (State it fully by items) No record — 1908 Property sold Volume to about 1905 & 1906 all sold to Folkston & Western Railroad Co. Except Deed to Lot from Mrs. Sirmans

2. When and to whom was it sold or given to? Helping the children

3. What was the price paid or stated to be paid? Not Record

4. What relation is the party to applicant? Same

5. What disposition was made of the proceeds of the sale? Buying Bills & Support helping the children

6. Was the disposition of this property made in good faith and full values? Yes or was it made to obtain a pension? Not Record

Sworn to and subscribed before me, this the 4th day of Oct 1913
J. I. Dame Ordinary,
of Clinch County.

J. I. Register
A. M. Tomlinson

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch County.

I, J. I. Dame Ordinary of said County, certify that I know the applicant Harris Sirmans 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 D. T. 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 Clinch County shown that he and wife value for tax in 1908 $ 1,000 for 1909 $ 1,000 for 1910 $ 1,000 for 1911 $ 1,000 for 1912 $ 1,000 for 1913 $ 1,000

Sworn under my hand and official seal of office this 4th day of Oct 1913
J. I. Dame Ordinary,
of Clinch County.

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words: "You do solemnly swear that you will true answers make to such questions touching the pension claim of ... as you and the evidence you shall give shall in the whole case, so help you God."
2. All witnesses must be sworn by Ordinary or Notary Public and not by Clerk.
3. All questions must be answered by witness in writing and not by Clerk.
4. If applicant has no property or all his property is not sufficient to pay for said writ, affidavits of insolvency necessary.

J. T. Dame Ordinary,
of Clinch County.

"You do solemnly swear that you will true answers make to each question asked you and the evidence you shall give shall be the whole truth; so help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary and certified by him.
4. If applicant has no property at all in his possession, use or control of self and wife, affidavits of freeholders unnecessary.

State of Georgia
Clinch County

John W Powell
Deposeth and Saith that to the best of his Knowledge and Belief that Harris Sirmons applicant for Pension that his wife Melvina Sirmons did hearer from her father Eestate 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 Equivlet

Sworn to before me
This Oct 14-1914
Joseph Powell Jr.

John W. Powell

OFFICE OF
J. T. DAME
ORDINARY
CLINCH COUNTY

HOMERVILLE, GA. Oct 16 1914

Hon. J. W. Lindsey
Atlanta Ga

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

Your friend
J. T. Dame

OFFICE OF
J. T. DAME
ORDINARY
CLINCH COUNTY

HOMERVILLE, GA., 190

State of Georgia
Clinch County

Personally appeared Abner Sirmans who on oath says, that he personally knows the applicant Harris Sirmans for pention, and further knows that what property that he passed did come through his wifes estate that she got from her farther at his death. he lost his Wife in 1912. She was sick a long time and had many 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 Pention Harris Sirmans has but very little property if any and is living with his Children and I personally know he is worthy of his Pention as he served in the War to the close in April 1865

his
Abner X Sirmans
mark

Sworn to and subscribed before me this
16th day of October 1914.

J. T. Dame
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 hmxx is forty-five years old; that he was born and reared in the settlement where Harris Sirmans lives in Flinch County; that he knows of his own knowledge 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 Sirmand, ten miles away.

R. G. Dickerson

Sworn to and subscribed before me,
this 9th day of August, 1916.

J. W. Stevens
Clerk Superior Court Ga

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, towit: 350 acres of land; 50 head of cattle; 120 head of sheep, and about $170.00 cash. This property was taken possession of by this deponent and called his property; that this deponent's wife died in the year 1913, 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 $200.00 Dollors for doctor 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 $800.00. The property above described was a part of the property embraced in the original application for a pension of this deponent. This deponent avers t that he only now has property to the value of $800.00 dollars; that he is 71 years old, unable to earn anything by his own workm and that he is realy 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 1913, 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 Powell J.P.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, L. A. Sirmans hereby authorize Wm A. Wright Compton of Atlanta Ga. to receive and receipt for the pension allowed and request that he remit same to George Cornelius Ordy at Homerville by Mail

Witness my hand and seal this 19th day of April 1895.

Executed in presence of
L. W. Pentz M.D.
George Cornelius Ordinary

L. A. Sirmans

Sirmans L. A.
No. 365
Clinch Co.

INDIGENT PENSION

1895. 1896

Name L. A. Sirmans

County Clinch

Ground Poverty & Infirmity

Jny 1 1896

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO

ACT

Geo. W. Harrison, State Printer, Atlanta.

E 1959

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, L. A. Sirmans hereby authorize Wm A. Wright Comptroller of Atlanta Ga to receive and receipt for the pension allowed and request that he remit same to George Cornelius Ordy. at Homerville by Mail

Witness my hand and seal this 19th day of April 1895.

Executed in presence of
L. W. Perry [illegible]
George Cornelius Ordinary

L. A. Sirmans

Sirmans, L. A.
No. 365
Clinch Co.

INDIGENT PENSION

1895. 1896

Name L. A. Sirmans
County Clinch
Ground Poverty & Infirmity
Jny 1 1896

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO
atty

Geo. W. Harrison, State Printer, Atlanta.

E 1959

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,
Clinch County.

I, Lyman A. Sirmans, of said State and County, desiring to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (give State, County and post office) Lyman A. Sirmans Dupont Clinch 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? Clinch Co. Ga.
4. Did you volunteer in the Confederate Army or in the Georgia Militia? Confederate Army.
5. When and where did you enlist? From Thomasville Ga. May 12th 1862.
6. In what company and regiment did you enlist? Co A. 20th Ga Bat of Cavalry
7. How long did you remain in that company and regiment? About 1 year & 10 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 the war costing $3.500
9. For how long a period did you discharge regular military duty? About 12 months when I was [illegible]
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 & 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 affection Neuralgia. Catarrh which was brought on by long & continued sickness. contracted during the war. Since which time I have never seen a well day
16. Upon which of the following grounds do you base your application for pension, viz.: first, "age and poverty," second "infirmity and poverty" or third "blindness and poverty"? Infirmity & 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 intensely. 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? Clinch 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 $200.00. & I contributed about $40 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

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 the 17th day of April 1895. } L. A. Simmons Applicant.
George Conelius Ordinary
of Clinch County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA, Echols County }
Robert Roberts, of said State and County, having been presented as a witness in support of the application of L. A. Simmons 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, Echols County, Georgia.
2. Are you acquainted with L. A. Simmons, the applicant, if so how long have you known him?
Yes, Forty years, 40
3. Where does he reside, and how long has he been a resident of this State?
He has lived in Echols County Georgia all his life.
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 1st 1862 City of Savannah, Company F. 2d Ga Battalion 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. F 2d Ga. Bat. Cavalry Army of Tenn. he was absent Sick Most of the time, when he remained in the Hospital & was discharged by Surgeon in 1863
8. What property, effects or income has the applicant? (Give your means of knowledge.)
None that I know of. I live in County 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 very much broken health
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?
Very little
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 has 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 the 15th day of April 1895. } R. Roberts Applicant.
J. Roberts Ordinary
Echols County

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA, Clinch County }
Personally came before me F. M. Rentz M.D and F. Ellis Allen M.D, both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully Examined L. A. Simmons, 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 sick headache &c 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 the 19th day of April 1895. } F. Ellis Allen M.D
F. M. Rentz M.D
George Conelius Ordinary

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, Clinch County }

I, George Conelius, Ordinary in and for said County, hereby certify that the applicant L. A. Simmons 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: F. Ellis Allen M.D L. W. Rentz 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 Clinch 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 day of April 1895.
George Conelius 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,
Clinch County.

I, L. A. Sirmans 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 Homerville.

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

L. A. Sirmans [L. S.]

Executed in presence of
L. R. E. Cornelius
George Cornelius
Ordinary

Sirmans, L. A.
Clinch Co.
ACT OF 15 DEC., 1894.
(For Those Already Enrolled.)
A. V. Dodge Comp.
No. 222

INDIGENT
Soldier's Pension.
1897.

Name L. A. Sirmans
County Clinch

Jan 1 1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
Atty

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

No data

POWER OF ATTORNEY.

State of Georgia,
Clinch County.

I, L. A. Sirmans 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 Cornelius Ordinary by Mail at Homerville Clinch Co. Ga.

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

L. A. Sirmans [L. S.]

Executed in presence of
J. R. E. Cornelius
George Cornelius
Ordinary

Sirmans, L. A.,
Clinch Co.
ACT OF 15 DEC., 1894.
(For Those Already Enrolled.)
NO. 1019

INDIGENT
SOLDIER'S PENSION,
1898.

Name L. A. Sirmans
County Clinch

WARRANT ISSUED
1/14 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
W. A. W.

GEO. W. HARRISON, 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 continously ever since the 1st day of July 1839; that he is 57 years old and by occupation a Lawyer not in practice; 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 2 years in Company A, of 20 th Regiment of Ga. Battalion Cavalry; that his physical condition is as follows: Poor Complaint, Catarrh, Neuralgia, Chronic Sciatica, & 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 day of December 1897. } L A Sirmans

George Comelius Ordinary.

STATE OF GEORGIA,
County.

I, George Comelius 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 28th day of December 1897.

Affix your seal here.

George Comelius
Ordinary Clinch County.

NOTE—The blanks 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 1st day of July 1839; that he is 58½ years old and by occupation a Lawyer not in practice; 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 20th Regiment of Georgia Battalion of Cavalry; that his physical condition is as follows: Poor Complaint Chytarrh Neuralgia Kidney Disease Crabby frequent Cholera & Coughs

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 28th day of December 1898 } L A Sirmans

George Comelius Ordinary.

State of Georgia,
Clinch County.

I, George Comelius 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 28th day of December 1898.

Affix your seal here.

George Comelius
Ordinary Clinch County.

NOTE.—The blank spaces must be filled.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, L. A. Sirmans, hereby authorize William A. Wright Capt Gen 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 2nd day of January 1899.

Executed in presence of
J. P. Arnell
L. A. Sirmans (L. S.)

Sirmans, L. A.
Clinch County

CODE SEC. 1254.
(For These Already Enrolled.)

No. 1967

INDIGENT
SOLDIER'S PENSION,
1899.

Name L. A. Sirmans
County Clinch

WARRANT ISSUED
1/17 1899

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
Wm W

Geo. W. Harrison, State Printer, Atlanta.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, L. A. Sirmans hereby authorize Hon. Wm A. Wright of Compt 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 3rd day of January 1900.

L. A. Sirmans [L. S.]

Executed in presence of
George Cornelius
Ordinary

Sirmans, L. A.
Clinch G.

CODE SEC. 1254.
(For These Already Enrolled.)

NO. 2022

INDIGENT
SOLDIER'S PENSION,
1900.

Name L. A. Sirmans
County Clinch

WARRANT ISSUED
January 25 1900.

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 L A Simmons 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 July 1839; that he is 59 years old and by occupation a Lawyer but not in practice; 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 th ~~Regiment of~~ Georgia Battalion Cavalry; that his physical condition is as follows: Liver Complaint - Neuralgia Catarrh Kidney & urinary derangement this year I had Carbuncles & suffered greatly - 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 1899. I have heretofore as a resident of Clinch county been allowed a pension for the year 1896 7 8

Sworn to and subscribed before me, this the 2nd day of January 1899. L A Simmons

George Connelly Ordinary.

State of Georgia,
Clinch County.

I, George Connelly Ordinary of said County, do certify that I am well acquainted with L A Simmons 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 January 1899.

Affix your seal here.

George Connelly
Ordinary Clinch County.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears L A Simmons 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 First day of July 1839; that he is 60 years old and by occupation a Lawyer not in practice; 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 2 years in Company A, of 20 th Georgia Battalion Cavalry; that his physical condition is as follows: Liver Complaint Catarrh, Neuralgia Kidney troubles

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 1900. I have heretofore as a resident of Clinch county been allowed a pension for the year 1899

Sworn to and subscribed before me, this the 3rd day of January 1900. L A Simmons

____ Ordinary.

State of Georgia,
Clinch County.

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

Given under my official signature and seal, this 3rd day of January 1900.

Affix your seal here.

George Connelly
Ordinary Clinch County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, L. A. Sirmans hereby authorize William A. Wright Compt. General of Atlanta to receive and receipt for the pension allowed and request that he remit same to Ordinary at Homerville Clinch Co. Ga. by mail

Witness my hand and seal, this 1st day of January 1901.

L. A. Sirmans [L. S.]

Executed in presence of
George Cornelius
Ordinary

Sirmans, L. A.
Clinch Co.

CODE SECTION 1254.
(For Those Already Enrolled.)

No. 113

INDIGENT
SOLDIER'S PENSION.
1901.

Name L. A. Sirmans
County Clinch
Georgia

WARRANT ISSUED
Jan 14 1901.

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT HANDED TO
Wright

Geo. W. Harrison, State Printer, Atlanta
1/2/1901

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, L. A. Sirmans do hereby authorize Wm. A. Wright Capt. General of Atlanta Ga. to receive and receipt for the pension allowed and request that he remit same to the Ordinary at Homerville Clinch Co. Ga. by mail

Witness my hand and seal, this 1st day of January 1902.

L. A. Sirmans [L. S.]

Executed in presence of
W. F. Howell
Ordinary

Sirmans, L. A.
Clinch County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 5133

INDIGENT
SOLDIER'S PENSION
1902.

Name L. A. Sirmans
County Clinch
Co. A Regiment 80 Battn.

WARRANT ISSUED
1/4 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Do

Geo. W. Harrison, 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 1st day of July 1839; that he is 62 years old and by occupation a Lawyer but am practicing 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 2 years in Company A, of 20 th ~~Regiment~~ Battalion of Cavalry; that his physical condition is as follows: Liver Complaint Catarrh and neuralgia. other complications -

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 1902 - Ploger

Sworn to and subscribed before me, this the 1st day of January 1901. L.A. Sirmans

George Bowles Ordinary.

STATE OF GEORGIA,
County. }

I, George Bowles 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 1st day of January 1901.

Affix your seal here

Ordinary George Bowles County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County. }

Personally appears L.A. Sirmans of Clinch County, State of Geoogia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 1st day of July 1839; that he is 62 years old and by occupation a Lawyer but am practicing 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 2 years in Company A, of th Regiment of 20th Georgia Battalion Cavalry that his physical condition is as follows: Liver Kidney Complaint Catarrh neuralgia + from a fall my right arm + shoulder is injured -

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 1902. I have heretofore as a resident of Clinch county been allowed a pension for the year 1901 Ploger -

Sworn to and subscribed before me, this the 1st day of January 1902. L.A. Sirmans

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 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 1 day of June 1902.

Affix your seal here

W.Z. Howell
Ordinary Clinch County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, L. A. Simmons hereby authorize Wm A Wright Capt of Fulton, Co, Ga to receive and receipt for the pension allowed and request that he remit same to W. T. Howell Ordinary at Homerville Ga by mail

Witness my hand and seal, this 1 day of January 1903.

L. A. Simmons [L. S.]

Executed in presence of
W. T. Howell

Please fill all Blanks and outside Simmons, L. A. Clinch County
CODE SECTION 1904.
(FOR THOSE ALREADY ENROLLED.)
No. 5657

INDIGENT
SOLDIER'S PENSION
1903.

Name L. A. Simmons
County Clinch
Co. 20th Pvt Regiment Ga County

WARRANT ISSUED
3/24 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
W

Geo. Harrison, State Printer, Atlanta.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, L. A. Simmons hereby authorize Wm A Wright Capt General 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 4th day of January 1904.

L. A. Simmons [L. S.]

Executed in the presence of
W. T. Howell Ord

Simmons, L. A.
Clinch County
CODE SECTION 1904.
(FOR THOSE ALREADY ENROLLED.)
No. 5761

INDIGENT
SOLDIER'S PENSION
1904.

Name L. A. Simmons
County Clinch
Co. Regiment

WARRANT ISSUED
FEB 24 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Lindy

Geo. W. Harrison, 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 1st day of July 1834; that he is 63 years old and by occupation a lawyer, not in practice, 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 2 years in Company A, of 20th Regiment of Battalion of Georgia Cavalry; that his physical condition is as follows: Liver and Kidney Complaint, Catarrh & neuralgia

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 1903. I have heretofore as a resident of Clinch county been allowed a pension for the year 1902 & before

Sworn to and subscribed before me, this the 1st day of January 1903.
L. A. Sirmans
W. T. Howell Ordinary.

STATE OF GEORGIA,
Clinch County.

I, W. T. Howell 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 1 day of January 1903.
W. T. Howell
Ordinary Clinch County.

Affix your Seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County.

Personally appears L. A. Sirmans of _____ 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 July 1839; that he is 64 years old and by occupation a lawyer not in practice, 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 2 years in Company A, of 20th Regiment of Georgia Batalion Cavalry; that his physical condition is as follows: Liver Complaint, Kidney disease, Catarrh neuralgia & diabetes

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 1904. I have heretofore as a resident of Clinch County been allowed a pension for the year 1903 & before

Sworn to and subscribed before me, this the 4th day of January 1904.
L. A. Sirmans
W. T. Howell Ordinary.

STATE OF GEORGIA,
Clinch County.

I, W. T. Howell 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 4 day of Jan 1904.
W. T. Howell
Ordinary Clinch County.

Affix your Seal here

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Irwin COUNTY.

I, L. A. Simmons hereby authorize
W. A. Wright of Fulton Co Ga
to receive and receipt for the pension allowed, and request that he remit same to
J. T. Dame Ordinary at Hamiltonville Ga
by mail

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

L. A. Simmons [L. S.]

Executed in the presence of
J. T. Dame

Simmons L. A.
Irwin County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 4254

INDIGENT
SOLDIER'S PENSION
1905.

Name W. A. Simmons
County Irwin
Co. Regiment

WARRANT ISSUED
MAR 1 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
[illegible]

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

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Irwin COUNTY.

I, L. A. Simmons hereby authorize
W. A. Wright of Fulton Co Ga
to receive and receipt for the pension allowed, and request that he remit same to
J. T. Dame Ordinary at Hamiltonville Ga
by mail

WITNESS my hand and seal, this [illegible] day of [illegible] 1906.

L. A. Simmons [L. S.]

Executed in the presence of
J. T. Dame

Simmons L. A.
Irwin County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 4832

INDIGENT
SOLDIER'S PENSION
1906.

Name L. A. Simmons
County Irwin
Co. A Regiment 2nd Ga

WARRANT ISSUED
JAN 26 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
W. A. W.

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

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County.

Personally appears L. A. Simmons 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 1899; that he is 60 years old and by occupation a none, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 2 years in Company A, of 20 th Regiment of Georgia Battalion 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 none 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 _____ County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the 1 day of Jan 1905. L. A. Simmons

W. Z. Howell Ordinary.

STATE OF GEORGIA,
Clinch County.

I, W. J. Howell Ordinary of said County, do certify that I am well acquainted with L. A. Simmons 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 January 1905.

W. J. Howell

Ordinary, Clinch County.

Affix your seal here

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 L. A. Simmons 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 1832; that he is 66 years old and by occupation a farmer now a Postmaster, 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 2 years in Company A, of 20th Regiment of Ga Cavalry Battalion; 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 2nd day of Jan 1906. L. A. Simmons

L. T. Dame Ordinary.

State of Georgia,
Clinch County.

I, L. T. Dame Ordinary of said County, do certify that I am well acquainted with L. A. Simmons 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.

L. T. Dame

Ordinary Clinch County.

Affix your seal here

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, L. A. Simmons, 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. Dame ordinary at Homerville Ga by Mail

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

L. A. Simmons [L. S.]

Executed in presence of
J. T. Dame

Simmons, L. A.,
Clinch Co.,

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED)

No. 1658

INDIGENT
SOLDIER'S PENSION
1907.

Name L. A. Simmons
County Clinch
Co. A Regiment 20th Ga.

WARRANT ISSUED
1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, 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 1st day of July 1839; 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 2 years in Company A, of 20th Regiment of Georgia Vol Cav Battn; 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, 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 1 day of Jan 1907. L. A. Sirmans

J. T. Dame Ordinary.

State of Georgia,
Clinch County.

I, J. T. Dame 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 1st day of Jan 1907.

J. T. Dame
Ordinary Clinch County.

Affix your seal here

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

NOTE.—Affidavits should not be attested before January 1st, 1907.

Sirmans, Mary J.
Clinch, County

ACT DEC. 16, 1901.

a no Batter Forally

No. 1911

WIDOW'S PENSION,

1900

Mrs. Mary J. Sirmans

County of Clinch

Widow of L. A. Sirmans

Warrant issued _____ 190__

and handed to

E 1959

J. W. LINDSEY,
Commissioner of Pensions.

CHAS. P. BYRD, STATE PRINTER, ATLANTA.

11/30/10

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, Mary J. Sirmans hereby authorize W. G. Wright of Atlanta Ga 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 30 day of September 1900

Mary J. Sirmans [SEAL.]

Executed in presence of
J. T. Dawe

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, Mary J. Sirmans hereby authorize W. G. Wright of Atlanta 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 30 day of Sept 1910

Mary J. Sirmans [SEAL.]

Executed in presence of
J. T. Dame

Sirmans, Mary J.
Clinch County

ACT DEC. 16, 1901.
A. R. Bolton Jordan
No. 1911

WIDOW'S PENSION,

1910

Mrs. Mary J. Sirmans
County of Clinch
Widow of L. A. Sirmans
Warrant issued 190
and handed to

J. W. LINDSEY,
Commissioner of Pensions.

CHAS. P. OTTO, STATE PRINTER, ATLANTA.

11/30/10

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,
COUNTY OF Clinch

Personally came Mrs. M. J. Sirmans who says on oath she is the widow of L. A. Sirmans to whom, in the County of Thomas State of Georgia, she was married on the 7th day of March 1861, that she remained his wife up to the 22nd day of April 1910, at which time he died, and that she has not since married.

At the time of his death he was a resident of Clinch County, in said State of Georgia, and was on the indigent pension roll of the State of Georgia, having been allowed a pension of $60.00 per annum on account of being a soldier in Company A ~~Regiment, ...~~ ~~Volunteers or State~~ 20 Ga. Battalion

What affliction have you and how does it affect you? Nervous trouble — kidney trouble and female trouble

What have you been doing to earn a support since 1st of January, 1900? I have tried to sew a little but could not sew enough to earn a support —

What property or effects had you on 1st January, 1900? I had no property on the first of Jan 1900 —

What have you acquired since, and what income have you now?

None

What disposition have you made of any property since 1st January, 1900, and at what price and for what purpose? I sold a small town lot for the support of my sick family and have used all the money — The land was in my name but really belonged to my invalid son —

Deponent further says that she is now a resident of Clinch County, and has continuously resided in the State of Georgia since the 7th day of March 1861 —

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

Sworn to and subscribed before me, this 18th day of June 1910 —

Mary J. Sirmans

J. T. Dame Ordinary of Clinch County.

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

Mary J. Sirmans [SEAL.]

Executed in presence of

J. T. Dame

Sirmans, Mary J.
Clinch County

ACT DEC. 16, 1901.

A. N. Smith Jordan

No. 1911

WIDOW'S PENSION,

1910

Mrs. Mary J. Sirmans

County of Clinch

Widow of L. A. Sirmans

Warrant issued 190

and handed to

J. W. LINDSEY,
Commissioner of Pensions.

CHAS. P. OTIS, STATE PRINTER, ATLANTA.

11/Sep/10

day of April 1910, at which time he died, and that she has not since married.

At the time of his death he was a resident of Clinch County, in said State of Georgia, and was on the indigent pension roll of the State of Georgia, having been allowed a pension of $60.00 per annum on account of being a soldier in Company A ~~Regiment, ...~~ ~~Volunteers or State~~ 20 Ga. Battalion

What affliction have you and how does it affect you? Nervous trouble — kidney trouble and female trouble

What have you been doing to earn a support since 1st of January, 1900? I have tried to sew a little but could not sew enough to earn a support —

What property or effects had you on 1st January, 1900? I had no property on the first of Jan. 1900 —

What have you acquired since, and what income have you now?

none

What disposition have you made of any property since 1st January, 1900, and at what price and for what purpose? I sold a small town lot for the support of my sick family and have used all the money — The land was in my name but really belonged to my invalid son —

Deponent further says that she is now a resident of Clinch County, and has continuously resided in the State of Georgia since the 7th day of March 1861 —

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

Sworn to and subscribed before me, this 18th day of June 1910 —

Mary J. Sirmans

J. T. Dame Ordinary of Clinch County.

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

AFFIDAVIT FOR THREE WITNESSES.

STATE OF GEORGIA,
COUNTY OF Clinch

Personally came A. N. Smith J. R. Dickerson and

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

STATE OF GEORGIA,
COUNTY OF Clinch

I, J. T. Dame Ordinary, in and for said County of Clinch

AFFIDAVIT FOR THREE WITNESSES.

STATE OF GEORGIA, County of Clinch } Personally came A. N. Smith J. R. Dickerson and G. H. Smith, known to me to be reputable and truthful person, who says on oath that from his own personal knowledge Mrs. Mary J. Simmons who made the foregoing affidavit, is the widow of L. B. Simmons who died in Clinch County and State of Georgia on the 22nd day of April 1910, and that she has not since married; that she became his wife on the 7th day of March 1861, and so remained up to the time of his death, and that she has resided in this State continuously since the 7 day of Mch 1861

With what affliction does she suffer? Nervous trouble — female trouble and kidney also flabby muscles

What property or income had she on 1st January, 1900? None

What has she in her possession and control now? nothing that does not belong to

How was she supported in 1900 and 1901? By her husband's pension and doing a little sewing —

I have no personal interest in the pension asked for { A. N. Smith / J. R. Dickerson / G. H. Smith J. P.

Sworn to and subscribed before me, this 29 day of September 1902

J. T. Dame

Ordinary Clinch County, Georgia

PHYSICIAN'S AFFIDAVIT.

STATE OF GEORGIA, County of Clinch } Personally came before me G. R. Deighan and A. H. Culpepper, both of whom are known to me to be reputable physicians, who say on oath that they personally know Mary J. Simmons mentioned in the foregoing affidavit, that she is permanently afflicted with (state disease and how it prevents her earning a support) Nervous indigestion and a soften and flabby muscles she has not the physical strength to work for a living

G. R. Deighan M.D.

A. H. Culpepper M.D.

Sworn to and subscribed before me, this 29 day of September 1902

J. T. Dame

Ordinary of Clinch County.

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

STATE OF GEORGIA, County of Clinch } I, J. T. Dame Ordinary, in and for said County of Clinch State of Georgia, hereby certify that I am acquainted with Mrs. Mary J. Simmons the applicant for a pension in the case, and know from my own knowledge (or from positive proof presented to me by reputable witnesses) that she resides in this County, and that she has resided in the State of Georgia continuously since the 7th day of March 1861, and has not lived out of the State since that date. I also certify that the witnesses, to-wit: A. N. Smith, J. R. Dickerson and G. R. Deighan whose testimony she presents to sustain her claims, are *known to me to be truthful witnesses*, entitled to full faith and credit as such, and that the full text of the affidavit was read to and understood by them before same was signed. I am fully satisfied that this claim is made in good faith, and I have caused the applicant and the witnesses to read or hear read the proofs they sign.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the 29 day of September 1902.

J. T. Dame

Ordinary.

(SEAL)

NOTES.

The Pension is only payable to those widows whose husbands were on Pension Roll at the time of death. The marriage must have existed at the time husband was a soldier, and the widow must have remained unmarried since the death of such husband. Date of marriage is essential and must be submitted.

Proofs by one witness and two physicians will be accepted when it is shown that the same can not be furnished, but in all cases the best proof accessible will be required, and it is incumbent on the applicant to make out a clear case covering the above points.

Affidavits must be made in presence of the Ordinary.

Ordinary of ____Thomas____County.

but in all cases the best proof accessible will be required, and it is incumbent on the applicant to make out a clear case covering the above points.
Affidavits must be made in presence of the Ordinary.

State of Georgia Thomas County.

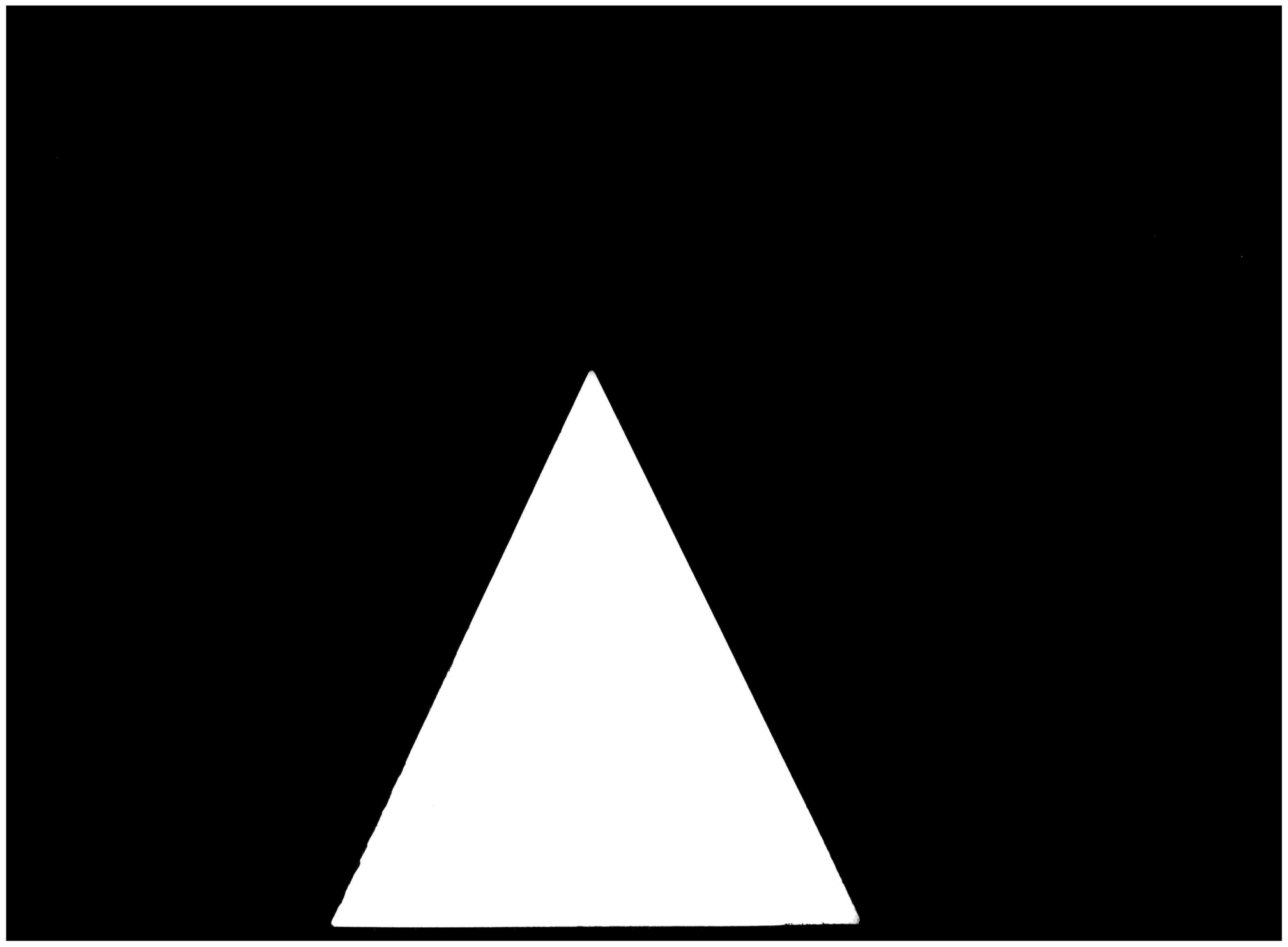
Thomasville June 14th 1910

This is Certify that I was present as bridesmaid and as a legal witness to the marriage of L. A. Simmons and Mary J. Griffin at her farther residence, on March. 7th 1861 both contracting partys have been residents of the State of Georgia until his decease Apr 22/1910 of which she is still a resident and a widow. Rev Luckey officiated at said marriage

Mrs B J Alexander L.S.

Personally appeard before the above named witnesses which are known ful and responsible of which I am personally acquainted and attest to. this 14th June 1910

Wm M. Jones
Ordinary.



Ordinary's Certificate

STATE OF GEORGIA,
Clinch COUNTY.

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

Sworn under my hand and official seal of office this 11th day of Sept 1919

W. V. Musgrove Ordinary
of Clinch County.
(SEAL)

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

No Record on Co Roll

Smith Benjamin
Clinch Co

No. Co Roll
Ch. Jan 1920

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County Clinch
Name Benjamin Smith
Company K (C.H.)
Regiment 26th Ga Supt
Approved

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

9/12 - 1919

Ordinary's Certificate

STATE OF GEORGIA,
Clinch COUNTY.

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

Sworn under my hand and official seal of office this 11th day of Sept 1919.

W. V. Musgrove Ordinary
of Clinch County.
(SEAL)

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

No Record on Co Roll

Smith, Benjamin
Clinch Co

No. Co Roll
O.K. Jan 1920

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County Clinch
Name Benjamin Smith
Company K (Co H.)
Regiment 26th Ga Infty
Approved

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

9/12 – 1919

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

Questions For Applicants to Answer

STATE OF GEORGIA,
Clinch COUNTY.

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

1. What is your name and where do you reside? (Give County and Post-office) Benjamin Smith, Stockton Ga Route "A"
2. How long and since when have you been a continuous resident citizen of this State? All my life
3. Did you enlist in the Army of the Confederate States or in the organized militia of this State from 1861 to 1865? in the Army of Confederate States
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) in the Fall of 1861 St Simons Island Ga Co "K" 26th Georgia Infantry
5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge) Near 3 Years from fall of 1861 to May 12th 1864 and Was wounded
6. When and where was your Company and Regiment surrendered or discharged from the Service? Surrendered at Appomattox Ct Apr 9th 1865
7. Were you actually present with your command when it was surrendered or discharged? No
8. If you were not actually present, state specifically and clearly where you were. Was at Home, was wounded at Spattsylvania Va May 12-1864 and never recovered sufficient to return
a. Where was your command when you left it? at Spattsylvania Va
b. When did you leave the command? May 12th 1864, & Sent to Hospital
c. For what cause did you leave? Wounded
d. By whose authority did you leave? Comanders
e. For how long was your leave granted? In what way? Was placed on retired list orders to report to Dr to be examined. Reported Several Times at Savannah Ga
f. Why did you not return to your command after leave expired? Physical Deficiency act Wounds
g. In what way were you prevented? Wounded
h. What effort did you make to return? Reported to Physician at Savah Ga & Sent back Home
i Were you captured during the war? Yes after Being wounded at Middleburg Va
j If so, when, and where? In what prison were you held and when were you released? Aug 28-1862 at Middleburg Va, Got away before being placed in Prison
9. Are you drawing a pension of any amount from this State or the United States? No
10. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? No

Sworn to and subscribed before me, this the 11th day of Sept 1919 } Benjamin Smith

W. V. Musgrove Ordinary
of Clinch County.
(SEAL)

Questions for Witness as to Service

STATE OF GEORGIA,
Clinch COUNTY.

I D C Carmichael of said State and County of Ware is hereby presented as a witness in support of the application of Benjamin Smith for the pension provided by the Act of 1910, as amended by the Act of 1919 in said State, and, after being sworn true answers to make to the questions propounded, answers as follows:

1. What is your name and where do you reside? D C Carmichael
Manor Ware County Georgia

2. How long and since when have you known Benjamin Smith the applicant?
Before and ever since the Civil War between States

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? Stockton Ga Route "A" where he has resided practically all his life

4. When, where and in what Company and Regiment did Benjamin Smith enlist during war from 1861 to 1865? (Give date and place.) Fall of 1861 at St Simons Island Ga Co A 26 Ga Reg

5. How did you obtain your information of this Service? Serving in Same Co with him

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date) from Enlistment in Fall 1861 until he was wounded on May 12-1864 at Spotsylvania Ct Va

7. When and where was his command surrendered or discharged (give date and place)
Apr 9 1865 at Appromatox Ct Va

8. Were you personally present at the surrender? Yes

9. If not, where were you and how came you there?

10. Was the applicant personally present with his command at surrender? No - Home Wounded

11. If not where was he and how came him there? Home - on account Wounded

12. When did he leave his command? May 12 - 1864 Where was his command when he left it? Spotsylvania Ct Va For what cause did he leave? Wounded
By whose authority did he leave Commander and how long was he granted leave? Dont Know How do you know all that you have stated to be true? If of your own knowledge, tell clearly and specifically Was Serving in Same Company with him

13. In what way was he prevented from returning to his command? Supposed = on acct Wound
How do you know? from Supposition

14. What effort did he make to return to his command and how do you know? Do Know

15. Was applicant captured as a prisoner Yes If so, when and where? Aug 28 1862 at Middlebury Va In what prison was he held? Escaped before put in Prison and when released

Sworn to and subscribed before me, this the 11th day of Sept 1919. D. C. Carmichael

W. V. Mungrove Ordinary of Clinch County.

(SEAL)

NAME Smith, Benjamin YEAR 1920 COUNTY Clinch.

WHEN AND WHERE BORN? A resident of Georgia all my life.

ENLISTED WHEN AND WHERE? in the Fall of 1861, St. Simons Island, Georgia.

RANK:

COMPANY AND REGIMENT? Company K, 26th Georgia Infantry.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? At Spotsylvania, Virginia, May 12,1864, wounded and sent to hospital. Placed on retired list later when I was found to be physically unfit for service. Reported to doctors

CAPTURED, WHEN AND WHERE? (At Savannah, Ga., and was sent (back home.
Captured Aug.28,1862 at Middleburg, Virginia but escaped before being imprisoned.

RELEASED: Escaped before being imprisoned.

WHEN AND WHERE SURRENDERED? Command surrendered at Appomattox, Virginia, April 9th, 1865.

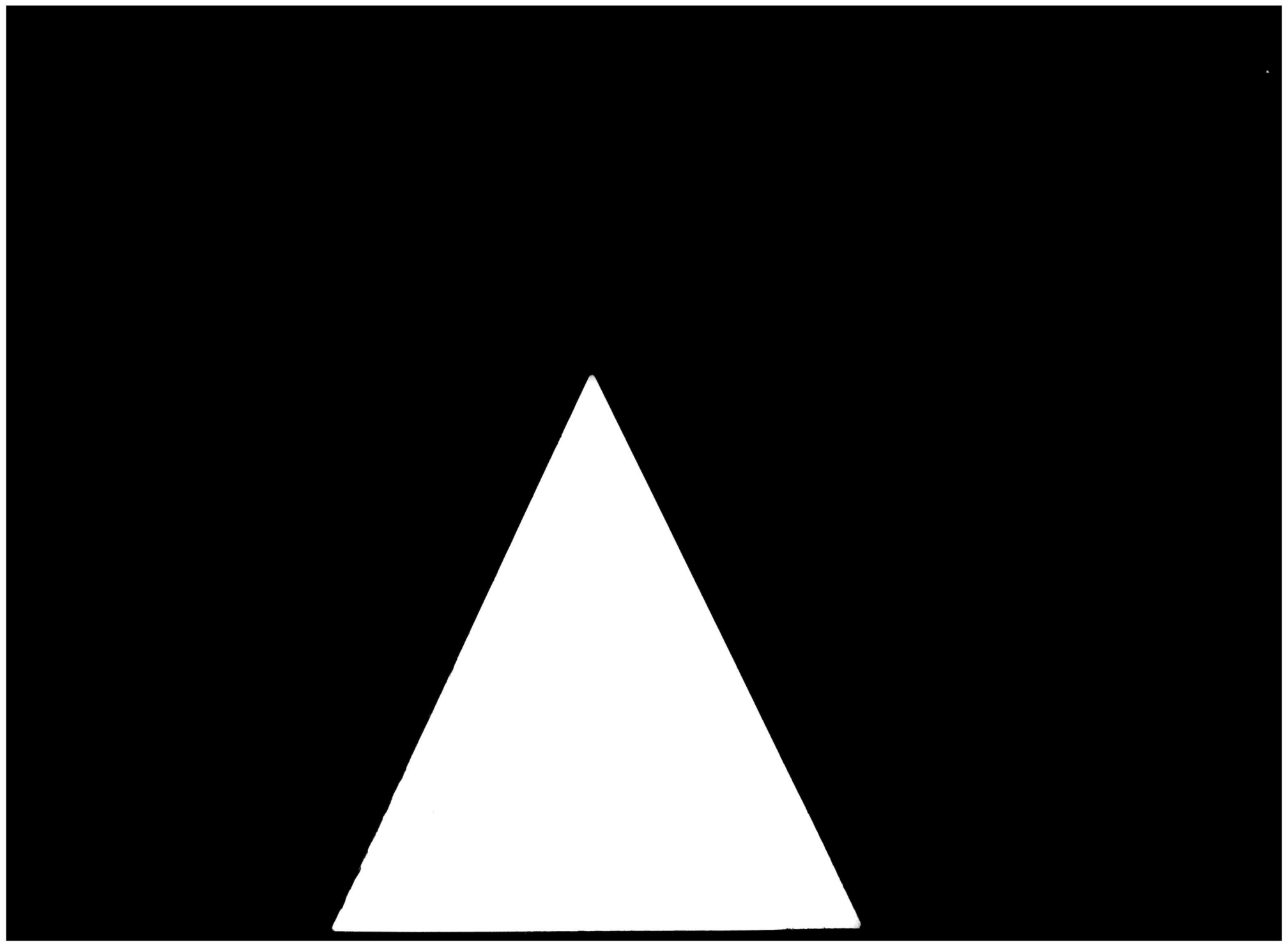
IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? At home. After being wounded was sent home and was never able to return to service again.

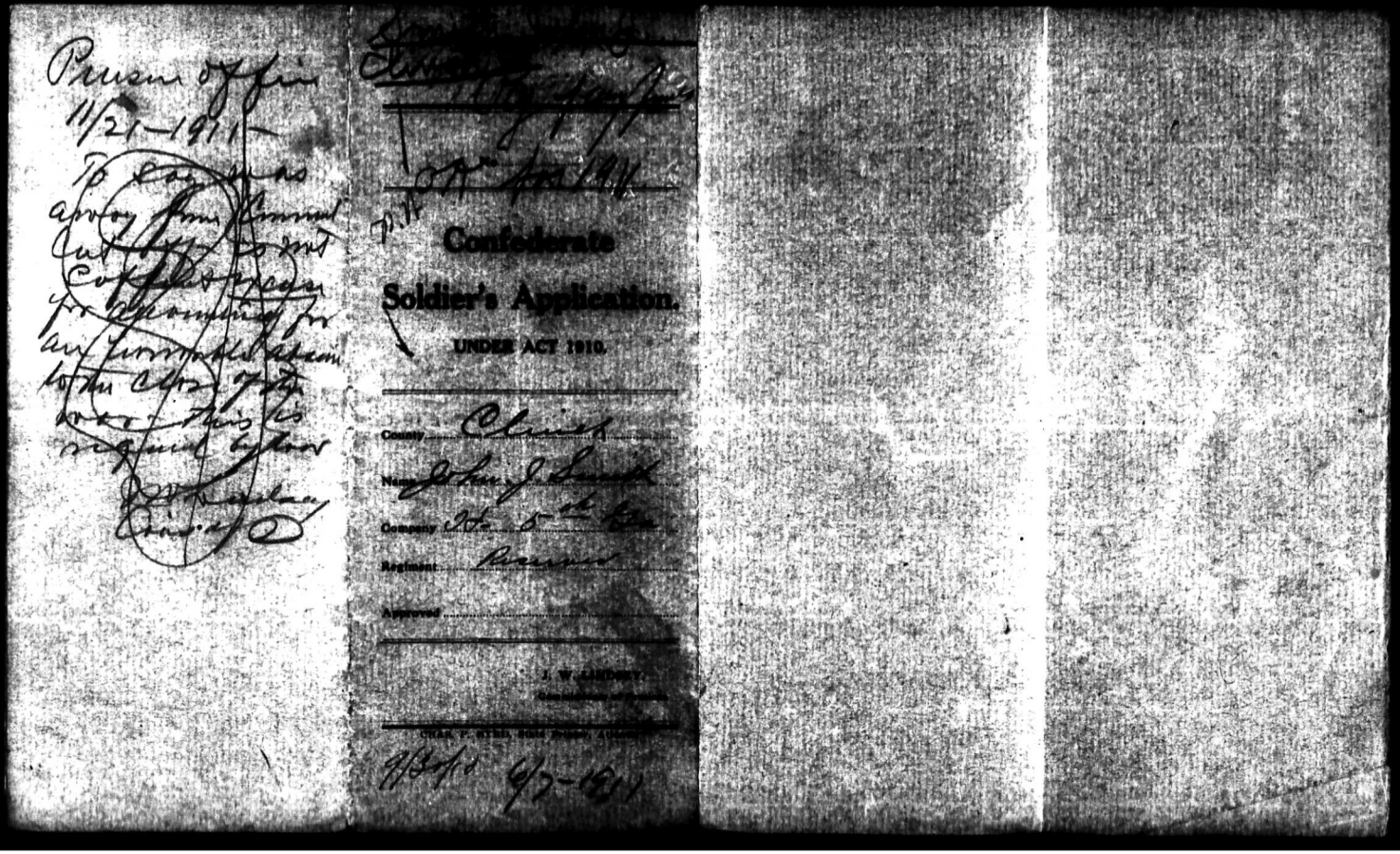
DIED, WHEN AND WHERE?

BURIED:

WITNESSES: D. C. Carmichael - same company - - -No data.

SB.





Pension office
11/21-1911
To say was
away from Annual
Cut off to not
Coffee & excuse
for accounting for
an unreasonable absence
to the close of the
war. This is
required by law
J. W. Lindsey
Comm'r

[illegible]
[illegible]
[illegible]
[illegible] Apr 1911

Confederate Soldier's Application.

UNDER ACT 1910.

County Clinch

Name John J. Smith

Company H. 5th Ga

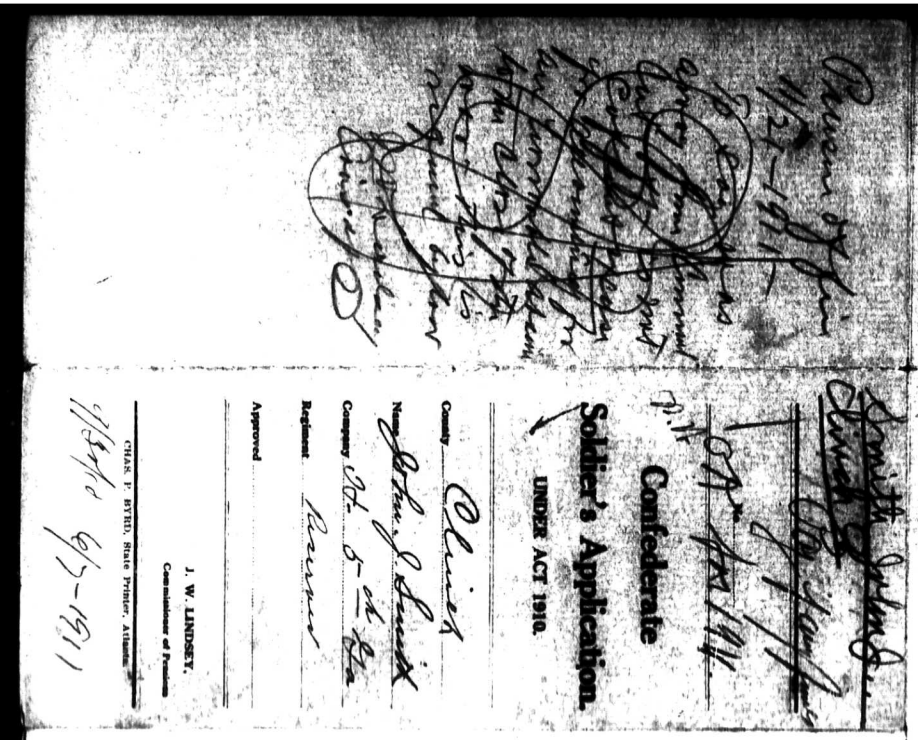
Regiment Reserves

Approved

J. W. LINDSEY,
Commissioner of Pensions.

CHAS. P. BYRD, [illegible] Printer, Augusta.

9/30/10 6/7-1911



Confederate
Soldier's Application.
UNDER ACT 1910.

County Clinch
Name John J Smith
Company Co. F 5th Ga
Regiment Ranger
Approved

J. W. LINDSEY,
Commissioner of Pensions.

CHAS. P. BYRD, State Printer, Atlanta.

1911

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,
Clinch County.

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

1. What is your name and where do you reside? (Give County and Post-office) John J. Smith Homerville Clinch Co Ga R F D 1
2. How long and since when have you been a continuous resident citizen of this State? all my life.
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? In Co. F. 5th Ga Rangers
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) At Savannah Ga in F 5th Ga Rangers July 1863
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) Until near the close of the war
6. When and where was your Company and Regiment surrendered or discharged from the Service? At Danville North Carolina
7. Were you actually present with your Command when it was surrendered or discharged? No
8. If you were not actually present, state specifically and clearly where you were at home on Sick furlough
   a. Where was your Command when you left it? At Thunderbolt Ga
   b. When did you leave the Command? In latter part of Dec 1864
   c. For what cause did you leave? Sick
   d. By whose authority did you leave? By furlough granted by my Captain
   e. For how long was your leave granted? In what way? Thirty Days
   f. Why did you not return to your Command after leave expired? Did not by the Yankees being
   g. In what way were you prevented? Put off by Yankees raiding
   h. What effort did you make to return? No effort to make
   i. Were you captured during the war? No
   j. If so, when, and where? In what prison were you held and when were you released?
9. What property of every discription was owned, in the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by Items and value.) One mule $50.00 Household & Kitchen furniture $25.00 Wearing apparel $40.00 Two cows & calves $45.00 Farming implements $20.00 Hogs $25.00 Corn 120 bu $120.00 Fodder 600 lbs $6.00 All other Farming implements $50.00 Total $360.00
10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov., 1908. To whom and for what price? None
11. What property of any discription of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemized list). The same that I owned Nov 4th 1908 and that is all.
12. What annual or monthly income or earnings of yourself and wife and the source derived have you? Nothing except a little from my Garden
13. Are you drawing a pension of any amount from this State or the United States? No
14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? No

Sworn to and subscribed before me, this the 25 day of September 1911

J. T. Sauls Ordinary,
of Clinch County.

John J. Smith

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,
Quitman County.

John D Dawson of said State and County is hereby presented as a witness in support of the application of John F Smith for the pension granted 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? John D Dawson
Quitman Ga R F D No 2

2. How long and since when have you known John F Smith the applicant?
about Fifty Years

3. Where does he now reside, and since when has he been a bona fide continuing resident in this State and how do you know? Quitman Ga
all his life

4. When, where and in what Company and Regiment did John F Smith enlist during war from 1861 to 1865? (Give date and place) at Savannah Ga Co A 5th Ga Regt

5. How did you obtain your information of this Service? By personal knowledge

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) Until Wars Close 4 Yrs Time

7. When and where was his Command surrendered or discharged (give date and place)
at Danville Va. in 1865

8. Were you personally present at the Surrender? No

9. If not, where were you and how came you there? At Columbia S.C.
In Hospital

10. Was the applicant personally present with his Command at surrender? No

11. If not where was he and how came him there? At Home on Sick
Furlough

12. When did he leave his Command? about 23rd of Dec 1864 Where was his Command when he left it? Thunderbolt Ga for what cause did he leave? Sick

By whose authority did he leave? By Commanding Officer and how long was he granted leave? Sixty Days How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically)
I was Present When Granted

13. In what way was he prevented from returning to his Command? By being Sick off his Command How do you know? By my own personal knowledge

14. What effort did he make to return to his Command and how do you know?
Was Sick no way to return

15. Was applicant captured as a prisoner? Yes If so, when and where?

In what prison was he held? and when released?

Sworn to and subscribed before me, this the 21st day of Oct 1912 John D Dawson

J D Evans Ordinary
of Lowndes County

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,
Clinch County.

Personally before me comes C Howell and C W Dasinger who on oath says that they are free holders residing in said County and we know John F Smith 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.) 160 Acres Land $400.00 Money 200. 1 Horse 1 Mule 1 Cow 1 Hog 1 Buggy 1 Set Harness 1 Stove & Household & Kitchen Furniture

Sworn to and subscribed before me, this the 3rd day of Oct 1912 C Howell C W Dasinger

J D Evans Ordinary
of Clinch County

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch County.

I J T Edwards Ordinary of said County, certify that I know the applicant John F Smith for pension in this person he represents himself to be and resides in said County. That I also know John D Dawson the witness swearing to the service, and C Howell & C W Dasinger who are free holders. That they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Receipts of Clinch County shows that John F Smith and wife value for tax is in 1908 $1242.00 for 1909 $1242.00 for 1910 $1242.00

Sworn under my hand and official seal of office this 3rd day of October 1912

J T Edwards Ordinary
of Clinch County

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words, "You do solemnly swear that you will true answers make to each question asked you and the evidence you shall give shall be the whole truth; so help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All questions must be answered by the Ordinary and recorded by him.
4. If applicant has no property at all in his possession, use or control of self and wife, affidavit of Free holders unnecessary.

1. What property, if any, has been sold or given away by the applicant or his wife since a Nov.

227.00

TO PAY-
1930, $ 124.50
Cig. & C. Tax. $
TOTAL.

FILED
AUG 10 1933
VETERAN SERVICE OFFICE
A. L. HENSON, Director

E/ Smith John J.

For Clinch County

1932

Application for Pension Due Deceased Pensioner
(UNDER ACT 1904)
(To pay expenses of last illness and funeral)

Kate C. Pafford Ordinary
For John J. Smith
Date of Death April-4-1932
Amount $ ~~169.50~~ $ 124.50

Approved and ordered paid

APPROVED FOR PAYMENT
[illegible] LAWRENCE,
Commissioner of Pensions
VETERANS SERVICE OFFICE
Corporate OK

PAID TO ORDINARY ON THIS CLAIM:

DATE 1935	FUND FROM WHICH PAID	$
2.25	1930	124.50
	TOTAL.	124.50

Homerville, Ga., April 1932

M. A. B. Smith
C. B. [illegible]

In Account With

Homerville
~~CITIZENS~~ HARDWARE & FURNITURE CO.
GENERAL HARDWARE, FARM IMPLEMENTS
AUTO TIRES AND TUBES, HARNESS AND SADDLES
FURNITURE AND HOUSE FURNISHINGS
COFFINS AND CASKETS

Interest Charged on Past Due Accounts

S. S. & P. CO., VALDOSTA, GA.

Statement Rendered

Funeral Expense
to J. J. Smith 12.[illegible]

Received payment
April 9, 1932
T. C. [illegible]

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 Calvin B. Smith of said County, who, after being sworn, on oath says that he knew John J. Smith 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 4th day of April, 1933, and that pensioner left no widow surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of $124.50, per sworn statements fully and completely ITEMIZED hereto attached. (124.50)

Sworn to and subscribed before me,
Kate C. Pafford, Ordinary
Clinch County
(Seal of Ordinary)

Calvin B. Smith

CERTIFICATE OF ORDINARY

GEORGIA, Clinch County.

I, Kate C. Pafford, Ordinary of said County, do certify that I personally know Calvin B. Smith, who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew John J. Smith 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 ninety dollars in 1932 ($90.00) Dollars in said County for 1932, 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 4 day of May, 1933.
(Seal of Ordinary)
Kate C. Pafford, Ordinary
Clinch County

INSTRUCTIONS

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

2nd. Each account must be sworn to before the Ordinary, and in the following form:

"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.

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

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

5th. Return this application, and attached bills, properly receipted, to the Pension Department.

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

Mrs. Kate C. Pafford
Ordinary, Clinch County
Homerville, Ga.

August 7th. 1933.

Hon. A.L Henson,
Veterans Service Office ,
Atlanta, Ga.

Dear Sir:

I am returning papers for funeral expenses for John J. Smith, deceased soldier pensioner of Clinch County, Ga. Mr. Smith, has decided to send in claim for casket only as the Pension Department only pays for $100.00 for funeral expenses.

I hope this will not have to be returned. I am sending certificate with these papers copied from the one sent for other expense bills from this County.

Yours very truly,
Kate C. Pafford
Ordinary.

Georgia, Clinch County.

I, Calvin B. Smith, do solemnly swear that I have paid to Citizens Hardware and Furniture Co. $124.50 for casket for J.J. Smith, deceased soldier pensioner of Clinch County, Georgia, as shown by attached bill marked paid.

This August, 7th. 1933.

Calvin B. Smith

Sworn to and subscribed before me this
August 7th. 1933.

Kate C. Pafford
Ordinary Clinch County, Ga.

A CERTIFICATE.

STATE IF GEORGIA, County of Clinch.

IN RE: Expenses last illness and funeral-John C. Smith.

This is to certify that from an examination of the records in my office, and from personal knowledge, or inquiry, it is ascertained that this pensioner:

1. Died inside of the State of Georgia;
2. Left no estate of any kind or value, sufficient to pay these expenses.

This 7th. day of August, 1933.

(Seal)

Kate C. Pafford
Ordinary

Georgia, Clinch County.

I, Calvin B. Smith, do solemnly swear that I have paid to Citizens Hardware and Furniture Co. $124.50 for casket for J.J. Smith, deceased soldier pensioner of Clinch County, Georgia, as shown by attached bill marked paid.

This August, 7th. 1933.

Calvin B. Smith

Sworn to and subscribed before me this August 7th. 1933.

Kate C. Pafford
Ordinary Clinch County, Ga.

Mrs. Kate C. Pafford
Ordinary, Clinch County
Homerville, Ga.

August 7th. 1933.

Hon. A.L. Henson,
Veterans Service Office,
Atlanta, Ga.

Dear Sir:

I am returning papers for funeral expenses for John J. Smith, deceased soldier pensioner of Clinch County, Ga. Mr. Smith, has decided to send in claim for casket only as the Pension Department only pays for $100.00 for funeral expenses.

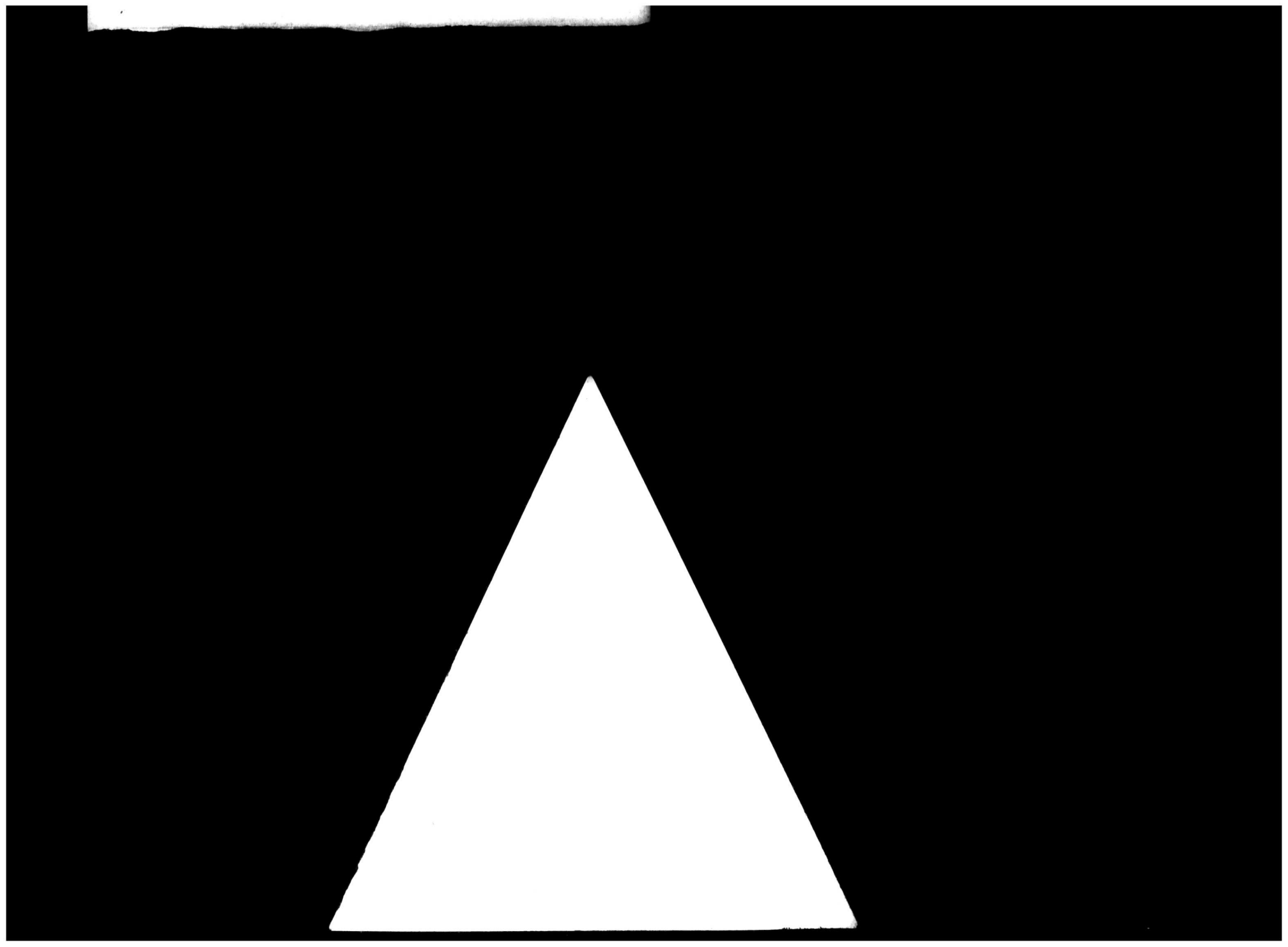
I hope this will not have to be returned. I am sending certificate with these papers copied from the one sent for other expense bills from this County.

Yours very truly,
Kate C. Pafford
Ordinary.

I, have this day received from Kate C. Pafford, Ordinary, Clinch County, Georgia, $124.50 to pay funeral expenses for John J. Smith, deceased soldier Pensioner of Clinch County, Georgia.

This 2nd. day of March, 1933.

Calvin B. Smith



Dy for 1905

Smith, Kessiah

No. OK for 1905

4 Oct 1905

WIDOW'S INDIGENT PENSION.

1903.

Name Kissiah Smith

County Clinch

Widow of Abram E. Smith

Approved _____ 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

6/4/57 1903.

Geo. W. Harrison, State Printer, Atlanta.

7/5/04

POWER OF ATTORNEY.

STATE OF GEORGIA, _____ County.

I, _____ hereby authorize _____ of _____ County, to receive and receipt for the pension allowed and that he remit the same to me at _____ by his check or registered mail.

Witness my hand this _____ day of _____ 190__

Executed in presence of _____ Ordinary, _____ County. L. S.

SEAL

POWER OF ATTORNEY.

STATE OF GEORGIA,

_____ County.

I, _____ hereby authorize _____

of _____ County, to receive and receipt for the pension allowed and that he remit the same to me at _____ by his check or registered mail.

Witness my hand this _____ day of _____ 190_____

Executed in presence of

_____ Ordinary, _____ L. S.

_____ County.

SEAL

Dupl 1905

Smith Kessiah

No. 04 Form 25

Form 25 WIDOW'S

INDIGENT PENSION.

1903.

Name Kessiah Smith

County Clinch

Widow of Abram E. Smith

Approved _____ 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO _____ 1903.

(Geo. W. Barnes, Print Printer, Atlanta.)

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Clinch County.

Kizziah Smith of said State and County, desiring to avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly, passed 1900, hereby submits her 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) Kizziah Smith — Reside at Homerville Clinch County Ga.

2. How long and since when have you been a resident of this State? 64 years born in Georgia in 1850

3. When and where were you born? Ware County Georgia

4. When and where was your husband born—state his full name, and when were you and he married? (Attach copy marriage license in every case.) In South Carolina A. E. Smith in 1824 — Was married in Ga. Ware County Courthouse burned Records

5. When and where, and in what Company and Regiment did your husband enlist or serve during the war between the States? Company H 4th Ga Cavalry under Capt. John C. Nichols

6. How long did your husband serve in said Company and Regiment? 2 years six months

7. When and where did your husband's Co[illegible] and Regiment surrender and was discharged? At Savannah Ga after Surrender April 1865

8. Was your husband present at the time and place when his Company and Regiment surrendered? Yes

9. If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause, and by what authority?

10. When and where did your husband die? Clinch County Georgia Jan 4 1874

11. Which of the following grounds do you base your application for Pension, viz.: First—Age and Poverty; Second—Infirmity and Poverty, or Third—Blindness and Poverty? Age and Poverty

12. If upon the first ground, state how long you have been in such a condition that you cannot 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? Ten years

13. What has been your occupation since your husband's death? Living with those who would take care of me Love, God and Children

14. How much can you earn gross, by your own exertion or labor? Nothing

15. What property, real or personal, or income do you have or possess, and its gross value? None

16. What property, real or personal, did you possess at death of husband or he left you, and of the years 1899, 1900, 1901, and what disposition, if any, by sale or gift, have you made of the same? None

17. In what counties did you reside in 1899, 1900, 1901 and 1902, and what property did you return for taxation? Clinch County Returned no property

18. How have you been supported since death of husband, and especially for 1899, 1900, 1901 and 1902? By charity of others

19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income? Could Nothing I could Know Cost

20. What was your employment during 1899, 1900, 1901 and 1902—how much did you receive for each year? Have no employment was not able to do any thing

21. Have you a family? If so, who composes such family? Give their means of support? Have they any lands or other property? No

22. Have you ever made application for pension before? Yes

23. How many applications have you made for a Pension, and under what class? One under this Act

Sworn to and subscribed before me this 1 day of April 1904

W. L. Howell Ordinary,

of Clinch County.

Kizziah X Smith
mark

QUESTIONS FOR WITNESSES.

STATE OF GEORGIA,
Ware County.

James Cox, of said State and County, having been presented as a witness in support of the Application of Mrs. Rissiah Smith for a Pension under the Act of 1900, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside?
James Cox, Waycross Ware County, Ga.
2. Are you acquainted with the applicant, Mrs. Rissiah Smith
If so, how long have you known her? about 45 years
3. Where does she reside, and how long and since when has she been a resident of this State?
She resides in Clinch County, Ga. Has resided in Ga. since I Knew her
4. When and where was she born? Do not Know
5. Were you ever acquainted with her husband? yes
6. Where did she reside in 1861? Clinch County
7. When and to whom was he married? They were married when I first Knew them. about 45 yrs ago
8. When and where was he born? Do not Know
9. How long have you known him? about 45 yrs ago
10. When and where did Abram E. [redacted] enlist in the war between the States, and in what Company and Regiment did he enlist, and how do you know this? Enlisted in 1862 Co. I. 4th Ga. Cav. Capt. Jo Nichells - I was there
11. Were you a member of the same Company and Regiment? yes
12. How long did he perform regular military duty? about 2 yrs. & six months
13. When and where was his Company and Regiment surrendered and discharged from service?
Surrendered, April 1865, at Sorewen, Ga
14. Were you with the Command when it surrendered? yes
15. Was Abram E Smith the husband of applicant present?
yes
16. If not present, where was he?
17. When and where did he leave his command? after surrender, at Sorewen, Ga April 1865
For what cause? war ended
By whose authority he left? Col J L. Harris
How do you know all this? (State fully and clearly.) I was there
18. When and where did Abram E. Smith die?
19. Where did he reside at his death and how long had he been a resident of Georgia at his death?
20. Do you of your own knowledge know that applicant is the lawful widow of Abram E. Smith
21. Has she remained unmarried since her soldier husband's death, and is now his widow?
22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge?
23. What property, effects or income did applicant possess in 1899, 1900, 1901 and 1902, and what disposition did she make of it?
24. Has applicant conveyed any property in last two years or given any away, if so, what was it, and to whom?
25. What is applicant's physical condition and her chances and ability to earn a support?

I certify that James Cox is of good character and his statements are worthy of Credit. Given under my hand and seal of office, this April 20. 1904
Warren Lott, Ordinary Ware Co Ga

26. Is applicant able to earn a support at labor of any sort, if not, why?
27. How was he supported for 1899, 1900, 1901 and 1902?
28. How much did applicant contribute to her support for last two years?
29. Give a full and complete statement of applicant's physical condition?
30. What interest have you in the recovery of this pension by the applicant?

Sworn to and subscribed before me this 20 day of April 1904
Warren Lott Ordinary, Ware County.

James his X Cox mark
Witnesses.

AFFIDAVITS OF PHYSICIANS.

STATE OF GEORGIA,
Clinch County.

Personally before me comes T. E. Pennington and A. H. Culpepper, both known to me to be reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully Mrs. Rizzola Smith applicant for a Pension under Act of 1900, and after such personal examination say that her physical condition is this. She appears quite old and feeble and appears to be about 80 years of age and is totally unable to do anything for herself and we have no interest in said pension if allowed.

Sworn to and subscribed before me this 1 day of July 1904
W. T. Howell Ordinary, Clinch County.

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

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch County.

I, W. T. Howell Ordinary, in and for said County, hereby certify that the applicant, Mrs. Rizzola Smith resides in said County, and has been a bona fide resident of this State since the day of Jan 1865, and that the witnesses, Mr. James Cox A. H. Culpepper and T. E. Pennington are of trustworthy character, and that their statements are entitled to full faith and credit.

I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses *before the same was signed and subscribed.*

I further certify that the tax digest of Clinch County shows that applicant returned for taxation in her own name in 1899 no dollars worth of property, and in 1900 no dollars worth of property, in 1901 no dollars worth of property, and in 1902 no dollars worth of property.

Witness my hand and official seal this 1 day of July 1904
W. T. Howell Ordinary.
{SEAL.}
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 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. All affidavits must be made before Ordinary.
4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 9th April, 1865, not entitled.
5. .....Witnesses and two Physicians are necessary to make out claims.
6. Attach certified copy marriage license in every case, or show why it cannot be obtained.

QUESTIONS FOR WITNESSES.

STATE OF GEORGIA,
Ware County.

K. B Smith, of said State and County, having been presented as a witness in support of the Application of Mrs. Kissiah Smith for a Pension under the Act of 1900, 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? K. B. Smith, Clinch County, Ga
2. Are you acquainted with the applicant, Mrs. Kissiah Smith
If so, how long have you known her? 40 yars
3. Where does she reside, and how long and since when has she been a resident of this State?
4. When and where was she born?
5. Were you ever acquainted with her husband?
6. Where did he reside in 1861?
7. When and to whom was he married?
8. When and where was he born?
9. How long have you known him?
10. When and where did ..... enlist in the war between the States, and in what Company and Regiment did he enlist, and how do you know this?
11. Were you a member of the same Company and Regiment?
12. How long did he perform regular military duty?
13. When and where was his Company and Regiment surrendered and discharged from service?
14. Were you with the Command when it surrendered?
15. Was ..... the husband of applicant present?
16. If not present, where was he?
17. When and where did he leave his Command?
For what cause?
By whose authority he left?
How do you know all this? (State fully and clearly.)
18. When and where did Abram E Smith die?
January, 1899, in Clinch County, Ga
19. Where did he reside at his heath and how long had he been a resident of Georgia at his death?
He resided in Clinch County and had since 1839
20. Do you of your own knowledge know that applicant is the lawful widow of Abram E Smith
yes
21. Has she remained unmarried since her soldier husband's death, and is now his widow?
yes
22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge? None - I reside near her
23. What property, effects or income did applicant possess in 1899 and 1900, and what disposition did she make of it? None
24. Has applicant conveyed any property in last two years or given any away, if so, what was it, and to whom? none
25. What is applicant's physical condition and her chances and ability to earn a support?
Infirm from age and a cripple & totally unable to earn a support.
26. Is applicant able to earn a support at labor of any sort, if not, why? No on account of infirmity from age
27. How was she supported for 1899, 1900 and 1901? By her daughter
28. How much did applicant contribute to her support for last two years? none
29. Give a full and complete statement of applicant's physical condition? She is very feeble from age and is also crippled in on hip & has ver stick in walking
30. What interest have you in the recovery of this pension by the applicant? none

Sworn to and subscribed before me this 2 day of July 1904
Warren Lott Ordinary,
Ware County.

K. B. Smith
Witnesses.

AFFIDAVITS OF PHYSICIANS.

STATE OF GEORGIA,
..... County.

Personally before me comes ..... and ....., both known to me to be reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully Mrs. ....., applicant for a Pension under Act of 1900, and after such personal examination say that her physical condition is this.....

and we have no interest in said pension if allowed.

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

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Ware County.

I, Warren Lott Ordinary in and for said County, hereby certify that the applicant, Mrs. ..... resides in said County, and has been a bona fide resident of this State since the ..... day of ..... 18....., and that the witnesses, Mr. K. B. Smith ..... are of trustworthy character, and that their statements are entitled to full faith and credit.

I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses *before the same was signed and subscribed.*

I further certify that the tax digest of ..... County shows that applicant returned for taxation in her own name in 1899 ..... dollars worth of property, and in 1900 and 1901 ..... dollars worth of property.

Witness my hand and official seal this ..... day of ..... 190....

{SEAL.}
Warren Lott Ordinary,
Ware County.

NOTE—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 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. All affidavits must be made before Ordinary.
4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 26th April, 1865, not entitled.
5. ..... Witnesses and two Physicians are necessary to make out claims.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, Virginia Smith, hereby authorize
W. A. Wright of Atlanta Ga
to receive and receipt for the pension paid hereon, and request that he remit same to
J. T. Dame Ordinary at Homerville Ga

In Witness Whereof, I have hereunto set my hand and seal, this 1
day of Jan 1907.

Virginia Smith [L. S.]

Executed in presence of
J. T. Dame

To Those Heretofore Paid.

1907.

No. 186

INDIGENT WIDOW'S PENSION,

For year ending Dec. 31, 1907.

PAID TO
Mrs. Virginia Smith
OF
Clinch County,

Widow of
Co. Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED MAR 1 1907.

AND HANDED TO

Smith, Virginia
Clinch County

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, Virginia Smith, hereby authorize
W. A. Wright of Atlanta Ga
to receive and receipt for the pension paid hereon, and request that he remit same to
J. T. Dame ordinary at Homerville Ga

In Witness Whereof, I have hereunto set my hand and seal, this 31st
day of Dec 1905.

Virginia Smith [L. S.]

Executed in presence of

To Those Heretofore Paid.

1905.

No. 1787

INDIGENT WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO
Mrs. Virginia Smith
OF
Clinch County,

Widow of
Co. Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED MAR 1 1905.

AND HANDED TO

Virginia Smith (Widow)
Clinch County

Form No. 2

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of Clinch. } Personally comes Mrs. Virgie Smith

who, being sworn says on oath, that she is a bona fide resident of said County of Clinch State of Georgia, and that she has resided in said State continuously ever since 1830. That she is the Widow of A. E. Smith who was a soldier in Company N of the Georgia Cavalry Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of June 186[illegible], and served in the Army up to [illegible] 186[illegible]. That he died on the [illegible] day of [illegible] 18[illegible].

[illegible] cause of Death [illegible]

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18[illegible].

I have been allowed an Indigent pension as a resident of this [illegible] County, under Act 1900, for the year 1904, and now apply for the pension provided by law for the year ending December 31, 1905 [illegible]

Sworn to and subscribed before me, this 3rd day of June 1905. [illegible], Ordinary.

Virgie [illegible] Smith

Post-Office [illegible]

State of Georgia, Clinch County. } I, [illegible], Ordinary of said County, certify that I am well acquainted with Mrs. Virgie [illegible] Smith, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the date day of 18[illegible].

Given under my official signature and seal, this the 3rd day of June 1905.

{ Official Seal. }

[illegible]

Ordinary of Clinch County.

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1905.

Form No. 2

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of Clinch } **Personally comes Mrs.** Hannah Smith

who, being sworn says on oath, that she is a bona fide resident of said County of Clinch **State of Georgia, and that she has resided in said State continuously ever since** 1830. **That she is the Widow of** A. E. Smith **who was a soldier in Company** I **of the** 4th Cavalry **Regiment of** Georgia **Volounteers, that he enlisted in said regiment on or about the month of** Jan 186[illegible], **and served in the Army up to** Surrender 186[illegible]. **That he died on the** 4th **day of** Jan 1899

Cause of death Old age and Disease of Bowels.

Age Infirmity & Death.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18[illegible]

I have been allowed an Indigent pension as a resident of Clinch **County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the year ending December 31, 1907.**

Sworn to and subscribed before me this 1 **day of** Jan **1907.** J. T. Dame **Ordinary.**

Hannah Smith

Post Office Homerville Ga

State of Georgia, Clinch **County.** } I, J. T. Dame **Ordinary of said County, certify that I am well acquainted with Mrs.** Hannah Smith, **who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of** 18[illegible]

Given under my official signature and seal, this the 1 **day of** Jan **1907.**

{ Official Seal }

J. T. Dame

Ordinary of Clinch **County.**

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

Form No. 2

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of Clinch } PERSONALLY COMES MRS. Viggie Smith

who, being sworn says on oath, that she is a bona fide resident of said County of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since 1830. That she is the Widow of A. E. Smith who was a soldier in Company N of the 4th Georgia Cavalry Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of Jan 186 3, and served in the Army up to Surrender 186 5. That he died on the [illegible] day of [illegible] 18[illegible]

[illegible] aged 3 [illegible]

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18[illegible]

I have been allowed an Indigent pension as a resident of [illegible] County, under Act 1900, for the year 1904, and now apply for the pension provided by law for the year ending December 31, 1905 [illegible]

Sworn to and subscribed before me, this 3rd day of July 1905. J. T. Dame, Ordinary. } Viggie (her X mark) Smith. Post-Office Homerville Ga

State of Georgia, Clinch County. } I, J. T. Dame Ordinary of said County, certify that I am well acquainted with Mrs. Viggie Smith, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the Late day of 18 3[illegible]

Given under my official signature and seal, this the 3rd day of July 1905.

{ Official Seal. }

J. T. Dame
Ordinary of Clinch County.

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1905.

Form No. 2

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of Clinch } PERSONALLY COMES MRS. Viggie Smith

who, being sworn says on oath, that she is a bona fide resident of said County of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since 1830. That she is the Widow of A. E. Smith who was a soldier in Company I of the 4th Cavalry Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of Jan 186 3, and served in the Army up to Surrender 186 5. That he died on the 4th day of Jan 18 99

He died at and was aged [illegible] Buried [illegible]

Age Infirmity & Poverty.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18 [illegible]

I have been allowed an Indigent pension as a resident of Clinch County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me this 1 day of Jan 1907. J. T. Dame, Ordinary. } her Viggie X Smith mark. Post Office Homerville Ga

State of Georgia, Clinch County. } I, J. T. Dame Ordinary of said County, certify that I am well acquainted with Mrs. Viggie Smith, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the [illegible] day of [illegible] 18 3[illegible]

Given under my official signature and seal, this the 1 day of Jan 1907.

{ Official Seal }

J. T. Dame
Ordinary of Clinch County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, Virgie Smith, hereby authorize
W. A. Wright of Fulton Co Ga
to receive and receipt for the pension paid hereon, and request that he remit same to
J. T. Dame Ordinary at Homerville Ga

In Witness Whereof, I have hereunto set my hand and seal, this 2nd
day of Jan 1906.

Virgie Smith [L. S.]

Executed in presence of
J. T. Dame

Smith, Virgie
Clinch Co Ga
To Those Heretofore Paid.

1906.

No. 168

WIDOW'S PENSION

For year ending Dec. 31, 1906.

PAID TO
Mrs. Virgie Smith
OF
Clinch County,
Widow of A. L. Smith
Co. I Regiment 4th Ga Cavalry

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
JAN 26 1906,
TO
W. A. W.

Form No. 1

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Clinch

PERSONALLY COMES Mrs. Virgie Smith

who, being sworn, says on oath that she is a bona fide resident of said County of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since 1820. That she is the Widow of A. E. Smith who was a soldier in Company I of the 4th Ga Regiment of Cavalry Volunteers, that he enlisted in said regiment on or about the month of Jan 186 3 and served in the Army up to Surrender 186 5. That he lost his life on the 4th day of Jan 18 22 (*State here particulars of the husband's death, when, where and from what cause.*) He died with old age Brights disease.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18 45

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

Sworn to and subscribed before me this 2nd day of Jan 1906.
J. T. Dame, Ordinary.

Virgie Smith
Post Office Homerville Ga

State of Georgia,
Clinch County.

I, J. T. Dame Ordinary of said County, certify that I am well acquainted with Mrs. Virgie Smith, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the _____ day of _____ 18 32

Given under my official signature and seal, this the 2nd day of Jan 1906.

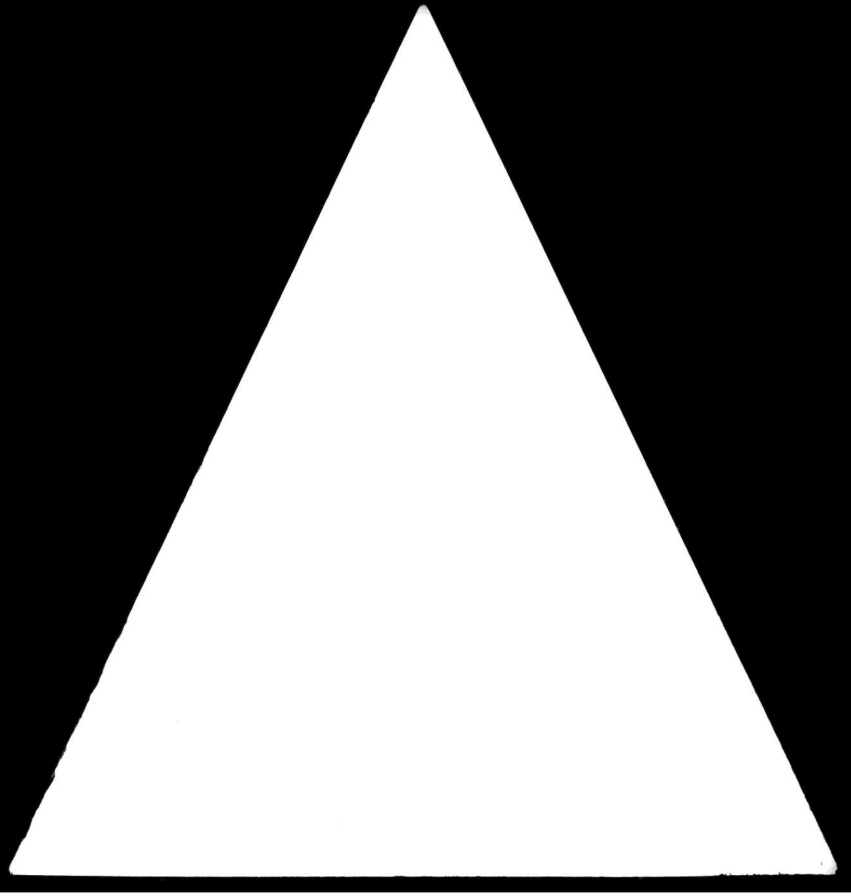
{Official Seal}

J. T. Dame
Ordinary of Clinch County.

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

STATE OF GEORGIA Ordinary's Office Clinch County.

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



Pension office
9/5-1917
Applicant is the owner of property of gross value than Fifteen hundred dollars - Cannot approve this appl
I Calm
J W Lindsey
Comm of Pensions

Smith, C. H.
Disapproved
9/5-1917
Clinch Co

No.....

Confederate Soldier's Application.

UNDER ACT ~~1910~~ 1917

County Clinch

Name C H Smith

Company I 4th Cong

Regiment.....

Approved.....

J. W. LINDSEY,
Commissioner of Pensions.

CHAS. P. BYRD, State Printer, Atlanta.

9/5-1917

APPLICATION FOR SOLDIER'S PENSION UNDER ACT ~~1910.~~ 1917

Questions for Applicants to Answer.

STATE OF GEORGIA,

Clinch County.

Charlton H. Smith of said State and County, hereby applies for the pension provided by Act of 1917, to Confederate Soldiers, and submits his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to wit:

1. What is your name and where do you reside? (Give County and Post-office) Charlton H. Smith Homerville Clinch Co Ga-

2. How long and since when have you been a continuous resident citizen of this State? All my life time - July 8 - 1846 -

3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? I enlisted in 4th Ga. Cavalry Co. D

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service.) I enlisted in Screven Co. Ga. May 12 - 1864 in

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) From the time I enlisted till close of War -

6. When and where was your Company and Regiment surrendered or discharged from the Service? Discharged at Screven Ga in April - 1865 -

7. Were you actually present with your Command when it was surrendered or discharged? No

8. If you were not actually present, state specifically and clearly where you were. I was on duty on the Altamaha River at Doctortown Ga- I never left it till the Surrender

a. Where was your Command when you left it?

b. When did you leave the Command? - April - 1865 -

c. For what cause did you leave? Gen Lee had surrendered -

d. By whose authority did you leave? The Higher Officers -

e. For how long was your leave granted? In what way? I was with the army till the Surrender

f. Why did you not return to your Command after leave expired? I had as above

g. In what way were you prevented? none

h. What effort did you make to return? never left

i. Were you captured during the war? no

j. If so, when, and where? In what prison were you held and when were you released?

9. What property of every description was owned, in the use, possession and control of yourself and its cash value on the 4 Nov. 1908? (Make list by items and value.) 276 acres of Land 600. Town property 1000. 1 Mule 3 yrs. old H H Goody 150. Buggy & Wagon 80. Personal property 50.

10. What property of any kind have you disposed of and for what purpose since 4 Nov. 1908. To whom and for what price? None

11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and its cash value? (Make itemised list). None

12. What annual or monthly income or earnings of yourself and the source derived have you? None

13. Are you drawing a pension of any amount from this State or the United States? no

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? No

Sworn to and subscribed before me, this the 23rd day of August 1917.

W. W. Musgrove Ordinary

of Clinch County.

C. H. Smith

Smith C. H.
Co D 4th Ga Cav
Clinch Co

Pension Office
Aug 23 - 1917
Applicant is the
same Y ought
to be Pensioned
the Brief was
drawn by
Hon Byrd Brown
Atty at Law
Waycross Ga
W. Kelley
Pen. Atty.

Confederate Soldier's Application.

UNDER ACT ~~1910~~ 1917

No.

County Clinch

Name C. H. Smith

Company D

Regiment 4th Ga Cav

Approved

J. W. LINDSEY,
Commissioner of Pensions.

CHAS. P. BYRD, State Printer, Atlanta.

Dec 1917

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 Charlton H. Smith 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 Homeville - Clinch Co Ga.

2. How long and since when have you known Charlton H. Smith the applicant? 57 Years

3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? He has resided in Clinch County all his life - and resides here now -

4. When, where and in what Company and Regiment did Charlton H. Smith enlist during war from 1861 to 1865? (Give date and place) Screven - Ga - May - 12 - 1864 - In Company I - Fourth Georgia Cavalry -

5. How did you obtain your information of this Service? By being there myself

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) Till the war closed

7. When and where was his Command surrendered or discharged (give date and place) At Screven - Ga - in April 1865

8. Were you personally present at the Surrender? Yes

9. If not, where were you and how came you there?

10. Was the applicant personally present with his Command at surrender? Yes

11. If not where was he and how came him there?

12. When did he leave his Command? At the surrender Where was his Command when he left it? Screven Ga. for what cause did he leave? Was on duty at Dr-Town By whose authority did he leave the Captains and how long was he granted leave? Was on duty How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) He was a member of his Company at the surrender on duty at the Altamaha River at Dr-Town -

13. In what way was he prevented from returning to his Command? Was there How do you know?

14. What effort did he make to return to his Command and how do you know? ~~Was~~ He was there

15. Was applicant captured as a prisoner No If so, when and where? In what prison was he held? and when released

Sworn to and subscribed before me, this the 23 day of August 1917 J R Dickerson

W. V. Musgrove Ordinary,
of Clinch County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.
Clinch County.

Personally before me comes Folks Hufford & C H Dickerson who on oath says that they are freeholders residing in said County and we know C H Smith the applicant for pension and we know the property that is now in the use, possession and control of himself and of its cash value to wit: (Make List by items and value.) 376 acres $828. of land, Town property $1000. one mule $150. Household goods $150.00 Buggies wagons. Farm Implements &c $80 -

1. What property, if any, has been sold or given away by the applicant since Nov. 4, 1908? (State it fully by items.) None that we know of

2. When and to whom was it sold or given to? —

3. What was the price paid or stated to be paid? —

4. What relation is the party to applicant? None —

5. What disposition was made of the proceeds of the sale? —

6. Was the disposition of this property made in good faith and full values? — or was it made to obtain a pension? —

Sworn to and subscribed before me, this the 4 day of Sept 1917 Folks Hufford C H Dickerson

W. V. Musgrove Ordinary,
of Clinch County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch County.

I, W. V. Musgrove Ordinary of said County, certify that I know the applicant C H Smith 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 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 C H Smith shows that

year 1911 3056.00 value for tax is in 1908 $ 2080.00 for 1909 $ 2770.00 for 1910 $ 3020.00 for 1911 $ 3056.00 for 1912 $ 4006.00 for 1913 $ 3931.00 for 1914 $ 3946.00 for 1915 $ 3954.00 For 1916 $ 3994.00 + 1917, $ 3606.00

Sworn under my hand and official seal of office this 4 day of Sept 1917

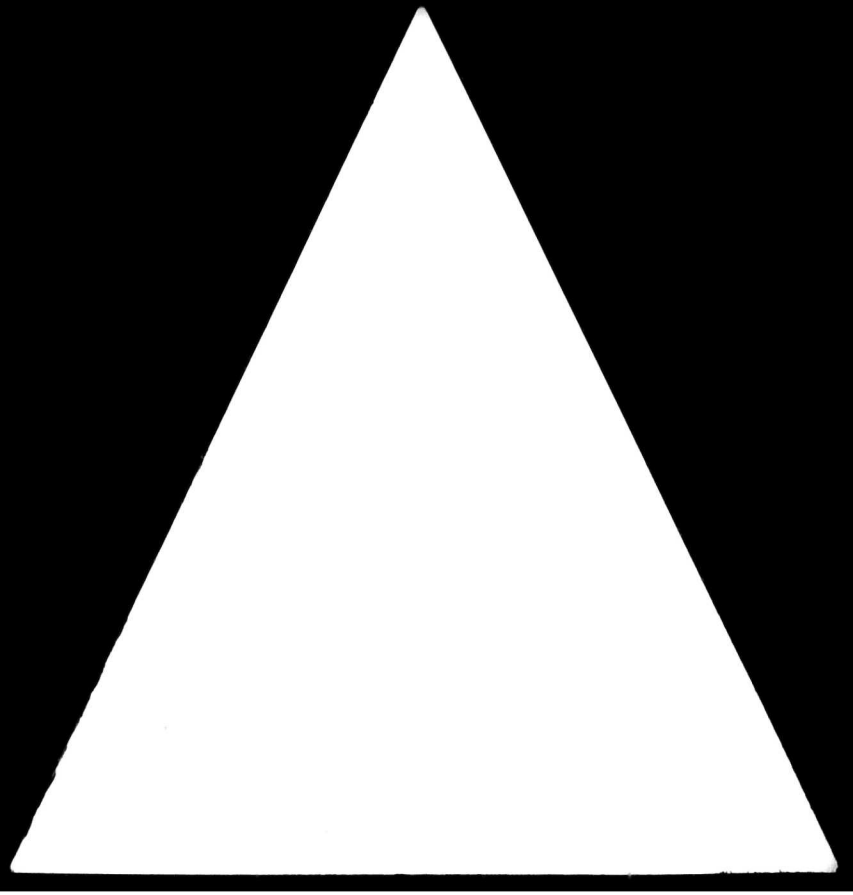
W. V. Musgrove Ordinary,
of Clinch County.

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words "You do solemnly swear that you will true answers make to each question asked you and the evidence you shall give shall be the whole truth; so help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary and certified by him.
4. If applicant has no property at all in his possession, use or control of self affidavits of freeholders unnecessary.

23 day of August 1917

W. T. Musgrove Ordinary,

of Clinch County.



Ordinary's Certificate

STATE OF GEORGIA,

CLINCH, COUNTY.

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

Sworn under my hand and official seal of office this 12th day of Feb. 1923.

(SEAL) W. V. Musgrove 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. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Ordinary Marriage
Ck for 1924 6/8
Clinch Co

No.

Widow's Pension 1875

Under Act 1910—as Amended by Act of 1919.

County CLINCH,

Name Mrs Martha Smith,

Widow of Charlton H. Smith,

Company

Regiment

Approved

Mrs Smith

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

2/ /1923

Ordinary's Certificate

STATE OF GEORGIA,

CLINCH, COUNTY.

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

Sworn under my hand and official seal of office this 12th day of Feb. 1923.

(SEAL) W.V. Musgrove 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. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Smith, Martha
Ck Feb 1924 Clinch Co
No.

Widow's Pension 1875

Under Act 1910—as Amended by Act of 1919.

County CLINCH,

Name Mrs Martha Smith,

Widow of Charlton H. Smith,

Company

Regiment 4 Ga

Approved C.H. McGregor

J. E. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

2/ /1923

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

Questions for Applicant

STATE OF GEORGIA,

CLINCH COUNTY.

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

1. What is your name, and where do you reside? Mrs. Martha Smith, Homerville, Ga.
2. How long and since when have you been a continuing resident of the State of Georgia? All my life
3. When, where and to whom were you married? To Charlton H. Smith, at or near Homerville, Ga. Sept. 21, 1875.
   a. Have you married since the death of first and soldier husband? No.
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) Jan. 1st, 1863 - May 12th 1864 at Homerville, Ga. in Company "I" 4th Ga. Cavalry, John C. Nichols Capt.
5. When and where did the commands of your husband surrender or discharge from the army? Apr. 22, 1865, at Doctortown, Ga. Mustered out.
6. Was your husband personally present at the time of the surrender or discharge of this command? Yes.
7. If he was not present state clearly where he was? /
8. Where was his command when he left?
   a. For what cause did he leave his command? Mustered out.
   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? Good
   f. What effort did he make to return to his command?
   g. In what way was he prevented from going back to Command
   h. Was he captured by the enemy at any time? No.
   i If so, when and where captured and where held as a prisoner, and when and for what cause released?
   j. When and where did your first husband die? Nov. 1st, 1917, Homerville, Ga.
   k. Were you residing together when he died? Yes
   l If not, how long had you resided apart?
   m. Are you now a widow? Yes
9. Have you or your husband heretofore been paid a pension by the State? No.

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

Sworn to and subscribed before me this the 10 day of February 1923

W.V. Musgrove Ordinary

of CLINCH County.

(SEAL)

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA,
Lowndes. COUNTY.

Personally before me comes B.J.Sirmans. 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? B.J.Sirmans, Valdosta, Ga. Lowndes County.

2. How long and since when have you known Mrs. Martha Smith applicant? For the last forty or fifty years.

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? 23rd. day Sept. 1875 to C.H.Smith How do you know? I was living in the same community and knew this to be true

5. How long and since when did you know C.H.Smith her husband? All, of his life.

6. When and where did Homerville, Ga. the husband of applicant, die?

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

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

9. When, where and in what Company and Regiment did C.H.Smith enlist? Apr. 1864, at Camp Scriven Co I. Captain Jno C.Nichols Co. 4th, Ga Cavalry

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

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? As well as I remember it was about 6 or 8 months.

12. When and where did his Command surrender, and was discharged? Camp Scriven 1865.

13. Were you personally present when it was surrendered? no. If not, where were you at home sick and how came you there? Sick furlough

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

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

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

Sworn to and subscribed before me this the 10 day of Feby 1953 B.J. Sirmans

L.N. Holcombe Ordinary of Lowndes County.

(SEAL)

GEORGIA. CLINCH COUNTY:

I, the undersigned clerk of Court of Ordinary of said county, do certify that the within is a true copy of the marriage license of C. H. Smith and wife appe ring of record in this offiwe in book "B" page 14 of marriage licenses. Witness my hand and seal this Feb. 9, 1923.

Clerk Ct.of Ordinary.

MARRIAGE LICENSE

OF

Issued 19

and recorded on page

Book of Marriage Licenses.

Ordinary.

No. 268

Marriage License

State of Georgia Clinch

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

You are hereby authorized to join

Charlton H. Smith and Martha Henderson

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 23 *day of* Sept. 1875.

Moses Tomlinson, (L.S.) Ordinary.

LICENSE OBTAINED UNDER OATH BY

STATE OF GEORGIA CERTIFICATE. CLINCH COUNTY

I Certify that Charlton H. Smith *and* Martha Henderson *were joined in Matrimony by me this* 23 *day of* Sept. ~~Eighteen~~ Hundred ~~and~~ 1875.

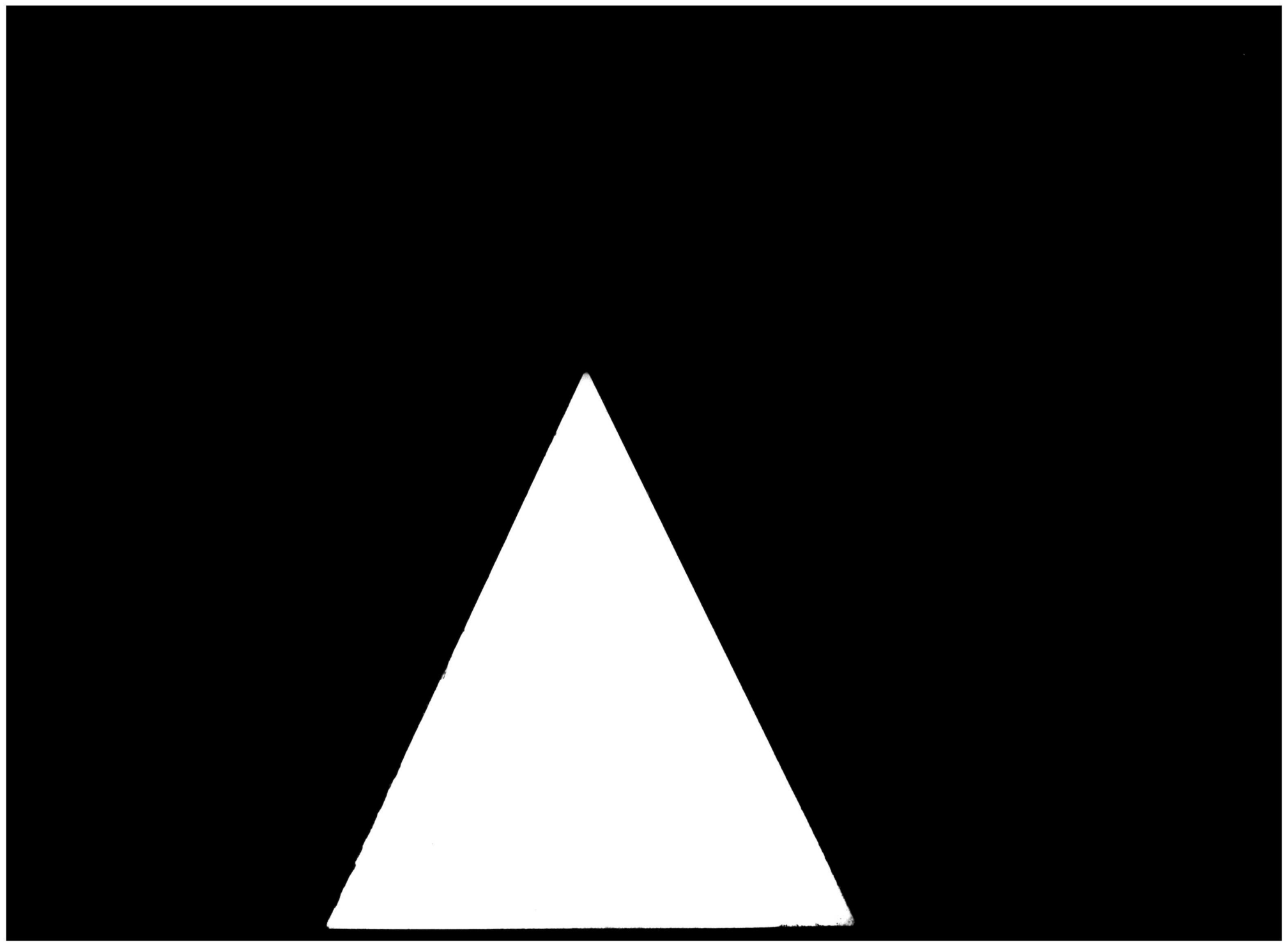
Recorded - - - - 19

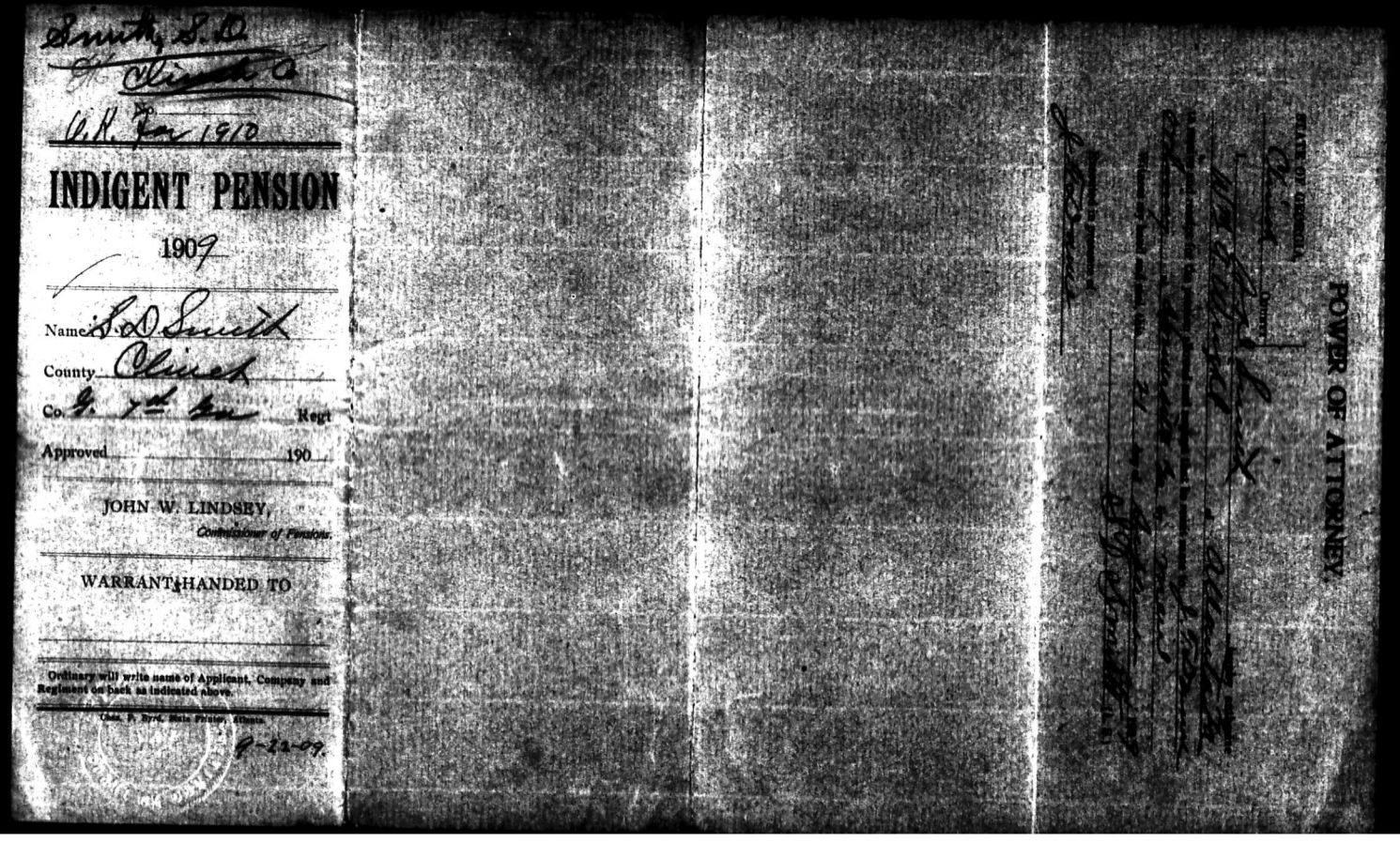
G.W.Newbern, M.G.

Moses Tomlinson, *Ordinary.*

MARSHALL & BRUCE CO. NASHVILLE, TENN.

PARTY PERFORMING CEREMONY RETURN TO ORDINARY TO BE RECORDED.





Smith, S. D.
Clinch Co.
O.R. For 1910

INDIGENT PENSION

1909

Name S. D. Smith

County Clinch

Co. G. 7th Ga Regt

Approved _____ 190__

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Chas. P. Byrd, State Printer, Atlanta.

9-22-09.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

[illegible]

Witness my hand and seal, this 21 day of [illegible] 1909

[illegible]

Witnessed in presence of

[illegible]

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, L. D. Smith, duly authorize
Wm. E. Wright of Atlanta
to receive and receipt for the pension allowed and request that he remit same to L. D. Smith
Ochlocknee Ga. by mail

Witness my hand and seal, this 21 day of April 1909
L. D. Smith (L. S.)

Executed in presence of
J. T. Dame

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,
Clinch County.

I, L. D. Smith, of said State and County, desirous to avail himself of the Pension and Bounties [illegible] Code), hereby submits his proofs, and after being duly sworn, makes answer to each of the following questions, viz:—and answers as follows:

1. Your full name? (Give name in your order.) (Give State, County and Postoffice.)
L. D. Smith Ochlocknee Ga. and Young Georgia Hampton Co. S.C.

2. How long and when have you been a resident of this State? All my life

3. When and where were you born? Orchard Creek S.C. 1840.

4. When and where and in what company and regiment did you enlist or serve? Ochlocknee Ga. Co. 7th Ga. Regt.

5. How long did you remain in such company and regiment? About 12 months

6. When and where was your company and regiment surrendered and discharged? At or near Augusta Ga. April 1865.

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 sent home on a furlough by Capt. Wm. Wright. I was sick and never returned. After the war was over I went to work.

9. How much can you earn (gross) per annum by your own exertions or labor? Not more than $100.

10. What has been your occupation since 1865? Farmer

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"? Infirmity 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. By being shot [illegible] I was shot in the left eye at the battle of Petersburg Va. and lost the sight of it. I was also shot in the left leg and have been lame ever since.

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 1903, 1904, 1905, 1906, 1907 and 1908, 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? In Clinch County. My property consisted of one horse and mule.

16. How was you supported during the years 1903, 1904, 1905, 1906, 1907, 1908 and 1909? By what I could make on my farm.

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 $100.

18. What was your employment during 1903, 1904, 1905, 1906, 1907, 1908 and 1909? What pay did you receive in each year? Farmer. Pay varied.

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? Yes. Wife and children. My wife is crippled. She is helpless. My children are small. The oldest son I have is 16 years old.

20. Are you receiving any pension? If so, what amount and for what disability? None

21. Have you ever made an application for pension before? No

22. How many applications have you ever made and under what laws? None

Sworn to and subscribed before me this the [illegible] day of [illegible] 1909.
[illegible]
[illegible] County.

L. D. Smith
Applicant.

Every Question Must Be Answered

Smith, L. D.
Clinch Co.
Ochlocknee Ga.
Apl. 21 1909

INDIGENT PENSION
1909

Name L. D. Smith
County Clinch
Co. 7 Ga. Regt.
Appeal 190

JOHN W. LINDSEY,
Ordinary.

WARRANT HANDED TO
Ordinary.

Clerk Superior Court.

Ordinary's Office

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Turner COUNTY.

John T Marshall of said State and County, having been presented as a witness in support of the application of L. D. Smith 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? John T Marshall Resides Two Turner County Ga
2. Are you acquainted with L D Smith the applicant; if so, how long have you known him? Fifty Years ago Was Schoolchildren Together
3. Where does he reside, and how long and since when has he been a resident of this State? Resides In this Children County Resident of this all his life
4. When, where and in what company and regiment did he enlist, and how do you know? Enlisted at Abbeville Ga Co D 6th 7th Ga R Feb 1862
5. Were you a member of the same company and regiment? Yes
6. How long did he perform regular military duty? Until Surrender
7. When and where was his command surrendered? Hamburg S C agreed

8. Were you present when it surrendered? We Was all Way Home and Didn't
9. Was applicant present? No Was Started Home and Didn't with us
10. If he was not present, where was he? Was all Way Home and Didn't
When did he leave his command? Didn't Know For what cause? Didn't
By what authority he left? Left under Proper Command How do you know all of this? Was with Applicant

11. What property, effects or income has the applicant? (Give your means of knowledge.) None: No Home and his Affidavit is True
12. What property, effects or income did the applicant possess in 1903, 1904, 1905, 1906, 1907, 1908 and 1909? Don't Know
and what disposition, if any, did he make of same? Don't Know
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? If any Don't Know
14. What is the applicant's occupation and physical condition? Working Blacksmith Shop and For Eighteen Years Have Been Afflicted Chronic Rheumatism Thereby Causing him Unable To Do Manual Labor For Support
15. Is the applicant unable to support himself by labor of any sort; if so, why? Not able Owing Being Afflicted For Eighteen Years and Causing Rheumatism Disabling him From Doing Manual Labor For Support
16. How was he supported during the years 1903, 1904, 1905, 1906, 1907, 1908 and 1909? all he Could Do By his own Efforts
17. What portion of his support for these four years was derived from his own labor or income? Do Not Know
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code Not able To Make Support By Reason of Disability
19. Who composes family? What property have they? Children's ages and their earning capacity? His Wife Very Old & Feeble & Daughter aged 22 Years No Husband and No Property
20. What interest have you in the recovery of a pension by this applicant? None

Sworn to and subscribed before me, this the 9th day of Sept 1909

John T Marshall Witness.

Joe McKinney Ordinary.
Turner County Ga

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Clinch COUNTY.

Personally came before me A H Culpepper and Dr G R Hopson both known to me as reputable physicians of said County, who, being sworn, depose on oath that they have examined carefully L D Smith applicant for pension under Section 1254, Code, and after such personal examination say that his present physical condition is as follows: Have been Afflicted with Left Leg. old age & Quite Deaf & Entirely Blind

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

Sworn to and subscribed before me, this the 11 day of September 1909

J T Dasher Ordinary.

G R Hopson
A H Culpepper M.D

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch COUNTY.

I, J T Dasher Ordinary, in and for said County, hereby certify that the applicant L D Smith resides in said County, and has been a bona fide resident of this State since the day of All his Life 189.. and that the witnesses, viz.: G R Hopson & 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 None Dollars of property, and in 1903 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 and made in good faith.

Witness my hand and seal of office, this 11 day of September 1909

J T Dasher Ordinary,
of Clinch 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 such 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.

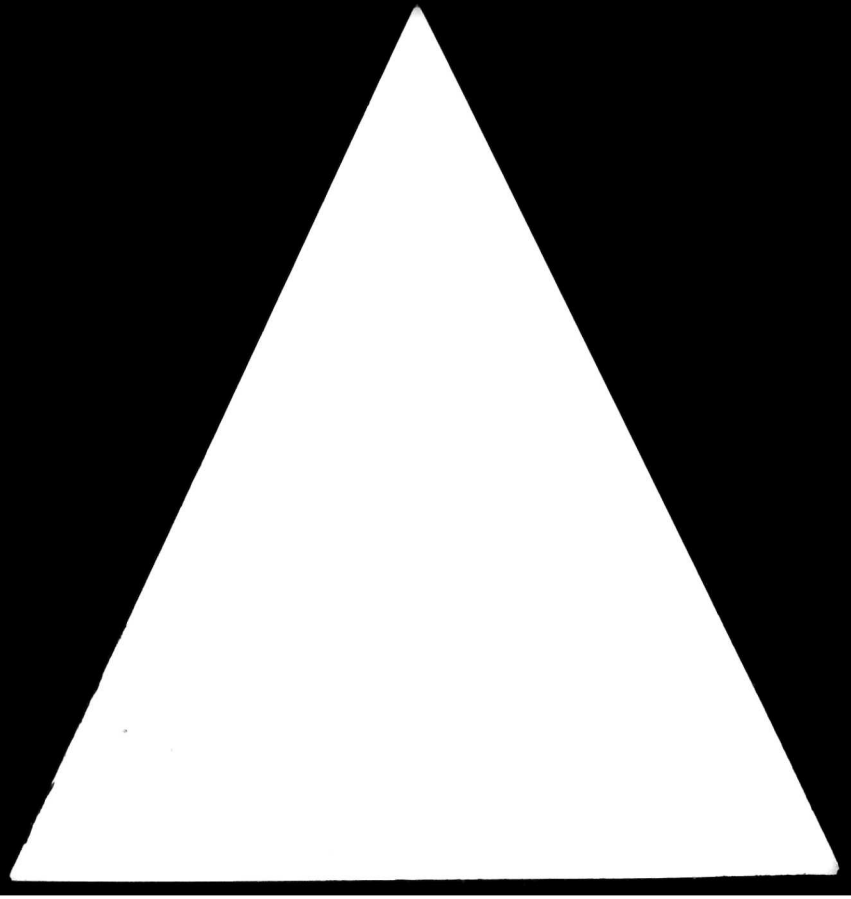
Sworn to and subscribed before me, this the 9 day of Sept 1907

Joe McHancock Ordinary.

Turner County Ga

John T. Marshall Witness.

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.



Snipes, P.

Clinch Co.

Inde yeut
OA for 1911

Confederate Soldier's Application.

UNDER ACT 1910.

County Clinch

Name P. Snipes

Company D 19th Ga

Regiment

Approved

J. W. LINDSEY,
Commissioner of Pensions.

CHAS. P. BYRD, State Printer, Atlanta.

10/20/10

Enrolled in Clerk's Office April 1911

Confederate Soldier's Application UNDER ACT 1910.

County Clinch

Name P. Simpson

Company A Co. 19th Ga

Regiment

Approved

J. W. LINDSEY, Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch County.

I, J. T. Dame Ordinary of said County, certify that I know the applicant P. Simpson for Pension is the person he represents himself to be and resides in said County. That I also know ——— she witness swearing to the service and A B Smith & J. T. Smith 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 Results of Clinch Co. shows that P Simpson and wife value for tax is in 1908 $ none for 1909 $ none for 1910 $ 25.00

Sworn under my hand and official seal of office this 5th day of Oct 1911

J. T. Dame Ordinary,
of Clinch County.

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words "You do solemnly swear that you will true answers make to each question asked you and the evidence you shall give shall be the whole truth; so help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary and certified by him.
4. If applicant has no property at all in his possession, use of control of self and wife, affidavits of freeholders unnecessary.

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,
Clinch County.

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

1. What is your name and where do you reside? (Give County and Post-office) P. Simpson Dixie Clinch Co. Homerville Ga.
2. How long and since when have you been a continuous resident citizen of this State? Since 1865
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? Yes in the Army
4. When and where, and in what Company and Regiment did you enlist? (Give the name and class of Service) Clinch Co. 1863 at Charleston in Capt. A. D. Lee's Co. 19th Regt
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) until Charleston was evacuated 1865
6. When and where was your Company and Regiment surrendered or discharged from the Service? Surrendered at Greensboro N.C. April 26 1865
7. Were you actually present with your Command when it was surrendered or discharged? Yes
8. If you were not actually present, state specifically and clearly where you were ———
9. a. Where was your Command when you left it? ———
   b. When did you leave the Command? ———
   c. For what cause did you leave? ———
   d. By whose authority did you leave? ———
   e. For how long was your leave granted? In what way? ———
   f. Why did you not return to your Command after leave expired? ———
   g. In what way were you prevented? ———
   h. What effort did you make to return? ———
   i. Were you captured during the war? No
   j. If so, when, and where? In what prison were you held and when were you released? ———
10. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value.) House hold & Kitchen furniture worth 25.00
11. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov., 1908. To whom and for what price? None
12. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemized list). House hold & Kitchen furniture worth about 25.00
13. What annual or monthly income or earnings of yourself and wife and the source derived have you? None except from about 1 acre
14. Are you drawing a pension of any amount from this State or the United States? No
15. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? None

Sworn to and subscribed before me, this the 5th day of Oct 1911

P. Simpson

J. T. Dame Ordinary
of Clinch County.

QUESTIONS FOR WITNESS

STATE OF GEORGIA.
Richmond County.

David Purse

of said State and County, being summoned as a witness in support of the application of P. Burges 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? David Purse 26 Rice Row Augusta Ga

2. How long and since when have you known P Burges the applicant? For more than 60 Years

3. Where does he now reside, and since when has he been a bona fide continuing resident in this State and how do you know? Richmond Co Ga Since 1873.

4. When, where and in what Company and Regiment did P Burges enlist during war from 1861 to 1865? (Give date and place) August 1863 Savannah Ga Co B 1st Ga Regt

5. How did you obtain your information of this Service? I was a member of Co B. 1st Ga Regt & know of my own knowledge

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) From August 1863 to April 26 1865

7. When and where was his Command surrendered or discharged (give date and place) April 26 1865. Greensboro N C.

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 26 1865 Where was his Command when he left it? Greensboro N C for what cause did he leave? By surrender

By whose authority did he leave Command Gen Johnston and how long was he granted leave? How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) I was a member of Co B 1st Ga Regt Know of my knowledge

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?

of County.

1. What property, if any, has been sold or given away by the applicant or his wife since 1 Nov 1908? (State if fully by items) None

2. When and to whom was it sold or given to? None

3. What was the price paid or stated to be paid? None

4. What relation to the party is applicant? None

5. What disposition was made of the proceeds of the sale? None

6. Was the disposition of this property made in good faith and full value? None or was it made to obtain a pension? None

Sworn to and subscribed before me, this the 12 day of Oct 1911.) P B Smith L. F. Smith

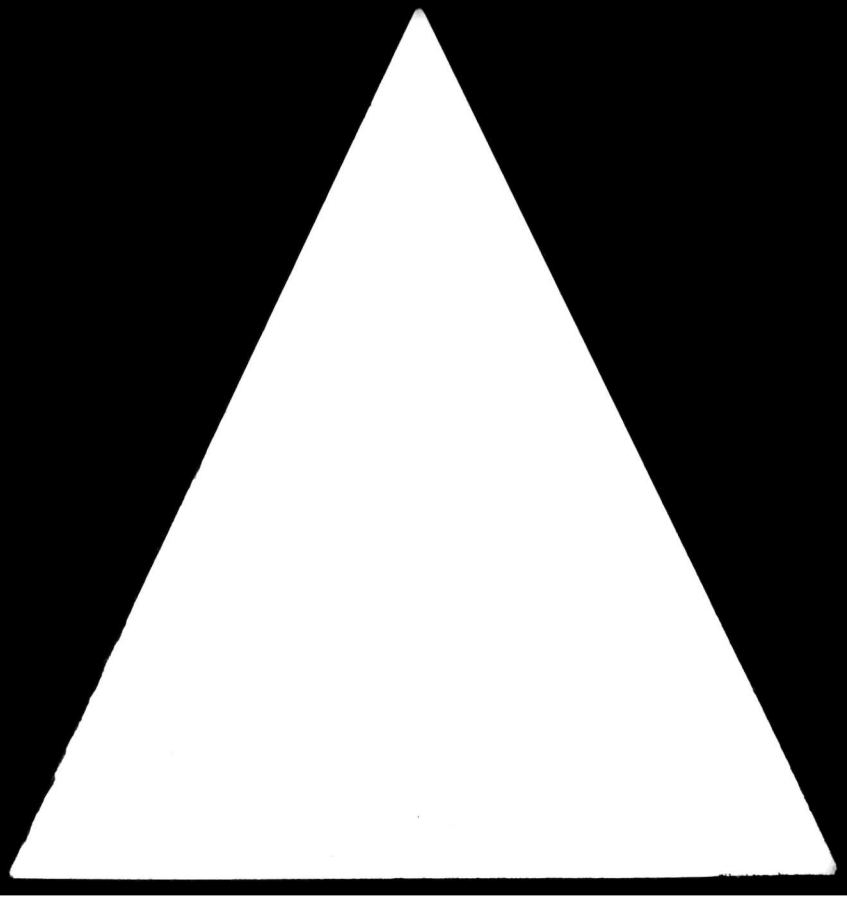
J. Roberts Ordinary.

of Richmond County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.
Richmond County.

I, Alexander R. Lawton Ordinary of said County, certify that I know David Purse the witness swearing to the foregoing affidavit, and that he is a resident of said County and was duly sworn by me before signing the foregoing affidavit and is a credible, truthful and trustworthy citizen and his statements are entitled to full faith and credit.



W. J. Stapleton, not found on C-5-7 (W. R.)

Pictures Ck -

OK for 1919
Stapleton. W. J.

Clerk No. 2181-182 County

Confederate

Soldier's Application.

UNDER ACT 1910.

2149

County Calvert

Name W. J. Stapleton

Company 6

Regiment 17 Va Inf

Approved

J. W. LINDSEY,
Commissioner of Pensions.

CHAS. P. BYRD, State Printer, Atlanta.

6/12/1918

W. J. Stapleton, not found on C-57 (W. R.)

Witness Ok -

OK for 1919

Stapleton - W. J.

Clinch No. 2181-182 County

65 M

Confederate

Soldier's Application.

UNDER ACT 1910.

Sol

249

County Clinch

Name W. J. Stapleton

Company 6

Regiment 57 Ga Inf

Approved

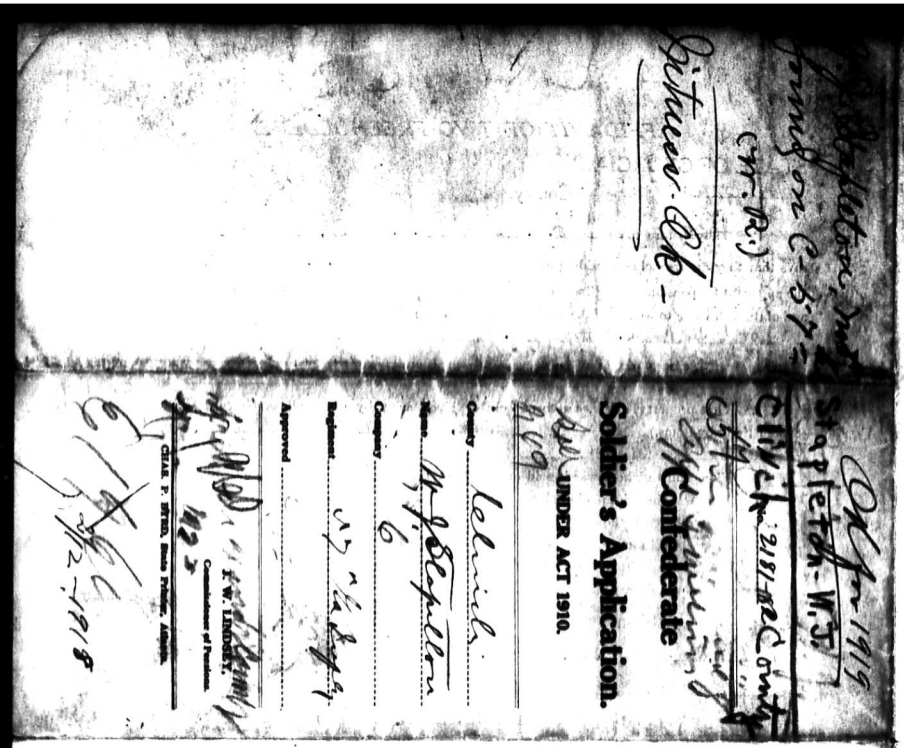
J. W. LINDSEY,
Commissioner of Pensions.

1923

CHAS. P. BYRD, State Printer, Atlanta.

E 1 4 6 L

2/12 - 1918


Confederate
Soldier's Application.
UNDER ACT 1910.
Clinch
Clinch
Clinch

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,
Laurnee. County.

W.B.Smith,Sr. of said State and County is hereby presented as a witness in support of the application of W.J.Stapleton. 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? W.B.Smith,Sr. Dublin,Ga.#183 Jackson.St.
2. How long and since when have you known W.J.Stapleton. the applicant? most all my life.
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? lives at DuPont,Ga. and has lived in the State all of his life.
4. When, where and in what Company and Regiment did Co-C-57th Reg. enlist during war from 1861 to 1865? (Give date and place) Johnson County,Nov 1st 1864.in the regular Army.
5. How did you obtain your information of this Service? serveing with him
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) Nov 1st 1864 untill the end of the War
7. When and where was his Command surrendered or discharged (give date and place) Rockhill,N.C.April 26th,1865.
8. Were you personally present at the Surrender? yes.
9. If not, where were you and how came you there?
10. Was the applicant personally present with his Command at surrender? yes.
11. If not where was he and how came him there?
12. When did he leave his Command? at surrender. Where was his Command when he left it? Hamburg,S.C. for what cause did he leave? payrolled. By whose authority did he leave Gen Joseph E.Johnson. and how long was he granted leave? for all time. How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) I served with him all the time.
13. In what way was he prevented from returning to his Command? How do you know?
14. What effort did he make to return to his Command and how do you know?
15. Was applicant captured as a prisoner If so, when and where? In what prison was he held? and when released

Sworn to and subscribed before me, this the 4th day of February 1918
E.D.White Ordinary,
of Laurnee County.

W.B.Smith

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.
CLINCH. County.

Personally before me comes J.B.Caan and L.L.DuPont. who on oath says that they are freeholders residing in said County and we know W.J.Stapleton. the applicant for pension and we know the property that is now in the use, possession and control of himself and of its cash value to wit: (Make List by items and value.)
1 Cow & Calf $40.2 Hogs $30.

1. What property, if any, has been sold or given away by the applicant since Nov. 4, 1908? (State it fully by items.) none.
2. When and to whom was it sold or given to?
3. What was the price paid or stated to be paid?
4. What relation is the party to applicant?
5. What disposition was made of the proceeds of the sale?
6. Was the disposition of this property made in good faith and full values? or was it made to obtain a pension?

Sworn to and subscribed before me, this the 28th. day of Jan. 191 8.
W.V.Musgrave Ordinary,
of CLINCH. County.

J.B.Caan R.F.D. #2
L.L.DuPont Real Estate

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch. County.

I, W.V.Musgrave. Ordinary of said County, certify that I know the applicant W.J.Stapleton for Pension is the person he represents himself to be and resides in said County. That I also know (see affidavit) the witness swearing to the service and J.B.Caan, 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 W.J.Stapleton. shows that his value for tax is in 1908 $ 1171. for 1909 $ 659. for 1910 $ 765. for 1911 $ 30. for 1912 $ Poll for 1913 $ Poll for 1914 $ Poll for 1915 $ Poll

Sworn under my hand and official seal of office this 28th. day of Jan 191 8.
W.V.Musgrave Ordinary,
of CLINCH. County.

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words "You do solemnly swear that you will true answers make to each question asked you and the evidence you shall give shall be the whole truth; so help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary and certified by him.
4. If applicant has no property at all in his possession, use or control of self affidavits of freeholders unnecessary.

Sworn to and subscribed before me, this the 4th day of February 1918 } W. B. Smith

E. D. White Ordinary,

of Lamar County.

OK approved 12/15 1897
Richd Johnson
Com of Pensions

ACT 24th October, 1892.

No. Taylor, John A.
Clinch Co.

SOLDIER'S PENSION

E 49 **1896.** 1897

Name John A. Taylor

County Clinch

Disability Disease physical disability

Amount, $ 50

1896.

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

1/22 97 6/6/97

Pensions Dept 3/22 1897
The witnesses are requested to say whether applicant when he enlisted was a sound & healthy man - How long had he been in service before he became diseased - & whether his present infirmities are traceable directly to the service - & that alone -
Richd Johnson
Com of Pensions

Form 5.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, John A. Taylor hereby authorize Wm A. Wright Co. of Atlanta Georgia to receive and receipt for the pension allowed and request that he remit same to John A. Taylor by Express at Stockton Ga. at Stockton Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 26th day of September 1896.

John A. Taylor [L. S.]

Executed in presence of:
T. McMillan
George Cornelius
Ordinary

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I John A. Taylor hereby authorize W. A. Wright & Co.
of Atlanta Georgia to receive and receipt for the pension allowed and
request that he remit same to John A. Taylor
by Express at Stockton Ga
IN WITNESS WHEREOF, I have herunto set my hand and seal, this 26th
day of September 1896.

John A. Taylor [L. S.]

Executed in presence of:
T. McMillan
George Saunders
Ordinary

Form 1.

For Use of Applicants Who have Not Heretofore Drawn.

STATE OF GEORGIA,
Clinch County.

PERSONALLY appears John A. Taylor of Clinch
County, State of Georgia, who being duly sworn says on oath that he was born on the 26th
day of January 1844, that he is a bona fide citizen and resident of Georgia, and
has been continuously since the 26th day of January 1844,
that he enlisted in the military service of the Confederate States (or the State of
) during the war between the States, and served as a
Private in Company E of 29th Regiment
of Georgia Volunteers, Clayton Brigade; that whilst engaged in
such military service, and in line of duty in the State of South Carolina on the
day of April 1862, he was disabled or wounded as follows:
He was discharged from service on the account
of General disability caused from exposure while
in the Confederate Service.
He was honorably discharged on the 20th
day of December 1862 & is still living, & has
been unable for duty or myself since from
the day of discharge.

Deponent desires to participate in the benefits of the Act approved October 24th, 1887, and the Acts amendatory thereof, and makes application for the allowance to which he is entitled for the year thereunder, ending October 26th, 1896.

Sworn to and subscribed before me, this the 24th day of July 1896.

John A. Taylor

George Saunders
Ordinary.

NOTE—State fully nature, character or character of disease which causes the disability, and explain particularly the extent of the disability. If wound is received in action, give full and accurate history of disease, tracing it directly to the service.
NOTE—Do not write in the margin or between lines which do not belong to them.
NOTE—The Ordinary will see that all blank spaces are filled when the affidavits are signed.

The Instructions, as set out in the Notes, MUST be observed.

Form 3524 3/22/97
The witness or witnesses to any matter affidavit must be at whose house he resides, and must be known to be in error before he became disabled directly to the service.
Rich Johnson
Jam. D. Pinson

ACT 24th October 1887
Taylor's Pension Co.
Atlanta Ga.
SOLDIER'S PENSION
Aug 1896. 18 97
Name John A. Taylor
County Clinch
Disability Physical disability
Amount $12
1896.
RICHARD JOHNSON,
Attorney Examining Department.
PERMIT HANDED TO
U.S. GOVERNMENT PRINTING OFFICE.
12297

Form 9

AFFIDAVIT FOR WITNESSES.

STATE OF GEORGIA.
Wilcox County.

PERSONALLY appears before me, the undersigned, Ordinary in and for said County, W M Gibbs
Henry A Lawson & Jacob M Smith

and ——— each of whom, being duly sworn according to law, severally say, under oath, that they are personally well acquainted with ———
J A Taylor whose application is herewith presented for a pension, that he served in Company E of the 49th Regiment of Thomas Brigade, and from our personal knowledge he was injured by the service as follows: (*give full statement, and tell in your own language when and how the injury happened, and how badly applicant is disabled from work. If he does any labor, or can do any, state what.*)

First Measles at Goldsborough N.C. and from exposure it settled on his lungs & Bladder & Spinal parts causing Blood to flow profusely & his urine all the time is more or less bloody and on Dec 20th 1862 he was Honorably discharged from General disability and he still continues in the disabilitated state as when he was discharged & has never been able to labor to make support since he was in Service & We have helped all along since he came out of Service all of which was caused while in the Confederate Service. We also State that the applicant John A Taylor at the time of Enlistment was a Sound & healthy man & that he did Service about Two months as Private Co E 49th Reg Ga Vol Thomas Brigade

We personally know above stated facts. We were with him in the army and have known him ever since. He was honorably discharged or retired from the service on 20th day of Dec 1862. Applicant is permanently disabled as stated and has been so to our certain knowledge ever since 1862. We have no interest in the recovery of a pension by him.

Sworn to and subscribed before me, this 7th day of July 1896.
Benj F. Blasingame Ordinary. W M Gibbs
H A Lawson
J M Smith

NOTE 1.—The Ordinary will see that the full text of the Affidavit is understood by the witnesses, and that they are legally qualified to the same.
2. Witnesses are asked to make their statements full and explicit.
3. All blank spaces *must* be filled when signed.

Form 8

PHYSICIANS' AFFIDAVIT.

STATE OF GEORGIA,
Clinch County.

PERSONALLY comes before me George Lowndes Ordinary of said County, J Frank Hall and W J Stapleton, both known to me as reputable physicians of said county, who being severally sworn, say on oath, that they have carefully examined J Olin A Taylor and after such personal examination, say that the present condition of applicant is as follows: Hepatitis Rheumatism Bronchitis Asthma Lobar Pneumonia Heart Disease Chronic Diarrhoea Dyspepsia Piles Kidney Disease Malaria Fever Nervousness Debility Locomotor Ataxia Paralysis Epilepsy Insanity Consumption Catarrh Neuralgia Blood Poison Skin Disease Female Weakness Rupture Varicocele Hydrocele Stricture Syphilis Gonorrhoea Gleet Impotency Sterility Nothing to speak on hope Jan in every respect has not been any on part two J. Heart and that said condition is permanent. Nothing to speak on hope Jan in every

We further say that said condition arises from the following facts: cold & exposure during his campaign in the late war

We have treated applicant professionally for 6 or 5 years, and his condition, as above stated, does not arise from any hereditary or congenital cause, nor from any vicious or intemperate habits.

Sworn to and subscribed before me, this 26th day of September 1896.
George Lowndes Ordinary.
J. W. Frank Hall. M.D.
W. J. Stapleton. M.D.

NOTE 1.—The physicians will state fully the extent of the wound, and then give facts to show the extent of the disability resulting therefrom.
NOTE 2.—If claim is for disability resulting from disease, state *how* the disease is *known* to result from the service as a soldier. Also state how long physicians have known and treated applicant.
NOTE 3.—The physicians will be careful to fill every blank space in oath.

Form 4.

STATE OF GEORGIA,
Clinch County.

I, George Lowndes, Ordinary of said County, do certify that I am well acquainted with John A Taylor the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, *and he is disabled, as he claims*, and I know he is the individual he represents himself to be, and that he resides in this County. I also certify that the foregoing witnesses, to-wit: W M Gibbs, H A Lawson, and J M Smith are persons of respectability, that their statements are worthy of full credit and belief and that the full text of the affidavit was read to and understood by them before they signed the same.

Given under my official signature and seal this 26th day of September 1896.
George Lowndes
Ordinary Clinch County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, John A. Taylor hereby authorize Wm A. Wright Comp Gen of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to John A. Taylor by Mail, in care of Ordinary at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 17th day of January 1898.

John A. Taylor [L. S.]

Executed in presence of
W. J. Taylor
Geo. Combes
Ordinary

Complete & forward with other like 2 Jany 1898
Taylor, John A.

ACT OF 24 OCT. 1887.
(For Those Already Enrolled.)
Clinch Co.
No. 1836

INVALID
SOLDIER'S PENSION.
1898.

Name John A. Taylor
County Clinch
Disability Disease
Amount, $ 50.00
2/15 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
Nav

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, John A. Taylor hereby authorize Wm A. Wright Comp Gen of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to Ordinary by Mail at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 9th day of January 1899.

John A. Taylor [L. S.]

Executed in presence of
J. G. Griffis
Geo. Combes
Ordinary

Taylor, John A.
Clinch County

CODE SECTION 1250.
(For Those Already Enrolled.)
No. 907

INVALID
SOLDIER'S PENSION.
1899.

Name John A. Taylor
County Clinch
Disability Disability caused
Amount, $ 50 Day old Expo
2/15 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
Wm

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears John A Taylor of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 26th day of January 1866; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a private in Company C, of 42th Regiment of Georgia Volunteers, Thomas's Brigade; that whilst engaged in such military service in the State of North Carolina on the _____ day of about May 1862, he was wounded, injured or diseased as follows:

that said Soldier while with his command at Gaileshoro N C was taken sick with measles, then followed with Kidney trouble and Chronic affection, and Asthma

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

Sworn to and subscribed before me, this, the 17th day of January 1898. } John A Taylor POST-OFFICE _____

George Lovedenia Ordinary

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

STATE OF GEORGIA,
Clinch County.

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

Given under my official signature and seal, this 17th day of January 1898.

Affix your seal here.

George Lovedenia
Ordinary Clinch County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears John A Taylor of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 26th day of January 1866; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a private in Company C, of 42th Regiment of Georgia Volunteers, Thomas's Brigade; that whilst engaged in such military service in the State of North Carolina, on the _____ day of April 1862, he was wounded, injured or diseased as follows:

Said Soldier was discharged from service on account of general Debility caused from exposure while with the confederate Service he was Honorably discharged on the 20th day of December 1862. & is still Living.

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1899. I have heretofore under said law as a resident of Clinch County been allowed an invalid pension of $50.00 Dollars, for the year 1898.

Sworn to and subscribed before me, this, the 9th day of January 1899. } John A Taylor POST-OFFICE Stockton Ga

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

STATE OF GEORGIA,
Clinch County.

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

Given under my official signature and seal, this 9th day of January 1899.

Affix your seal here

George Lovedenia
Ordinary Clinch County.

POWER OF ATTORNEY

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, John A. Taylor hereby authorize Wm A. Wright Comp. Gen. of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to John A. Taylor in care of Ordinary by Express at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 13th day of January 1900.

John A. Taylor [L. S.]

Executed in presence of
O. W. Griffin
George Cornelius
Ordinary

Taylor, John A.
Clinch Co. F
CODE SECTION 1290.
(For Those Already Enrolled.)
No. 3034

INVALID
SOLDIER'S PENSION.
1900.

Name John A. Taylor
County Clinch
Disability General Disability
Amount, $ 50
Warrant issued Mar 13 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Wright
Geo. W. Harrison, State Printer, Atlanta.
No date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I John A. Taylor hereby authorize Wm A. Wright Compt Gen of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to John A. Taylor by Mail, in care Ordinary at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 22nd day of December 1900.

John A. Taylor [L. S.]

Executed in presence of
George Cornelius
Ordinary

Taylor, John A.
Clinch Co.
CODE SECTION 1290
(For Those Already Enrolled.)
No. 1436

DISABLED
SOLDIER'S PENSION.
1901.

Name John A. Taylor
County Clinch
Disability Physical disability
Amount, $ 50
Jan 14 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Wright
Geo. W. Harrison, State Printer, Atlanta.
1/2/1901
No date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears John A Taylor of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State and County, and has resided therein continuously ever since the 26th day of January 1838; that he enlisted in the military service of the Confederate States (~~or of the State of~~) during the war between the States, and served as a Private in Company E, of 49th Regiment of Georgia Volunteers, Thomas's Brigade; that whilst engaged in such military service in the State of North Carolina on the day of April 1862, he was wounded, injured or diseased as follows:

he was disabled as follows
he was discharged from Service
on the account General Disability
caused from Exposure while in
the confederate Service he was honorably
discharged on the 20th day of December 1862
and is Still Living

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1900, I have heretofore under said law as a resident of Clinch County been allowed an invalid pension of fifty Dollars, for the year 1899.

Sworn to and subscribed before me, this, the 13th day of January 1900. John A Taylor POST OFFICE Stockton Ga

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

STATE OF GEORGIA,
County.

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

Given under my official signature and seal, this 15th day of January 1900.

Affix your seal here.

George Cornelius
Ordinary Clinch County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears ..... of ..... County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 26th day of January 1834; that he enlisted in the military service of the Confederate States (or of the State of .....) during the war between the States, and served as a private in Company E, of 49th Regiment of Georgia Volunteers, Thomas's Brigade; that whilst engaged in such military service in the State of North Carolina, on the ..... day of April 1862, he was wounded, injured or diseased as follows:

he was discharged from Service on account
General Disability caused from Exposure
while in the Confederate Service
was Honorably discharged on 20th day of December
1862 is Still Living and has never been able
to do manual Labor

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

Sworn to and subscribed before me, this the 22nd day of December ~~1901~~ 1900. John A Taylor Postoffice Stockton Ga

George Cornelius Ordinary

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

STATE OF GEORGIA,
County.

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

Given under my official signature and seal, this 22nd day of December ~~1901~~ 1900.

Affix your seal here.

George Cornelius
Ordinary Clinch County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, John A. Taylor hereby authorize W. A. Wright of Fulton, Co. Ga.
to receive and receipt for the pension paid hereon and request that he remit same to W. T. Howell by mail
at Homerville Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 13
day of June 1902.

John A. Taylor [L. S.]

Executed in presence of
W. T. Howell

Taylor, John A.
Clinch County

CODE SECTION 1250.
(FOR THOSE ALREADY ENROLLED.)

No. 2727

DISABLED
SOLDIER'S PENSION
1902.

Name Jas A. Taylor
County Clinch
Co. E Regiment 49
Disability
Amount, $ 50.
3/24 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Br

Gen. W. Harrison, State Printer, Atlanta.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, John A. Taylor hereby authorize W. A. Right of Fulton County Ga
to receive and receipt for the pension paid hereon and request that he remit same to mail by Check or Draft
at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 20
day of January 1903.

John A. Taylor [L. S.]

Executed in presence of
E. M. Hatcher

Taylor John A.
Clinch Co.

CODE SECTION 1250.
(FOR THOSE ALREADY ENROLLED.)

No. 2789

DISABLED
SOLDIER'S PENSION
1903.

Name John A. Taylor
County Clinch
Co. E 49 Regiment
Disability
Amount, $ 50
3/24 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Br

Gen. W. Harrison State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County.

Personally appears John A. Taylor of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 26 day of June 1855; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company E, of 42 th Regiment of Georgia Volunteers, Thomas's Brigade; that whilst engaged in such military service in the State of North Carolina on the ____ day of April 1862, he was wounded, injured or diseased as follows:

He was discharged from service on the account of General Disability caused from exposure while in the Confederate service. He was honorably discharged on the 20 day of Dec. 1862. Is still living and has never been able to do manual labor since his discharge

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

Sworn to and subscribed before me, this the 18 day of June 1902. John A. Taylor, Post-office Stockton, Ga.

W. T. Howell Ord

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

STATE OF GEORGIA,
Clinch County.

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

Given under my official signature and seal, this 13 day of June 1902.

W. T. Howell
Ordinary Clinch County.

Affix your seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County.

Personally appears John A Taylor of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the year day of ____ 1844; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company E, of 42 th Regiment of Georgia Volunteers, Thomas's Brigade; that whilst engaged in such military service in the State of North Carolina on the ____ day of April 1862, he was wounded, injured or diseased as follows:

He was discharged from service on the account of general disability caused from exposure while in the Confederate service and setting in his back and affected his kidneys and have pain there ever since he rode about on all a month

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

Sworn to and subscribed before me, this the 20 day of June 1903. John A. Taylor, Post-office Stockton Ga.

W. T. Howell Ord

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

STATE OF GEORGIA,
Clinch County.

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

Given under my official signature and seal, this 20 day of Jan 1903.

W T Howell
Ordinary Clinch County.

Affix your seal here

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

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

NOTE.—All vouchers and affidavits must bear date after January 1, 1908.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
Clinch COUNTY. }

I, J. M. Thomas hereby authorize
Wm A Wright comp gen of Atlanta ga
to receive and receipt for the pension allowed and request that he remit same to J. M. Thomas
at Homerville by Mail
in care of ordinary ga

Witness my hand and seal this 14th day of Feb 1898.

Executed in presence of
W. B. Nanth } J. M. Thomas his mark [L.S.]
George Cornelius ordinary

Thomas J. M.
Clinch G.
No. 2972

INDIGENT PENSION
1898.

Name J. M. Thomas
County Clinch
Approved 5/4 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
WAW

SEO. W. HARRISON, STATE PRINTER, ATLANTA.

2/15/1898

POWER OF ATTORNEY.

STATE OF GEORGIA, }
Clinch COUNTY. }

I, J. M. Thomas hereby authorize
Wm A. Wright comp. gen. of Atlanta Ga
to receive and receipt for the pension allowed and request that he remit same to J. M. Thomas
at Homerville by Mail
in care of Ordinary

Witness my hand and seal this 14th day of Feb 1898.

Executed in presence of
W. B. Nanth } J. M. Thomas [L.S.]
Geo. Connelius
Ordinary

Every Question MUST be Answered

Questions for Applicant.

STATE OF GEORGIA,
Clinch County.

J. M. Thomas of said State and County, desiring to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (give State, County and post office.)
J. M. Thomas, Dupont, Clinch Co. Ga.
2. How long and since when have you been a resident of this State?
72 yrs. - since Feb 22 1826
3. When and where were you born? Feb 22. 1826
4. When and where and in what company and regiment did you enlist or serve?
Enlisted in June 1862, at Savannah, Ga. in C. S. 1st Bat. Ga. sharp shooters
5. How long did you remain in such company and regiment? until the war closed
6. For how long a period did you discharge regular military duty? about 2 yrs & 6 mos.
7. When, where and under what circumstances were you discharged from service?
1865 after war closed
8. What is your present occupation? Common laborer when able to work
9. How much can you earn (gross) per annum by your own exertions or labor? about $25.00
10. What has been your occupation since 1865? Common laborer
11. Upon which of the following grounds do you base your application for pension, viz: first "age and poverty," second "infirmity and poverty" or third "blindness and poverty"? Age & poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight?
about 12 or 13 yrs. since I have been able to support myself by labor
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, 1896 and 1897 and what disposition, if any, did you make of same?
None
15. In what County did you reside during those years and what property did you then return for taxation?
In Clinch County, Returned no property for taxes
16. How were you supported during the years 1896 and 1897? I worked on turpentine farm when able to work. & the balance was aided by my sons
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 $100. I contributed about $25.00
18. What was your employment during 1896 and 1897? What pay did you receive in each year?
Common labor when able to work. Rec'd in promises about 25 per annum - received no money
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead?
Wife & one daughter, who is a cripple - Their means of sup. is their labor - Thy own no homestead
20. Are you receiving any pension, if so, what amount and for what disability?
No

Sworn to and subscribed before me this the 7 day of February 1898.
J. M. his X mark Thomas Applicant.
Geo. Connelius Ordinary.
Clinch County.

Thomas J. M.
Clinch G.
No. 1972

INDIGENT PENSION
1898.

Name J. M. Thomas
County Clinch
Approved 5/9 1898.
RICHARD JOHNSON, Commissioner of Pensions.
WARRANT HANDED TO

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Ware County.

W. R. Thomas, of said State and County, having been presented as a witness in support of the application of J M Thomas for pension under the Act approved December 15th, 1894, and after being duly sworn true answer to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? W.R. Thomas, Manor, Ware Co. Ga.

2. Are you acquainted with J M Thomas, the applicant, if so how long have you known him? all my life

3. Where does he reside, and how long and since when has he been a resident of this State? He resides in Clinch County. Has resided in Ga. all his life

4. When, where and in what company and regiment did he enlist, and how do you know? I know that he enlisted in 1862 Do not know the Co. or Reg.

5. Were you a member of the same company and regiment? no

6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? about 2 yrs & 6 mos. He remained until the war closed in 1865

7. What property, effects or income has the applicant? (Give your means of knowledge.) none

8. What property, effects or income did the applicant possess in 1896 and 1897, and what disposition, if any, did he make of same? none

9. Has he conveyed away any of his property in the last three years, if so, what was it and to whom? none

10. What is the applicant's occupation and physical condition? Common labor, when able to work. He is very feeble from age

11. Is the applicant unable to support himself by labor of any sort, if so, why? yes, on account of his age

12. How was he supported during the years 1896 and 1897? By what little work he could do assisted by his son

13. What portion of his support for these two years was derived from his own labor or income? Do not know exactly, by very little. not over $25.00

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 very feeble caused from age

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

Sworn to and subscribed before me, this the 7 day of Feby 1898.

W. R. his + Thomas mark. Witness.

Warren Lott Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Clinch County.

Personally came before me W. J. Stapleton M.D. and L. C. Mattox 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. M. Thomas, applicant for pension under the Act of 1894, and after such personal examination say that his precise physical condition is as follows:

we find applicant suffering from old age & gravity also a kidney trouble contracted while in the army & gives him trouble & agony untold at times rendering him unable to preform labor of any kind whatever

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 14th day of February 1898.

W. J. Stapleton, M.D.
L. C. Mattox M.D.

George Cornelius Ordinary.

ORDINARYS' CERTIFICATE.

STATE OF GEORGIA,
Clinch County.

I, George Cornelius, Ordinary in and for said County, hereby certify that the applicant J M Thomas resides in said County, and has been a bona fide resident of this State since the 4th day of March, 1894 and that the witnesses, viz.:

are of trust worthy character and that their statements are entitled to full faith and credit.

I further certify that before answering the forgoing 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 1896 0 Dollars of property, and in 1897 0 Dollars of property.

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

Witness my hand and seal of office, this 14th day of Feb 1898

George Cornelius Ordinary of Clinch County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, J M Thomas, hereby authorize Wm A Wright Comp Sec of Atlanta ga 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 2nd day of January 1899.

Executed in presence of
W R Findley
George Cornelius Ord

J. M. Thomas (L. S.)

Thomas, J. M.
Clinch County

CODE SEC. 1254.
(For These Already Enrolled.)

No. 1968

INDIGENT
SOLDIER'S PENSION,
1899.

Name J M Thomas
County Clinch

WARRANT ISSUED
1/17 1899

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
W C W

Geo. W. Harrison, State Printer, Atlanta.

No date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, J M Thomas hereby authorize Wm A Wright Comp Sec of Atlanta ga to receive and receipt for the pension allowed, and request that he remit same to J M Thomas in care of Ordinary at Homerville ga by Express

Witness my hand and seal, this 8th day of January 1900.

J M his Thomas mark [L. S.]

Executed in presence of

George Cornelius
Ordinary

Thomas, J. M.
Clinch G.

CODE SEC. 1254.
(For These Already Enrolled.)

NO. 2023

INDIGENT
SOLDIER'S PENSION,
1900.

Name J M Thomas
County Clinch

WARRANT ISSUED
January 25 1900.

JOHN. W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Wright

Geo. W. Harrison, State Printer, Atlanta.

No date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Elinch County.

Personally appears J. M. Thomas of Elinch 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 1861; that he is 73 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 four years in Company B, of 1st Battalion ~~the Regiment of~~ Georgia Volunteers Sharp Shooters; that his physical condition is as follows: Old age and poverty rendering him unable to Earn a living for himself

that his property consists of the following items No property of any Kind

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 1899. I have heretofore as a resident of Elinch county been allowed a pension for the year 189 8

Sworn to and subscribed before me, this the 2nd day of January 1899. J. M. Thomas his mark

George Cornelius Ordinary.

State of Georgia,
Elinch County.

I, George Cornelius Ordinary of said County, do certify that I am well acquainted with J. M. Thomas 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 January 1899.

Affix your seal here.

George Cornelius
Ordinary Elinch County.

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

For Applicants Heretofore Allowed Pensions.

Co. B. 1st Battn. Ga. Sharp Shooters

STATE OF GEORGIA,
Elinch **County.**

Personally appears J M Thomas of Elinch **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** 2nd **day of** March 1862; **that he is** 75 **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** ____, **of** ~~the Regiment of~~ Sharp Shooters Capt Hartrick; **that his physical condition is as follows:** Poverty and Infirmity

that his property consists of the following items 0 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 1900. I have heretofore as a resident of Elinch county been allowed a pension for the year 189 9

Sworn to and subscribed before me, this the 8th day of January 1900. J. M. Thomas his mark

George Cornelius Ordinary.

State of Georgia,
Elinch County.

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

Given under my official signature and seal, this 8th day of January 1900.

Affix your seal here.

George Cornelius
Ordinary Elinch County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, J. M. Thomas hereby authorize Wm A. Wright Comp gen of Atlanta Ga to receive and receipt for the pension allowed and request that he remit same to J. M. Thomas in con of ordinary at Homerville Ga by express

Witness my hand and seal, this 17th day of Dec 1900 ~~1901~~.

J. M. Thomas [L. S.]
Mark

Executed in presence of

George [illegible]

Thomas J. M.
Clinch Co

CODE SECTION 1254
(For Those Already Enrolled.)

No. 104

INDIGENT
SOLDIER'S PENSION.
1901.

Name J. M. Thomas
County Clinch

WARRANT ISSUED
Jan 4th 1901.

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT HANDED TO
Wright

Geo. W. Harrison, State Printer, Atlanta
12/1901

No date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, ~~J. M. Thomas~~ hereby authorize W. A. Wright of Fulton Co. Ga to receive and receipt for the pension allowed and request that he remit same to W. T. Howell at Homerville Ga by mail

Witness my hand and seal, this 8 day of June 1902.

J. M. Thomas [L. S.]
Mark

Executed in presence of

Clinch Co.
Thomas, J. M.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 5134

INDIGENT
SOLDIER'S PENSION
1902.

Name J. M. Thomas
County Clinch
Co. B Regiment 1st Batt

WARRANT ISSUED
Shorthorter
1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Wright

Geo. W. Harrison, State Printer, Atlanta.

No date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County

Personally appears J M Thomas 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 January 1890; that he is 76 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (~~or of the State of~~) during the war between the States, and served for the term of 3 years in Company B 1st Sharp Shooters, of th Regiment of Georgia Vols; that his physical condition is as follows: Old age and Infirmity + poverty

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 17th day of December 1900 ~~1901~~.

J M Thomas + Mark

George Cornelius Ordinary.

STATE OF GEORGIA,
Clinch County.

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

Given under my official signature and seal, this 17th day of December 1900 ~~1901~~.

Affix your seal here

George Cornelius
Ordinary Clinch County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County.

Personally appears J. M. Thomas of Clinch County, State of Geoogia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 22 day of Feb 1876; that he is 76 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 years in Company B, of 1st Battalion of Georgia Sharp Shooters that his physical condition is as follows:

Old age and poverty not able to earn a living

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 and other years

Sworn to and subscribed before me, this the 8 day of Jan. 1902.

J — M. Thomas Link mark

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

Given under my official signature and seal, this 8 day of Jan 1902.

Affix your seal here

W. L. Howell
Ordinary Clinch County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, J. M. Thomas hereby authorize W. H. Wright of Fulton Co., Ga. to receive and receipt for the pension allowed and request that he remit same to W. T. Howell at Homeville, Ga. by mail

Witness my hand and seal, this 15 day of January 1903.

J. M. Thomas [L.S.]
his work

Executed in presence of
W. T. Howell

Thomas J. M. Clinch
Dec. 1 Sept
reprinted by Sprang
Oct Fenn

CODE SECTION 1254.

(FOR THOSE ALREADY ENROLLED.)

No.

INDIGENT
SOLDIER'S PENSION
1903.

Name J. M. Thomas
County Clinch
Co. Regiment

WARRANT ISSUED
3/24 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
W

Geo. Harrison, State Printer, Atlanta.

5

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County.

Personally appears J. M. Thomas 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 22 day of Feb 18[illegible]; that he is 57 years old and by occupation none formed, 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 four years in Company B, of [illegible] of First Battalion Ga. Sharpshooters that his physical condition is as follows: he is old and infirm and unable to work infinity and poverty

that his property consists of the following items: nothing

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 15 day of January 1903.
W. T. Howell Ordinary.

his
J. M. X Thomas
mark

STATE OF GEORGIA,
Clinch County.

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

Given under my official signature and seal, this 15 day of January 1903.

Affix your Seal here

W. T. Howell
Ordinary Clinch County.

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

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

PENSION OFFICE,

Atlanta, Ga. 3/12 1903

To J. W. Thomas
Clinch County Ga.

SIR:

You are hereby notified to furnish to this office on or by the 15th day of April 1903, sufficient competent evidence, why you should not be stricken from the Indigent Pension Roll of Clinch County, for cause stated below, preferred against you by Grand Jury

This evidence must be first-class, made before Ordinary of your County, clearly and distinctly showing, beyond doubt, your right to this Pension under the law.

Charge - Is "That you were a deserter from of the confederate army. - No man should be on Ga Pension Roll who record as a Soldier is tainted even with the Charge of desertion - or who was not faith - fall to the end of the Struggle - Must clearly & fully remove this Charge

J. W. Lindsey
Comm of Pension

Homerville Ga Nov 8th 1902

We the Committee appointed by the Grand Jury of the October Term of Court of Clinch County Georgia 1902 to purge the pension list. beg to make the following report.

We find that J. M. McLendon on the list of Invalid and disabled soldiers is dead.

We find on same list C. M. - Patterson does not live in this County but in Putnam County Georgia.

We find that J. M. Thomas on the list of Indigent soldiers was a Deserter for a considerable time during the War

P. McK. Williams
W. H. Hinson
S. B. Tomlinson
Lyman Smith
T. J. Strange
} Committee

Georgia Clinch County

I do hereby certify that the above and foregoing is a true copy of report of said Committee. given under my hand and seal of office this Nov 8th 1902.

S. W. Register
Clerk S. C. C. C.

Rec'd Dickerson Clk Ordinary's Court

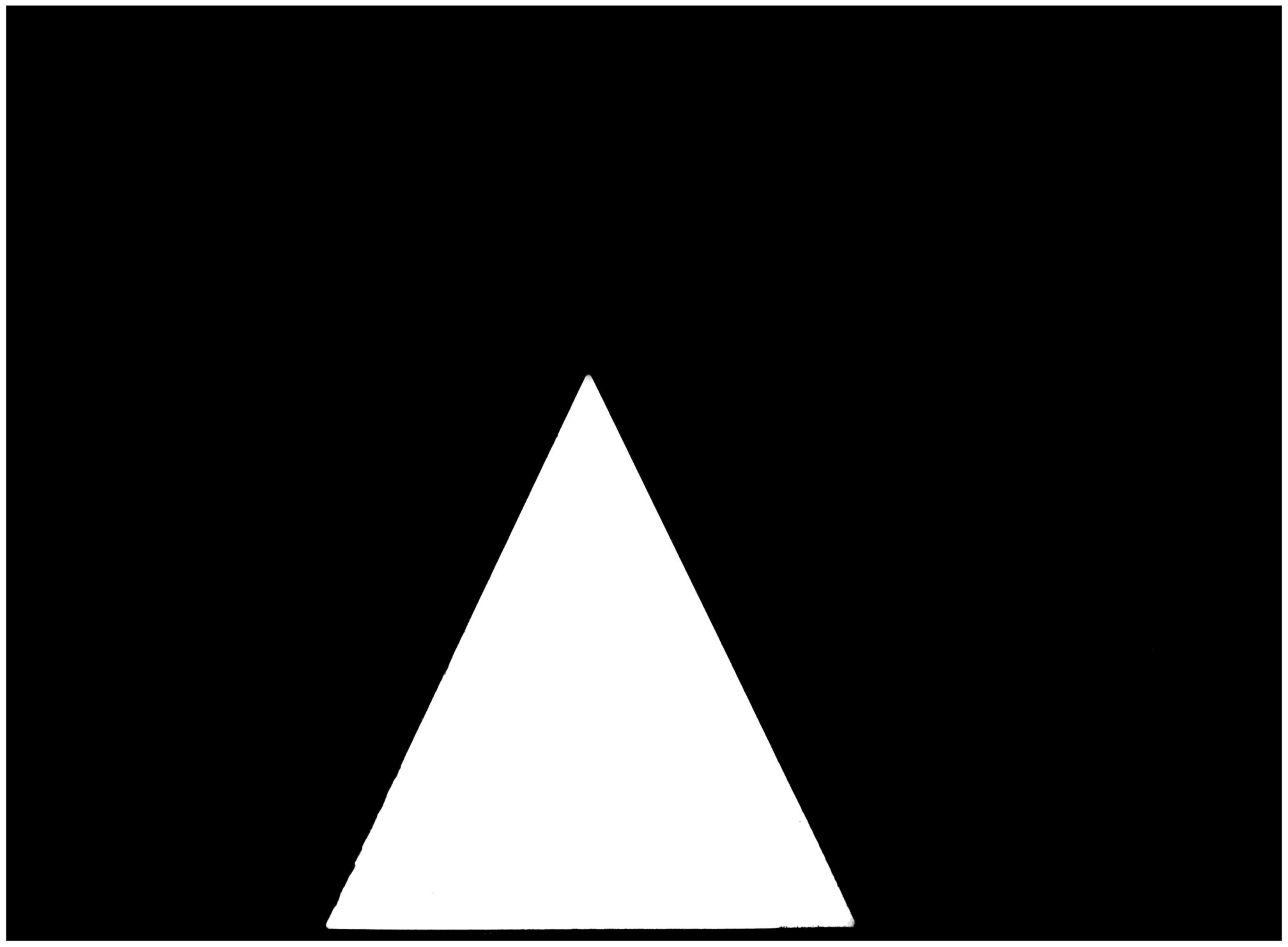
I certify that I am Clerk of the Ordinary's Court for Clinch County and that C. M. Patterson was duly transferred from Putnam to Clinch County as a pensioner and that he now resides at Dover in said County and I find this out after the Committee has made this report. [illegible]

Applicant has made no answer to the charge of desertion made against him by grand Jury — It is ordered that the name of J M Thomas be stricken from the Indigent Pension Rolls of Lehigh County & no further Pension be paid to him —

4/29-1903

J O Lindsey
Comm of Pension

1903
Lehigh Co
J M Thomas
Attorney 4/15/1903



POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, William Madersow Thomas hereby authorize Wm A Wright Comp Gen of Atlanta Ga to receive and receipt for the pension allowed and request that he remit same to William M Thomas at Homersville Ga by Express

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

Executed in presence of
P C Crowly
George Cornelius
C Lee Mary

Wm M his X mark Thomas

Thomas William M.
No. 366
Clinch G.

INDIGENT PENSION

1895.

Name Wm M Thomas

County Clinch

Ground Cap

Jany 1st 1896

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO

Atty.

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, William Madison Thomas hereby authorize Wm A Wright Comp Gen of Atlanta Ga to receive and receipt for the pension allowed and request that he remit same to William M Thomas at Homerville Ga by Express

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

Executed in presence of
P C Cooley
George Carmichael
C P Clinch County

William M Thomas
his mark

INDIGENT PENSION
1895.

Name William M. Thomas
County Clinch
Ground Age
Jany 1st 1896

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO
Atty.

Geo. W. Harrison, State Printer, Atlanta.

Thomas, William M.
No. 36
Clinch Co.

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,
Clinch County.

Capt. Ausbanker's Regt. (Harris's) Company Georgia Militia

William Madison Thomas of said State and County, desiring to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (give State, County and post office)
William Madison Thomas Sanders Clinch county Georgia
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State?
Two years same place. In State all my life
3. When and where were you born? In Tatnall Co. Ga. Oct. 18. 1822.
4. Did you volunteer in the Confederate Army or in the Georgia Militia? Yes
5. When and where did you enlist? In Coffee Co. Ga. 1862
6. In what company and regiment did you enlist? Dont know co or Regiment but Daniel Madison was my captain and John S. Wall 1st Lieutenant Co. Billy Colonel
7. How long did you remain in that company and regiment? About two years 1862
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? was never discharged or transfered

9. For how long a period did you discharge regular military duty? about two years
10. When, where and under what circumstances were you discharged from service?
was never regularly discharged but the company disbanded when the war ended
11. What is your present occupation? Farming last camp do any thing much now
12. How much can you earn per annum by your own exertions or labor? nothing much if any
13. What has been your occupation since 1865? Farming as long as able to work
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? about Sixty dollars or more, can't contribute anything
15. What is your present physical condition and how long have you been in such condition?
Am old am feble, one eye out and most cant see my left eye of the other. Have been unable to do any thing to use of mutch for about two years
16. Upon which of the following grounds do you base your application for pension, viz.: first, "age and poverty," second "infirmity and poverty" or third "blindness and poverty"? all three grounds
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?
1st about two years could not work or earn any thing much. 2nd think have been suffering from La grippe a cold, neck, back, shoulders, legs and feet ache and hurt. Sore all the time, sometimes worse 20 days and cant see much out of other eye 5 or 6 years, no pupil much in eye
18. What property, effects or income do you possess? Nothing in the world one cow and calf worth 12 dollars and one horse cant work
19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same? Dont know that I owned any more than them 2 do now

20. In what County did you reside during those years and what property did you then return for taxation?
Resided in Clinch Co. Ga. Returned no property for taxation
21. How were you supported during the years 1893 and 1894? By my son in law P C Cooley who resided in this county near me
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? Kept no account of items
23. What was your employment during 1893 and 1894? What pay did you receive in each year?
Nothing, lived on a rented place with my wife

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? Am married and have family. wife living. Nine children living, aged from from about 22 years to about 40 years of age all farming on rented lands except two girls on their fathers and at home. All very limited financially

25. Are you receiving a pension under any law of this State, if so what amount and for what disability? am receiving no pension whatever

Sworn to and subscribed before me this the 22nd day of April 1895. } William Madison Thomas mark Applicant.

George Comelius Ordinary

of Clinch County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA, Clinch County.

I J R Dickerson of said State and County, having been presented as a witness in support of the application of William Madison Thomas 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? James R. Dickerson in Clinch County
2. Are you acquainted with William Madison Thomas, the applicant, if so how long have you known him? 30, Thirty years
3. Where does he reside, and how long has he been a resident of this State? he was a Resident of this State when I first saw him
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? I know he served in Georgia militia I saw him while there
5. When, where and in what company and regiment did he enlist? I dont know
6. Were you a member of the same company and regiment? no
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? I dont know how long he ~~served~~ was in service. I know he was a confederate soldier and was discharged by the close of the war
8. What property, effects or income has the applicant? (Give your means of knowledge.) he has no property or income he lives near me
9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? I dont know
10. What is the applicant's occupation and physical condition? farmer not able to work by Reason of old age
11. Is the applicant unable to support himself by labor of any sort, if so, why? he is too old
12. How was he supported during the years 1893 and 1894? by one of his boys
13. What portion of his support for these two years was derived from his own labor or income? none
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? he is not able to do any thing in the way of making a support by Reason of age
15. What interest have you in the recovery of a pension by this applicant? none

Sworn to and subscribed before me, this the 6th day of May 1895. } J R Dickerson ~~Applicant.~~

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA, Clinch County.

Personally came before me Thos B. Sheppard M.D. and L. C. Mattox M.D., both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully William M. Thomas, applicant for pension under the Act of 1894, and after such personal examination, say that his precise physical condition is as follows:

Blind in one Eye and other one is very bad also suffering from General Debility and old age.

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 6th day of May 1895. } Thos. B. Sheppard M.D. L. C. Mattox M.D.

George Comelius Ordinary

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, Clinch County.

I, George Comelius Ordinary in and for said County, hereby certify that the applicant William M Thomas 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: Thos B Sheppard M D & L C Mattox M D & J R Dickerson witness 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 Clinch County show that applicant returned for taxation in his name in 1893, 0 dollars of property, and in 1894, 0 dollars of property.

Witness my hand and seal of office, this 6th day of May 1895.

George Comelius 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,
Clinch County.

I, William Thomas hereby authorize Wm A Wright Comptr gen of Atlanta ga to receive and receipt for the pension paid hereon and request that he remit same to Ordinary by Mail at Hamerville ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 4th day of January 1897.

William his Thomas mark [L.S.]

Executed in presence of
W. K. Findley
George Cornelius
Ordinary

Thomas Williams
Clinch Co.

ACT OF 15 DEC., 1894.
(For Those Already Enrolled.)

No. 224

INDIGENT
Soldier's Pension.
1897.

Name William Thomas
County Clinch

Aug 9 1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
Atty

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

No data

POWER OF ATTORNEY.

State of Georgia,
Clinch County.

I, W M Thomas hereby authorize Wm A Wright Comptr gen of Atlanta ga to receive and receipt for the pension paid hereon and request that he remit same to W. M. Thomas Ordinary by Mail in care of at Hamerville ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 3rd day of January 1898.

W M his Thomas mark [L. S.]

Executed in presence of
F. P. Smith
George Cornelius
Ordinary

Thomas, W. M.
Clinch Co.

ACT OF 15 DEC., 1894.
(For Those Already Enrolled.)

NO. 1020

INDIGENT
SOLDIER'S PENSION,
1898.

Name W M Thomas
County Clinch

WARRANT ISSUED
1/14 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
War

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

No data

Capt Newberns (or Newburns) Company Ga Militia

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears William Thomas 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 continously ever since the 1st day of January 1824; that he is 73 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of One Year in Company , of th Regiment of Georgia Volunteers; that his physical condition is as follows: He is nearly blind & unable to perform any manual labor.

that his property consists of the following items Have no property at all except my wearing apparel

of the value of Cent 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 4th day of January 1897. William (his) X Thomas Mark

George Cornelius Ordinary.

STATE OF GEORGIA,
County.

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

Given under my official signature and seal, this 4th day of January 1897.

Affix your seal here.

George Cornelius
Ordinary Clinch County.

NOTE—The blanks spaces must be filled.

Capt Newberns (or Newburns) Co. Ga. Militia

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears W M Thomas 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 January 1822; that he is 76 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia years) during the war between the States, and served for the term of two years in Company , of Capt Nicolson th Regiment of Ga Militia; that his physical condition is as follows: Old Age. Infirmity and poverty

that his property consists of the following items no property

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 3rd day of January 1898. W. M. (his) Thomas Mark

George Cornelius Ordinary.

State of Georgia,
Clinch County.

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

Given under my official signature and seal, this 3rd day of January 1898.

Affix your seal here.

George Cornelius
Ordinary Clinch County.

NOTE.—The blank spaces must be filled.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, W M Thomas, hereby authorize Wm A Wright Con Gen of Atlanta Ga 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 2nd day of January 1899.

Executed in presence of
C W Ames
George Cowdens
Ordinary

W M his Thomas mark (L. S.)

Thomas, Wm M.
Clinch County.

CODE SEC. 1254.
(For Those Already Enrolled.)

No. 1969

INDIGENT
SOLDIER'S PENSION,
1899.

Name W M Thomas
County Clinch

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, Wm M Thomas hereby authorize Wm A Wright Con Gen of Atlanta Ga to receive and receipt for the pension allowed, and request that he remit same to Wm M. Thomas in care of Ordinary at Homerville Ga by Express

Witness my hand and seal, this 15th day of January 1900.

Wm M his Thomas mark [L. S.]

Executed in presence of
R. M. Cunn

Thomas, Wm M.
Clinch County.
1900

CODE SEC. 1254.
(For Those Already Enrolled.)

NO. 2024

INDIGENT
SOLDIER'S PENSION,
1900.

Name Wm M Thomas
County Clinch

WARRANT ISSUED
January 25 1900.

JOHN. W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Wright

Geo. W. Harrison, State Printer, Atlanta.

No data

Capt. Newberns Co. Ga Militia.
(Newburns)

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears W. M. Thomas 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 46th day of January 1861; that he is 76 years old and by occupation a former; 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 ~~[illegible]~~, of ~~[illegible]~~th Regiment of Georgia Volunteers; that his physical condition is as follows: Age, Infirmity & Poverty

that his property consists of the following items No property of any kind

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 1899. I have heretofore as a resident of Clinch county been allowed a pension for the year 1895

Sworn to and subscribed before me, this, the 2nd day of January 1899. } Wm M. Thomas his mark

George Cornelius Ordinary.

State of Georgia,
Clinch County.

I, George Cornelius Ordinary of said County, do certify that I am well acquainted with W. M. Thomas 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 January 1899.

Affix your seal here.

George Cornelius
Ordinary Clinch County.

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

Capt. Newberns (or Newburns) Co. Ga Militia

Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears Wm M. Thomas 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 2nd day of March 1862; that he is 76 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 3 years in Company ~~[illegible]~~ of ~~[illegible]~~th Regiment of ~~[illegible]~~; that his physical condition is as follows: Old age and poverty & blindness accompanying with Fableness

that his property consists of the following items -00-

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1900. I have heretofore as a resident of Clinch county been allowed a pension for the year 1899

Sworn to and subscribed before me, this, the 15th day of January 1900. } Wm M. Thomas his mark

George Cornelius Ordinary.

State of Georgia,
Clinch County.

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

Given under my official signature and seal, this 15th day of January 1900.

Affix your seal here.

George Cornelius
Ordinary Clinch County.

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

5

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, W M Thomas hereby authorize Wm Wright
Court Go of Atlanta Ga
to receive and receipt for the pension allowed and request that he remit same to
W. M. Thomas at Homerville Ga
by express

Witness my hand and seal, this 10 day of December 1900.
W M Thomas [L. S.]
Mark

Executed in presence of
George Condon
Ordinary

Clinch #13
Thomas, W. M.

CODE SECTION 1254
(For Those Already Enrolled.)

No. 105

To Founders 1902
INDIGENT
SOLDIER'S PENSION.
1901.

Name W M Thomas
County Clinch

WARRANT ISSUED
Jan 14 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Wright

Geo. W. Harrison, State Printer, Atlanta.
1/7/1901

no data

Capt Newburn's Co Ga Militia

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears W M Thomas 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 18th day of February 1822; that he is ____ 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 ____, of 29th Regiment of George Vols; that his physical condition is as follows: is old and feeble and unable to work at any thing called

that his property consists of the following items no property of any kind

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 10th day of December 1900 1901.

W M his Thomas Mark

George Cornelius Ordinary.

STATE OF GEORGIA,
Clinch County.

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

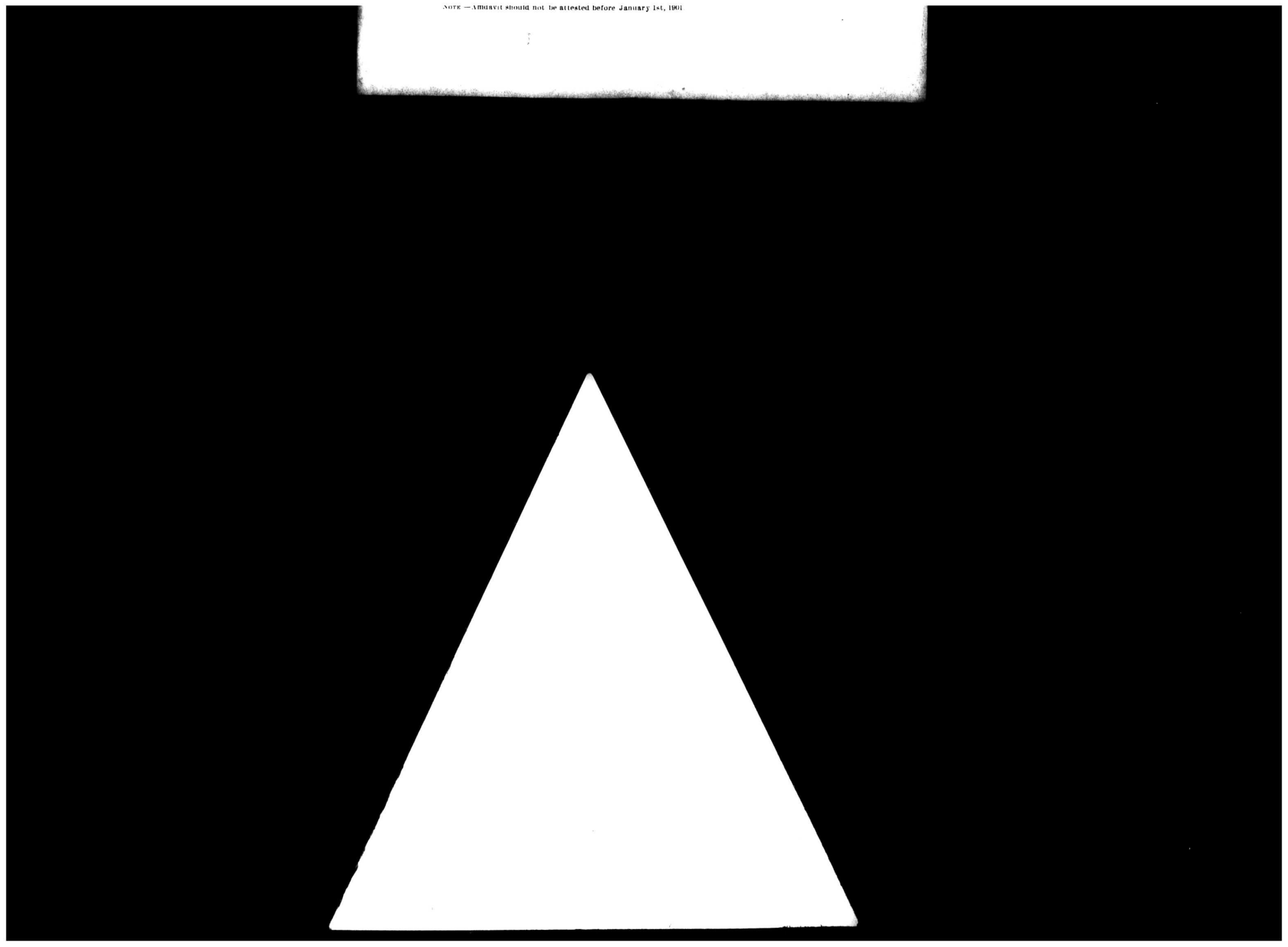
Given under my official signature and seal, this 10th day of December 1900 1901.

Affix your seal here

George Cornelius
Ordinary Clinch County.

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

NOTE — Affidavit should not be attested before January 1st, 1901



POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

KNOW ALL MEN BY THESE PRESENTS, That I, W. A. Thompson of Clinch County, State of Georgia, do hereby appoint W. A. Wright Compt Genl of Atlanta Georgia my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate States (or of this State) as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrrant 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 twenty first day of Feb 1895. Sergt W A Thompson [L. S.]

Executed in presence of us

S W Register

George Cornelius Ordinary

DIRECTIONS.

Send money to me as follows, by Express to Du Pont P.O. Clinch County, Georgia.

Sergt W. A. Thompson

Thompson, W. A.
Clinch Co.
(For Those Already Enrolled.)

No. 3231

SOLDIER'S PENSION.

1895.

Edward Co 1896

Name W. A. Thompson

County Clinch

Disability Gunshot Wound Lungs

Amount, $ 50

3/2 1895.

RICHARD JOHNSON,
Secretary Executive Department,

WARRANT HANDED TO

Sam

Geo. W. Harrison, State Printer, Atlanta.

No Data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

KNOW ALL MEN BY THESE PRESENTS, That I, W. A. Thompson of Clinch County, State of Georgia, do hereby appoint W. A. Wright Comptroller of Atlanta Georgia my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate States (or of this State) as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this twenty first day of Feb 1895. Sergt W A Thompson [L. S.]

Executed in presence of us
J M Register
George Gamelin Ordinary.

DIRECTIONS.

Send money to me as follows, by Express to Dupont P.O.
Clinch County, Georgia.
Sergt W. A. Thompson

Georgia Pierce 1894
Hampton W. R.
Clinch Co.

(For Those Already Enrolled.)
No. 3231

SOLDIER'S PENSION.
1895.

Name W A Thompson
County Clinch
Disability Furnished Troops
Amount, $ 72
32

1895.
RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO
Wm

Geo. W. Harrison, State Printer, Atlanta.
No date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, Wm A Thompson hereby authorize Wm A Wright Comp Genl of Fulton County Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to Wm A Thompson by Mail to Mill Town Ga at Mill Town Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 22 day of January, 1898.

Wm A Thompson [L. S.]

Executed in presence of
Minnie Caroline
George Gamelin
Ordinary

You will recognise that Drane in Coffee County for 1897

Coffee 1897
Wm Thompson Co. G.
Clinch Co.

ACT OF 5 OCT., 1897.
(For Those Already Enrolled.)
No. 1637

INVALID
SOLDIER'S PENSION.
1898.

Name Sergt Wm A Thompson
County Clinch Ga
Disability Gun Shot Wound
Amount, $ 50
2/15

1898.
RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
W A T

GEO. W. HARRISON, STATE PRINTER, ATLANTA.
No date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears Sergt W. A. Thompson of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 17th day of December 1842; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Sergt in Company E, of 26th Regiment of Georgia Volunteers, Gordons's Brigade; that whilst engaged in such military service at the battle of Sedar creek in the State of Virginia, on the 19th day of Oct 1864, he was wounded as follows: Gun Shot wound Ball Striking Mustle of Left Shoulder Penetrating left Lung Ball Loging near hart which Causes hemorage of Lung Continualy which disable him from being able work for a living. You will reconise that I am the identical man that drew the amount in Pierce County 1894

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

Sworn to and subscribed before me, this, the 21st day of February 1895. Sergt W. A. Thompson

George Cornelius Ordinary

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

STATE OF GEORGIA,
Clinch County.

I, George Cornelius Ordinary of said County, do certify that I am acquainted with W. A. Thompson 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 21st day of February 1895.

Affix your seal here

George Cornelius
Ordinary Clinch County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears Wm A. Thompson of Said County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the Eleventh day of Dec 1842; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Sergent in Company E, of 26th Regiment of Georgia Volunteers, Gordons's Brigade; that whilst engaged in such military service in the State of Virginia, on the 19 day of Oct 1864, he was wounded, injured or diseased as follows: Gun Shot Wound Penetrating the back over the region of left lung penetrating Said lung downward and foward also Wounding the pleura and from Said injury the applicant is disable from Manual Labor by reason of adhession of Said pleura and hemorrage from his Lung

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1898. I have heretofore under said law as a resident of Coffee 1897 county been allowed an invalid pension of fifty Dollars, for the year 1897.

Sworn to and subscribed before me, this, the 22nd day of January 1898. Sergent Wm A Thompson POST-OFFICE Mill Town Ga

George Cornelius Ordinary

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

STATE OF GEORGIA,
Clinch County.

I, George Cornelius Ordinary of said County, do certify that I am well acquainted with Wm A. Thompson 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 22nd day of January 1898.

Affix your seal here

George Cornelius
Ordinary Clinch County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, Wm A. Thompson hereby authorize W A Wright Comp Genl of Atlanta Georgia to receive and receipt for the pension paid hereon and request that he remit same to Ordinary Homerville by Mail at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 9th day of January 1899.

Wm A Thompson [L. S.]

Executed in presence of
Moses Smith
George Cornelius
ordinary

Thompson William A
Winona County

CODE SECTION 1256.
(For Those Already Enrolled.)

No. 903
To Berrien 1900

INVALID
SOLDIER'S PENSION.
1899.

Name Wm A. Thompson
County Clinch Ga
Disability Wounded
Amount, $ 50.00 Fifty
January 9th 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
Wow

GEO. W. HARRISON, STATE PRINTER, ATLANTA

No Data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, Wm A. Thompson hereby authorize Wm A Wright Comptroler Genl of Fulton County Atlanta to receive and receipt for the pension paid hereon and request that he remit same to Said Wm A Thompson by Ordinary Clinch County at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 1 day of January 1903.

Wm A. Thompson [L. S.]

Executed in presence of
W. T. Howell

You will see on Pay Role of 1902 I drew in Coffee County Ga and now wish to draw in Clinch County please favor me in the matter

Wm A Thompson

Thompson William A
Clinch Co. 5

CODE SECTION 1256.
(FOR THOSE ALREADY ENROLLED.)

No. 2792
From Coffee 1902

DISABLED
SOLDIER'S PENSION
1903.

Name Wm A Thompson
County Clinch
Co. E 49 Regiment
Disability
Amount, $ 50
2/24 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
W

Geo. W. Harrison State Printer, Atlanta.

Pd

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears Wm A. Thompson of Said County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the Eleventh day of December 1862; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Sergent in Company E, of 26th Regiment of Georgia Volunteers, Gordons's Brigade; that whilst engaged in such military service in the State of Virginia, on the 19 day of Oct 1864, he was wounded, injured or diseased as follows:

Gun Shot Wound Penetrating the back over the region of left Lung Penetrating Said Lung downward and forward Also Wounding the Pleura. and from Said injury the applicant is disabled from Manuel Labor by reason of adhesions of Said Pleura and hemorages from his lung. and he is not able to work for a living

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1899. I have heretofore under said law as a resident of State of Georgia Clinch County been allowed an invalid pension of $50.00 Fifty Dollars, for the year 1898

Sworn to and subscribed before me, this the 9th day of January 1899. Wm A. Thompson POST OFFICE Tomlinson Ga

Geo. Condrey Ordinary

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

STATE OF GEORGIA,
County.

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

Given under my official signature and seal, this 9th day of January 1899.

Affix your seal here

Geo. Condrey
Ordinary Clinch County.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County.

Personally appears Wm A Thompson of Said County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the Eleventh day of December 1862; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Sergent in Company E, of 26 th Regiment of Georgia Volunteers, Gordons's Brigade; that whilst engaged in such military service in the State of [redacted], on the 19 day of October 1864, he was wounded, injured or diseased as follows:

Received Gun Shot Wound Penitrating the Back over the regeon of Left Lung. Penitrating Said Lung downard and forward Also Wounding the Pleura and from Said injure the applicant is disabled from Manuel Labor by Reason of adhession of Pleura and hemorage from his Lung. Causing him Not able to do any work for a Living & has no means of Living

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1903. I have heretofore, under said law, as a resident of Georgia [redacted] County, been allowed an invalid pension of Fifty Dollars, for the year 1902. now Post Office to draw from Clinch

Sworn to and subscribed before me, this the 1 day of Jan 1903. Wm A Thompson Post-office Dupont Ga

W. T. Howell Ordinary

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

STATE OF GEORGIA,
Clinch County.

I, W. T. Howell Ordinary of said County, do certify that I am well acquainted with Wm A. Thompson 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 1 day of January 1903.

Affix your seal here

W. T. Howell
Ordinary of Clinch County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, Wm A Thompson hereby authorize W A Right of Fulton County to receive and receipt for the pension paid hereon, and request that he remit same to mill by Check or Draft at Mill Town Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 2[illegible] day of Jan 1904.

Wm A Thompson [L. S.]

Executed in the presence of
W T Lowell Ordinary
CC

Thompson, William A.
Clinch Co.

CODE SECTION 1250.
(FOR THOSE ALREADY ENROLLED.)

No. 2623

DISABLED
SOLDIER'S PENSION
1904.

Name Wm A Thompson
County Clinch
Co. Regiment
Disability
Amount, $ 50.00
FEB 24 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Draw

Geo. W. Harrison, State Printer, Atlanta.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, Wm A. Thompson hereby authorize Wm A. Wright of Atlanta Ga to receive and receipt for the pension paid hereon, and request that he remit same to Ordinary by at Hamerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 4th day of Jan 1905.

Wm A. Thompson [L. S.]

Executed in the presence of
J. T. Dame
Ordinary

Thompson, Wm. A.
Clinch County

CODE SECTION 1250.
(FOR THOSE ALREADY ENROLLED.)

No. 2564

DISABLED
SOLDIER'S PENSION
1905.

Name Wm A Thompson
County Clinch
Co. Regiment
Disability
Amount, $ 50
MAR 1 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
N

THE FRANKLIN PRINTING AND PUBLISHING CO., ATLANTA
GEO. W. HARRISON, MANAGER, FOR STATE PRINTER

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, }
Clinch County. }

Personally appears Wm A Tompson of Clinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 18 day of Dec 18 42; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Sergent in Company C, of 26 th Regiment of Georgia Volunteers Gordons 's Brigade; that whilst engaged in such military service in the State of Georgia, on the 19 day of Oct 1864, he was wounded, injured or diseased as follows: He was wounded he was shot in the Back over the Region of right lung Penetrating said lung and came accross and Edmund Left wrong Lung and Rendred him disable for any manual Labor at all

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1904. I have heretofore, under said law, as a resident of Clinch County, been allowed an invalid pension of $50 00 Dollars, for the year 1903.

Sworn to and subscribed before me, this the 25 day of Jan 1904.
W T Darnell
Wm A Thompson
Post-office mill town Ga

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

STATE OF GEORGIA, }
Clinch County. }

I, W T Darnell Ordinary of said County, do certify that I am well acquainted with W A Thompson 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 1904.

W T Darnell
Ordinary Clinch County.

Affix your Seal here.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, }
Clinch COUNTY. }

Personally appears Wm A. Thampson of Clinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 11th day of December 18 42; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Sargent in Company E, of 26 th Regiment of Georgia Volunteers Gordon 's Brigade; that whilst engaged in such military service in the State of Virginia, on the 19th day of October 1864, he was wounded, injured or diseased as follows: Gun shot wound Penetrating the Bone over the regon of left lung Penetrating said lung downward and forward. also wounding the Pleura and Gram said injury. the Applicant is disabled from manuel labor by reason of adhesion of said pleura and Emorage from his lung he is without means and not able to work for a living

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

Sworn to and subscribed before me, this the 4th day of Jan 1905.
I. T. Dame Ordinary
Wm A Thompson
Post-office Clinch Ga

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

STATE OF GEORGIA, }
Clinch COUNTY. }

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

Given under my official signature and seal, this 4th day of Jan 1905.

I. T. Dame
Ordinary Clinch County.

Affix your Seal here.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, W. A. Thompson hereby authorize W. A. Wright of Fulton Co. Ga to receive and receipt for the pension paid hereon, and request that he remit same to C. T. Dame ordinary by mail at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this [illegible] day of [illegible] 1906.

W. A. Thompson [L. S.]

Executed in the presence of
C. T. Dame

Thompson, W. A.
[illegible]

CODE SECTION 1250.
(FOR THOSE ALREADY ENROLLED.)

No. 283

DISABLED
SOLDIER'S PENSION
1906.

Name W. A. Thompson
County Clinch
Co. E Regiment [illegible]
Disability [illegible]
Amount, $[illegible]
JAN 26 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
W. A. W.

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

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, W. A. Thompson, hereby authorize W. A. Wright of Atlanta Ga to receive and receipt for the pension paid hereon, and request that he remit same to C. T. Dame ordinary by mail at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 12th day of Jan 1907.

W. A. Thompson [L. S.]

Executed in presence of
C. T. Dame

Thompson, W. A.
Clinch Co.

CODE SECTION 1250.
(FOR THOSE ALREADY ENROLLED)

No. 1380

DISABLED
SOLDIER'S PENSION
1907.

Name W. A. Thompson
County Clinch
Co. E Regiment 26th Ga
Disability Body wound Colon Ayr 2d
Amount, $50.00
1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

no date

3-50-150
2-100 200
1-15 15
1 5 5
$70

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Clinch County.

Personally appears W. A. Thompson of Clinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 11 day of Dec 1842; that he enlisted in the military service of the Confederate States, (or of the State of Ga) during the war between the States, and served as a Sargent in Company E, of 26 th Regiment of Ga Volunteers Gordons's Brigade; that whilst engaged in such military service in the State of Va, on the 19 day of Oct 1864, he was wounded, injured or diseased as follows: Penetrating the back over the region of left lung penetrating said lung downward and forward. also wounding the pleura and frame said injury the applicant is disabled from manual labor by reason of adhesion of pleura and hemorages from his lung. He is without means and not able to work for a living.

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1906. I have heretofore, under said law, as a resident of Clinch County, been allowed an invalid pension of Fifty (50.00) Dollars, for the year 1905.

Sworn to and subscribed before me, this the 2nd day of Jan 1906.

J. T. Dame

W. A. Thompson

Post-Office

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

State of Georgia,
Clinch County.

I, J. T. Dame Ordinary of said County do certify that I am well acquainted with W. A. Thompson 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.

Affix your seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
Clinch County.

Personally appears W. A. Thompson of Clinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 11th day of Dec 1842; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Sargent in Company E, of 26 th Regiment of Georgia Volunteers Gordons's Brigade; that whilst engaged in such military service in the State of Virginia, on the 19 day of Oct 1864, he was wounded, injured or diseased as follows: Body wound Cedar Ave Va Oct 19 1864 Gun shot wound penetrating the back over the region of left lung penetrating said lung downward and forward also wounding the pleura and frame said injury. The applicant is disabled from manual labor by reason of adhesion of pleura and hemorages from his lung he is without means and not able to work for a living.

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1907. I have heretofore, under said law, as a resident of Clinch County, been allowed an invalid pension of Fifty Dollars, for the year 1906.

Sworn to and subscribed before me, this the 1 day of Jan 1907.

J. T. Dame

W. A. Thompson

Postoffice Clinch Ga

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

State of Georgia,
Clinch County.

I, J. T. Dame Ordinary of said County, do certify that I am well acquainted with W. A. Thompson 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 Jan 1907.

J. T. Dame

Ordinary Clinch County.

Affix your seal here

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

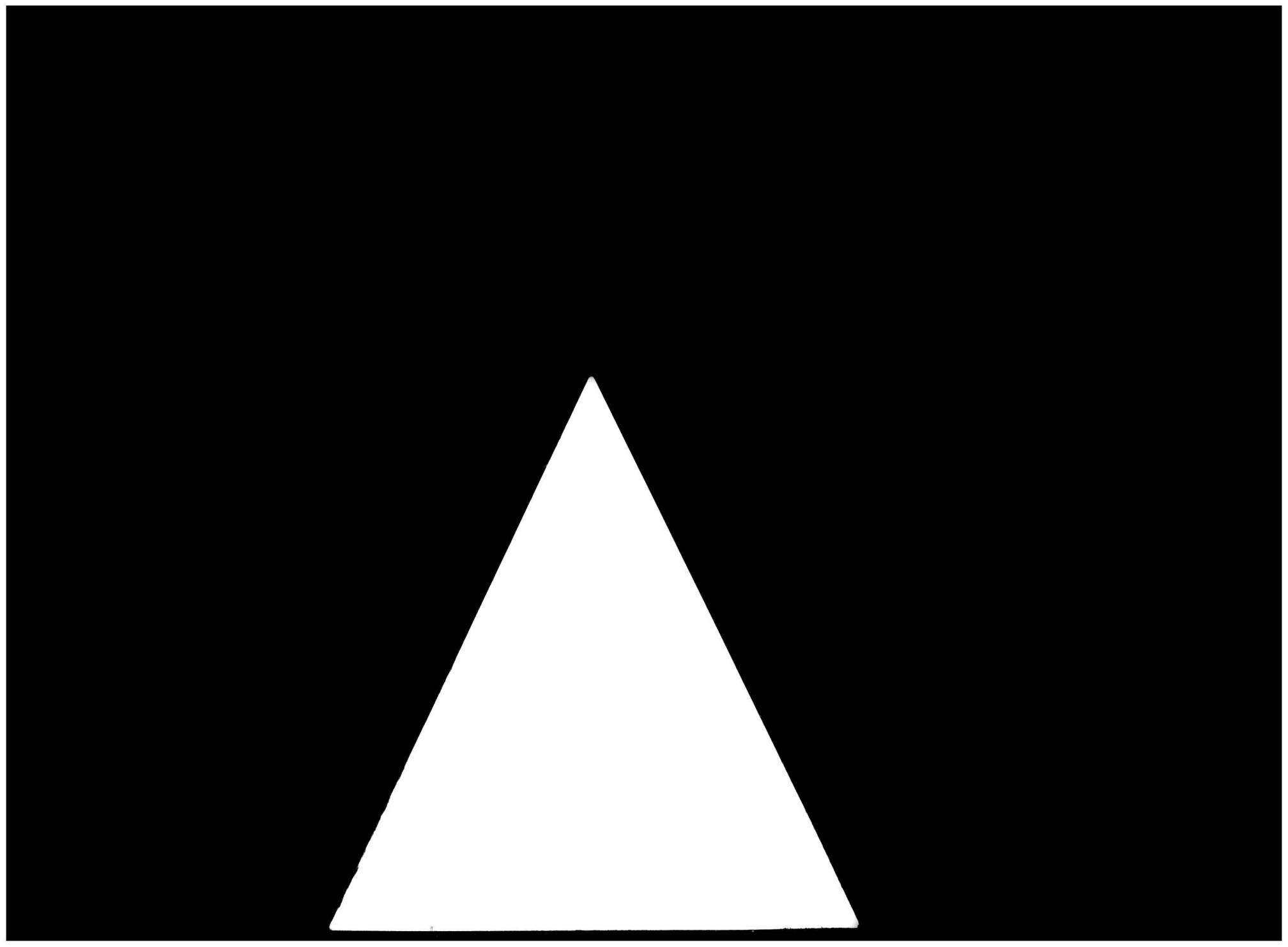
Ordinary Clinch County.

Homerville, Ga., February 1875

Executive department
Atlanta Ga

This man W A Thompson
applicant for Pension Claims
to have come from pierce
county Ga. and that he
drew there in 1894
Respectfully &c

George Lamelas
Ordinary



POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA,

Lincoln *County.*

Know all **Men** by these Presents, That I, Delilah Simmons

of Lincoln

County, in said State, do hereby appoint William H. Wright

of Atlanta Ga my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby 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 16th day of April 1891

Delilah Simmons [L. S.]

Executed in the presence of us:

Christy Gibbs

George Cornelius

DIRECTIONS.

If allowed, send amount by Express to me at Lincoln Ga, and oblige,

Delilah Simmons

Delilah Simmons
Lincoln County
1891.

No. 1197

Widows' Pension

—PAID TO—

Mrs. Delilah Simmons

OF

Lincoln COUNTY.

$100.00.

Warrant Issued

1891

AND HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA,
Elbert County.

Know all Men by these Presents, That I, Delilah Zimmerman of Elbert County, in said State, do hereby appoint William A. Wright of Atlanta Ga my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby 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 14th day of April 1891.

Delilah Zimmerman her mark [L. S.]

Executed in the presence of us:
Christy Gibbs
George Dorsilius J.C.

DIRECTIONS.

If allowed, send amount by Express to me at Lisbon Ga and oblige,
Delilah Zimmerman

Elbert County
Oliver Ga.

Zimmerman Del.
Oliver County
1891.

Widows' Pension
PAID TO
Mrs. Delilah Zimmerman
OF
Oliver COUNTY.

No. 1197

$100.00.

Warrant Issued
1891

AND HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA,
County of Elbert

In person came before me, the undersigned Ordinary in and for the County of Elbert Mrs. Delilah Zimmerman, who being sworn according to law, says under oath that she is the widow of John Zimmerman, who was a soldier in the service of the Confederate States, and served as a member of Company K, of the 29th Regiment of Georgia Volunteers; that he enlisted in said service on or about the 8th day of December 1862, and was in the Confederate Army up to the surrender 1865. That while in the Army, he was on the Captured day of at Chickamauga 1864, (See Note No. 1) and died in the Prison & Prisoner in the Custody of the Federal Authorities in 1864, and Consequently has not been heard from since the Cap

Deponent further swears that she was the wife of said deceased soldier during his term of service in the Army, and that she has never married since his death; that she became his wife on the 22nd day of September 1847, and that she has resided in Georgia continuously since the 22nd day of September 1847; that Georgia is her home, and was such on the 23d day of December, 1890, and since said date she has not lived in any other State or locality. Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February 15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this the 14th day of April 1891.
Delilah X Zimmerman her mark
George Dorsilius
Ordinary.

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

Form No. 2.

Affidavit for Three Witnesses.

STATE OF GEORGIA,

County of Clinch

In person came before me, the undersigned Ordinary in and for said County, witnesses E. L. F. Cameron, George A. Fiveash and Monroe Moore (each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge, Mrs. Delilah Timmerman, of the County of Clinch, State of Georgia, is the widow of John Timmerman, who was a soldier in Company H of the 29th Regiment of Georgia Volunteers. That said soldier enlisted in the service of the Confederate States (~~or the Georgia State Troops~~) on or about the 8th day of December 1862. That while in said service, or by reason of said service in the Army, he lost his life as follows: Captured at the Battle of Chicamauga Tenn and died in Prison 1864, and consequently has not been heard from since the war.

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

Sworn to and subscribed before me, this, the 16th day of April 1891.

George Cornelius
Ordinary.

E. L. F. Cameron
G. A. Fiveash
Monroe x Moore

Form No. 3.

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

STATE OF GEORGIA,

County of Clinch

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 16th day of April 1891.

SEAL

George Cornelius
Ordinary.

Form No. 4.

NOTES.

The pension is only payable to certain classes of widows.

Those whose husbands were killed in service.

Those whose husbands died *in the army* of wounds or disease contracted in the service.

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

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

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

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

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

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

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

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

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

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

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

By order of the Governor.

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

Form No. 2.

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

STATE OF GEORGIA, County of Clinch

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 11th day of January 1895.

{SEAL} George Cornelius Ordinary.

Form No. 3

POWER OF ATTORNEY.

STATE OF GEORGIA, Clinch County.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 11th day of January 1895. Delila her x mark Timmerman [L. S.]

Executed in the presence of us:

J. R. E. Cornelius
George Cornelius Ordinary

DIRECTIONS.

Send amount by Express to me at Deepark Ga or in care of George Cornelius Ordinary, and oblige Delila Timmerman

Timmerman, Delila
Clinch Co.

FOR THOSE HERETOFORE PAID.

1895.

No. 3254

WIDOW'S PENSION,

for year ending Febuary 15th, 1895.

—PAID TO—

Mrs. Delila Timmerman

—OF—

Clinch County.

widow of John Timmerman

WARRANT ISSUED

29 1895.

AND HANDED TO

WAM

Geo. W. Harrison, State Printer.

Form No. 2.

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

STATE OF GEORGIA, County of Clinch

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

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

{SEAL} George Cornelius Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, Clinch County.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 25th day of January 1894. Delila her x mark Timmerman [L. S.]

Executed in the presence of us:

Wm. R. Findey
George Cornelius Ordinary

DIRECTIONS.

Send amount by Express to me at Homerville Ga in care of George Cornelius Ordinary, and oblige Delila Timmerman

Timmerman, Delila
Clinch Co.

FOR THOSE HERETOFORE PAID.

1894.

No. 758

WIDOWS' PENSION,

for year ending February 15th, 1894.

—PAID TO—

Mrs. Delila Timmerman

—OF—

Clinch County.

WARRANT ISSUED

27 1894.

AND HANDED TO

W A WRIGHT

Geo. W. Harrison, State Printer, Atlanta.

Form 1.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally Comes Mrs.
County of Clinch | Delila Timmerman

who being sworn, says on oath, that she is a bona fide resident of said county of Clinch State of Georgia, and that she has *resided* in said State continuously ~~ever since~~ for the last 40 years That she is the Widow of John Timmerman who was a Soldier in Company K of the 29th Regiment of Georgia Volunteers, that he enlisted in said Regiment on or about the month of December 8th 1862 and served in the Army up to April 1864 That he lost his life on the 8th day of April 1864 (*State here full particulars of the husband's death, when, where and from what cause.*) (The said Soldier husband was taken sick while with his command and sent to Jackson Mississippi to hospital and died of Pneumonia on 8th day of April 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1847, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this 11th day of January 1895.
George Cornelius Ordinary.

Delila her Timmerman mark
Post-office Dupont ga

Form No. 1

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally comes Mrs.
County of Clinch | Delila Timmerman

who being sworn, says on oath, that she is a bona fide resident of said County of Clinch State of Georgia, and that she has *resided* in said State continuously ever since 1860 That she is the Widow of John Timmerman who was a Soldier in Company K of the 29th Regiment of Georgia Volunteers, that he enlisted in said Regiment on or about the month of December 1862 and served in the Army up to 1865 That he lost his life on the — day of January 1865 (*State here full particulars of the husband's death, when, where and from what cause.*) (That he died of Pneumonia ~~within~~ after being captured by the Enemy in January 1865)

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1847; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1893, and now apply for the allowance provided by law for the year ending February 15th, 1894.

Sworn to and subscribed before me, this 25th day of January 1894.
George Cornelius Ordinary.

Delila her Timmerman mark
Post-office Dupont ga

Form No. 2.

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

STATE OF GEORGIA, County of Clinch

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 21st day of January 1893.

{SEAL} George Cornelius Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, Clinch County.

Know all Men by these Presents, That I, Delila Timmerman of Clinch County, in said State, do hereby appoint William A Wright of Atlanta Ga my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby 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 21st day of February 1893

Delila Timmerman [L.S.]

Executed in the presence of us:

George Cornelius
Jesse Findley

DIRECTIONS.

Send amount by Express to me at Dickson Ga, and oblige

Delila Timmerman
mark

Timmerman, Delila
Clinch County 2/14
FOR THOSE HERETOFORE PAID

1893.

No. 731

Widows' Pension,

for year ending February 15th, 1893.

—PAID TO—

Mrs. Delila Timmerman

—OF—

Clinch County.

Warrant Issued 2/11 1893

AND HANDED TO

Wm A Wright

Geo. W. Harrison, State Printer, Atlanta.

Form No. 2.

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

STATE OF GEORGIA, County of Clinch

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the 11th day of January 1896.

{SEAL} George Cornelius Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, Clinch County.

I, Delila Timmerman hereby authorize Wm A Wright com of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to me at Homerville Ga in care of George Cornelius ordinary

In Witness Whereof, I have hereunto set my hand and seal, this 11th day of January 1896.

Delila Timmerman [L.S.]

Executed in the presence of

Sallie Cornelius
George Cornelius
ordinary

Timmerman, Delila
Clinch County
FOR THOSE HERETOFORE PAID

1896.

No. 3471

WIDOW'S PENSION,

for year ending February 15th, 1896.

PAID TO

Mrs. Delila Timmerman

OF

Clinch County.

widow of John Timmerman

WARRANT ISSUED

2/11 1896.

AND HANDED TO

Wm A Wright

Geo. W. Harrison, State Printer.

Form No. 1.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Clinch

Personally comes Mrs. Delila Timmerman

who being sworn, says on oath, that she is a bona fide resident of said County of Clinch State of Georgia, and that she has *resided* in said State continuously ~~ever since~~ for forty years 18__ That she is the Widow of John Timmerman who was a Soldier in Company R of the 29th Regiment of Georgia Volunteers, that he enlisted in said Regiment on or about the month of December 1862 and served in the Army up to April 1865 That he lost his life on the _____ day of _____ 18__ (*State here full particulars of the husband's death, when, where and from what cause.*) (That he was captured at the surrender and died in prison April 1865 from Pneumonia)

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1847; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1892, and now apply for the allowance provided by law for the year ending February 15th, 1893.

Sworn to and subscribed before me, this 21st day of January 1893.
George Cornelius Ordinary.

Delila her x mark Timmerman
Post-office Fender ga

Form 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Clinch

Personally Comes Mrs. Delila Timmerman

who being sworn, says on oath, that she is a bona fide resident of said county of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since January 1847 That she is the Widow of John Timmerman who was a Soldier in Company R of the 29th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of December 1862 and served in the Army up to April 1865 That he lost his life on the _____ day of April 1865 (*State here full particulars of the husband's death, when, where and from what cause.*) (And that while with his command was taken sick with pneumonia and died in the Hospital from pneumonia in Virgo.

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1847, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Clinch County for the year ending February 15th, 1895, and now apply for the pension provided by law for the year ending February 15th, 1896.

Sworn to and subscribed before me, this 11th day of Jan 1896.
George Cornelius Ordinary.

Delila her x mark Timmerman
Post-office Dupont ga

Form No. 2.

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

STATE OF GEORGIA, County of Clinch

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the 7th day of January 1897.

SEAL George Cornelius Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA. Clinch County.

I, Delila Timmerman hereby authorize Wm A. Wright Camp Gen of Atlanta ga to receive and receipt for the pension paid hereon and request that he remit same to me at Homerville ga in care of Ordinary

In Witness Whereof, I have hereunto set my hand and seal, this 7th day of January 1897.

Delila Timmerman [L. S.]

Executed in the presence of

Martha Cornelius
George Cornelius
Ordinary

POWER OF ATTORNEY.

State of Georgia, Clinch County.

I, Delila Timmerman hereby authorize Wm A. Wright Camp Gen of Atlanta ga to receive and receipt for the pension paid hereon and request that he remit same to Delila Timmerman at Homerville ga in care of Ordinary

In Witness Whereof, I have hereunto set my hand and seal, this Third day of January 1898.

Delila Timmerman by mark [L. S.]

Executed in the presence of

E Mathis
George Cornelius
Ordinary

Timmerman Delila
Clinch County

For Those Heretofore Paid.

1898.

NO. 2684

WIDOW'S PENSION,

For year ending February 15th, 1898.

PAID TO

Mrs. Delila Timmerman

OF

Clinch County,

Widow of John Timmerman

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

2/2 1898.

AND HANDED TO

Wm

GEO. W. HARRISON, STATE PRINTER, ATLANTA

Timmerman Delila
Clinch County

FOR THOSE HERETOFORE PAID.

1897.

No. 1285

WIDOW'S PENSION,

for year ending February 15th, 1897.

PAID TO

Mrs. Delila Timmerman

OF

Clinch County.

widow of John Timmerman

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

2/1 1897,

AND HANDED TO

Atty.

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Clinch } **Personally Comes Mrs.** Delila Timmerman

who being sworn, says on oath, that she is a bona fide resident of said county of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since, the year 1847 That she is the Widow of John Timmerman who was a Soldier in Company ~~[illegible]~~ of the 29th Regiment of Georgia Volunteers, that enlisted in said regiment on or about the month of December 1862 and served in the Army up to Nov 1865 That he lost his life on the day of Nov 1865 (*State here full particulars of the husband's death, when, where and from what cause.*) Said Soldier husband was taken sick while with his command and sent to a military Hospital in Mississippi and died same time in November 1865

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1847, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Clinch County for the year ending February 15th, 1896, and now apply for the pension provided by law for the year ending February 15th, 1897.

Sworn to and subscribed before me, this 7th day of January 1897. George Cornelius Ordinary. } Delila her mark Timmerman Post-office

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Clinch } **Personally Comes Mrs.** Delila Timmerman

who, being sworn, says on oath, that she is a bona fide resident of said county of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since ~~[illegible]~~ 1848 That she is the Widow of John Timmerman who was a Soldier in Company D of the 29th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of December 1st 1862 and served in the Army up to April 1865 That he lost his life on the day of April 1865 (*State here full particulars of the husband's death, when, where and from what cause.*) Said Soldier Husband was captured by the Enemy about the time of evacuation of Petersburg Va by Gen Lee and died in prison in Illinois

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1847

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

Sworn to and subscribed before me, this 3rd day of January 1898. George Cornelius Ordinary. } Delila her mark Timmerman Post-Office Dupont

State of Georgia, Clinch County. } I George Cornelius Ordinary of said County, certify that I am well acquainted with Mrs. Delila Timmerman who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 1848

Given under my official signature and seal this the 3rd day of January 1898.

George Cornelius

Official Seal.

Ordinary of Clinch County.

POWER OF ATTORNEY.

State of Georgia,
Clinch County.

I, Delila Timmerman hereby authorize Wm A Wright Comp Gen of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to Ordinary at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 6th day of January 1899.

Delila her + mark Timmerman [L. S.]

Executed in presence of
Delia Cornelius
George Cornelius (Ord)

Timmerman, Delila
Clinch County
For Those Heretofore Paid.

1899.

NO. 2584

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAID TO
Mrs. Delila Timmerman
OF
Clinch County
Widow of John Timmerman

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED
2/11 1899.
AND HANDED TO
W. A. Dr

GEO. W. HARRISON, STATE PRINTER, ATLANTA

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, Delila Timmerman hereby authorize Wm A Wright Com Gen of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to Delila Timmerman in care of ordinary at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 4th day of January 1900.

Delila her + mark Timmerman [L. S.]

Executed in presence of
George Cornelius
Ordinary
J. H. Siddons

Timmerman, Delila
Clinch County
To Those Heretofore Paid.

1900.

NO. 917

WIDOW'S PENSION,

For year ending February 15th, 1900.

PAID TO
Mrs. Delila Timmerman
OF
Clinch County,
Widow of John Timmerman

JNO. W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
Feb 13 1900,
AND HANDED TO
Wright

GEO. W. HARRISON, State Printer, Atlanta.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Clinch } Personally Comes Mrs. Dilila Zimmerman

who, being sworn, says on oath, that she is a bona fide resident of said county of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since January 1st 1860 That she is the Widow of John Zimmerman who was a soldier in Company K of the 29th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of December 1862 and served in the Army up to April 1865 That he lost his life on the ~~April~~ day of April 1865 (State here full particulars of the husband's death, when, where and from what cause.)

Said Soldier has not been heard of by me since the Surrender of Confederate Army in Virginia in 1865

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1845

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

Sworn to and subscribed before me, this 6th day of January 1899. George Cornelius Ordinary.

her Dilila + Zimmerman mark

Post-Office Dupont Ga

State of Georgia, Clinch County. } I George Cornelius Ordinary of said County, certify that I am well acquainted with Mrs. Dilila Zimmerman who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 1st day of January 1860

Given under my official signature and seal this the 6th day of January 1899.

George Cornelius

Ordinary of Clinch County.

{Official Seal.}

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Clinch } Personally Comes Mrs. Dilila Zimmerman

who, being sworn, says on oath, that she is a bona fide resident of said county of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since July 1840. That she is the Widow of John Zimmerman who was a soldier in Company of the 29th Ga Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of December 1862 and served in the Army up to April 1865 That he lost his life on the day of ~~April~~ 3d 1865 (State here particulars of the husband's death, when, where and from what cause)

that said Soldier Husband was taken sick while with his command and sent to hospital at Jackson Miss. and died in said hospital some time in February 1865 or thereabout

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1845.

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

Sworn to and subscribed before me, this 4th day of January 1900. George Cornelius Ordinary.

her Dilila + Zimmerman mark

Post Office Dupont Ga

State of Georgia, Clinch County. } I George Cornelius Ordinary of said County, certify that I am well acquainted with Mrs. Dilila Zimmerman, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of July 1845

Given under my official signature and seal, this the 4th day of January 1900.

George Cornelius

Ordinary of Clinch County.

{Official Seal.}

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, Delila Timmerman hereby authorize Wm A. Wright Court Gen of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to Delila Timmerman at Homerville Ga in care of Ordinary

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 24th day of December ~~1901~~ 1900.

Delila her Timmerman [L. S.]
Mark

Executed in presence of

George Cornelius
Ordinary

Timmerman, Delila
Clinch Co

To Those Heretofore Paid.

1901.

No. 43

WIDOW'S PENSION,

For year ending February 15th, 1901.

PAID TO

Mrs. Delila Timmerman

OF

Clinch County.

Widow of John Timmerman

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

Jan 14 1901,

AND HANDED TO

Wright

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

1/3/1901

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, Delila Timmerman, hereby authorize W. A. Wright of Fulton Co Ga to receive and receipt for the pension paid hereon, and request that he remit same to W. T. Howell at Homerville Ga

In Witness Whereof, I have hereunto set my hand and seal, this 7 day of January 1902.

Delila her Timmerman [L. S.]
Mark

Executed in presence of

W. T. Howell

Timmerman, Delila
Clinch County

To Those Heretofore Paid.

1902.

No. 2793

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs Delila Timmerman

OF

Clinch County,

Widow of

Co. Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

Jan 14 1902

AND HANDED TO

W

GEO. W. HARRISON, STATE PRINTER, ATLANTA, GA.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Clinch } Personally Comes Mrs. Delila Timmerman

who, being sworn, says on oath, that she is a bona fide resident of said County of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since the year 1860. That she is the Widow of John Timmerman who was a soldier in Company R of the 29th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of Dec 8th 1862 and served in the Army up to about June 1864. That he lost his life on the about day of June 1864 (*State here particulars of the husband's death, when, where and from what cause*)

That said soldier was captured while on duty with his command and died about June 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1848

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

Sworn to and subscribed before me, this 24th day of Dec 1900 ~~1901~~. George Cornelius Ordinary. } Delila her + mark Timmerman Post Office Dupont ga

State of Georgia, Clinch County. } I George Ordinary of said County, certify that I am well acquainted with Mrs. Delila Timmerman who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of January 1860

Given under my official signature and seal, this the 24th day of Dec 1900 ~~1901~~.

George Cornelius

Official Seal.

Ordinary of Clinch County.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Clinch } PERSONALLY COMES MRS. Delila Timmerman

who, being sworn, says on oath, that she is a bona fide resident of said County of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since the date of 47. That she is the Widow of John Timmerman who was a soldier in Company R of the 29 Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of December 1862, and served in the Army up to the date 1862. That he lost his life on the April day of 1862 (*State here particulars of the husband's death, when, where and from what cause*)

he lost his life in virginia from the best evidence I have he died with pneumonia

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1847.

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

Sworn to and subscribed before me, this 6 day of January 1902. , Ordinary. } her Delila + mark Timmerman Post-Office Dupont

State of Georgia, Clinch County. } I W T Howell Ordinary of said County, certify that I am well acquainted with Mrs. Delila Timmerman, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents hereself to be, and that she has continuously resided in this State since the day of — 1864

Given under my official signature and seal, this the 7 day of January 1902.

W T Howell

Official Seal.

Ordinary of Clinch County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, Delila Timmerman hereby authorize W. A. Wright of Fulton, Co. Ga. to receive and receipt for the pension paid hereon, and request that he remit same to W. T. Howell at Homerville Ga.

In Witness Whereof, I have hereunto set my hand and seal, this 11 day of January 1903.

her
Delila X Timmerman [L.S.]
mark

Executed in presence of
W. T. Howell

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, Delila Timmerman hereby authorize W. A. Wright of Fulton, Co. Ga. to receive and receipt for the pension paid hereon, and request that he remit same to W. T. Howell at Homerville Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 9 day of January 1904.

her
Delila X Timmerman [L.S.]
mark

Executed in presence of
[illegible]

Timmerman, Delila
Clinch County
To Those Heretofore Paid.

1903.

No. 2434

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO
Mrs. Delila Timmerman
OF
Clinch County,
Widow of John Timmerman
Co. B 34 Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
Feb 24 1903.
AND HANDED TO
W

Timmerman, Delila
Clinch County
TO THOSE HERETOFORE PAID.

1904.

No. 2398

WIDOW'S PENSION

FOR
YEAR ENDING DECEMBER 31, 1904.

PAID TO
Mrs. Delila Timmerman
OF
Clinch County,
Widow of John
Co. Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
FEB 24 1904,
AND HANDED TO
[illegible]

Geo. W. Harrison, State Printer, Atlanta.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Clinch } PERSONALLY COMES MRS. Delila Timmerman

who, being sworn says on oath, that she is a bona fide resident of said County of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since 1846. That she is the Widow of John Timmerman who was a soldier in Company R of the 29th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of December 1862, and served in the Army up to April 1864. That he lost his life on the _____ day of April 1864 (State here particulars of the husband's death, when, where and from what cause.)

He died of Pneumonia at the Hospital in Virginia in 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1847

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

Sworn to and subscribed before me, this 11 day of January 1903. W. T. Howell, Ordinary. } Delila her mark Timmerman Post-Office Du Pont, Ga.

State of Georgia, Clinch County. } I, W. T. Howell Ordinary of said County, certify that I am well acquainted with Mrs. Delila Timmerman, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 15 day of April 1846

Given under my official signature and seal, this the 12 day of ~~Apr~~ Jan 1903.

{ Official Seal. } W. T. Howell Ordinary of Clinch County.

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

Form No. 1.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of Clinch } PERSONALLY COMES MRS. Delila Timmerman

who, being sworn, says on oath that she is a bona fide resident of said County of Clinch State of Georgia, and that she has RESIDED in said State continuously ever since 1840. That she is the Widow of John Timmerman who was a soldier in Company K of the 29th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of December 1862, and served in the Army up to April 1864. That he lost his life on the _____ day of April 1864 (State here particulars of the husband's death, when, where and from what cause.)

He died of disease in the Army in the State of Virginia

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1847

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

Sworn to and subscribed before me, this 9 day of January 1904. W. T. Howell Ordinary. } Delila her mark Timmerman Post Office Homerville Ga.

State of Georgia, Clinch County. } I, W. T. Howell Ordinary of said County, certify that I am well acquainted with Mrs. Delila Timmerman, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 15 day of April 1840

Given under my official signature and seal, this the 9 day of January 1904.

{ Official Seal } W. T. Howell Ordinary of Clinch County.

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

{Official Seal.}

Ordinary of Clinch County.

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

{Official Seal.}

Ordinary of Clinch County,

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

Of Nov 1917
Tomlinson, Martha

Clinch County
No.

1911

Widow's Pension

UNDER ACT 1910.

County Clinch

Name Martha Tomlinson

Widow of Harris Tomlinson

Co-G-50.

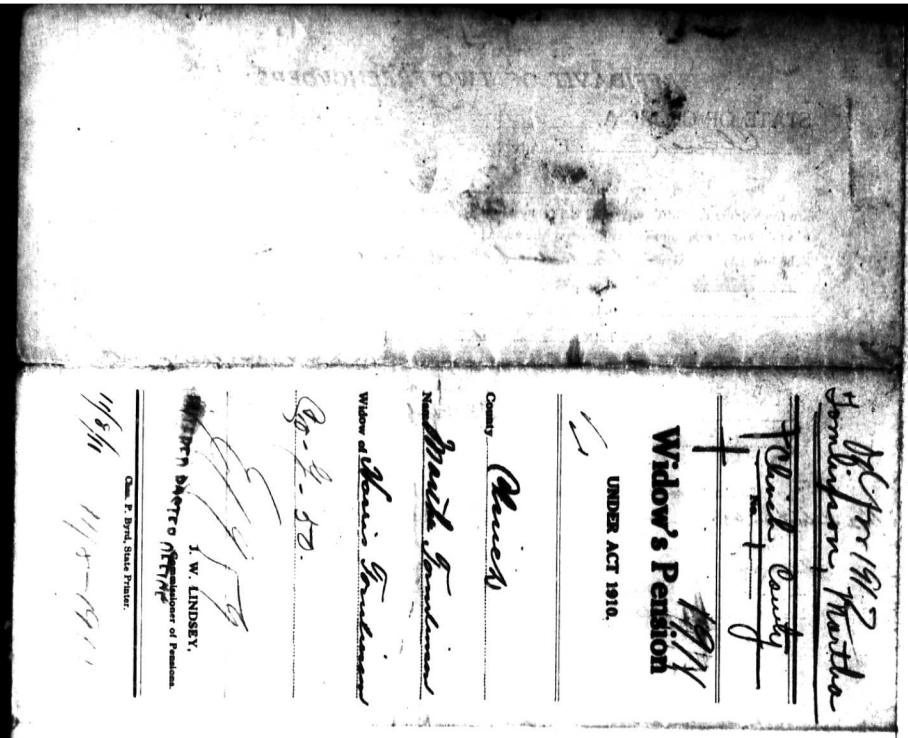
E/959

J. W. LINDSEY,
Commissioner of Pensions.

[illegible] PASTER OFFICE

Chas. P. Byrd, State Printer.

11/8/11 11/8-1911



Widow's Pension
UNDER ACT 1910.

Name Martha Tomlinson

Widow of Morris Tomlinson

Co. E. 5th

County Christ

J. W. LINDSEY,
Commissioner of Pensions.

Chas. P. Byrd, State Printer.

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

STATE OF GEORGIA,
Christ County.

Personally before me comes Martha Tomlinson 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? Martha Tomlinson Christ Co. 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? Virginia Tomlinson October 1867 in Christ Co
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.) March 4th 1862 at Somerville Ga Cawfords J. 5th Ga Reg.
5. When and where did the Commands of your husband surrender or discharge from the army? Va Virginia April 1865.
6. Was your husband personally present at the time of the surrender or discharge of this Command? No left sick March 10 1865 Petersburg
7. If he was not present state clearly where he was? at home
8. Where was his Command when he left? Va Virginia
   a. For what cause did he leave his command? Was sick
   b. By whose authority did he leave his Command? By Officer in Command
   c. For how long was he granted leave of absence? Not 20 days
   e. What was his physical condition when he left his Command? Was sick
   f. What effort did he make to return to his command? None
   g. In what way was he prevented from going back to Command? Was sick.
   h. Was he captured by the enemy at any time? No
   i. If so, when and where captured and where held as a prisoner, and when and for what cause released? —
   j. When and where did your husband die? In Christ County Ga May 14th 1899.
   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.) 1/2 Land Lying on South R&E Muscogee 7 Cr 1/2 Interest in Cash Christ County 60 Cr
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? Cause or Bonds. 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 1st day of Nov 1910.

her
Martha X Tomlinson
mark

J. A. Deane Ordinary.
of Christ County.

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

STATE OF GEORGIA,
Clinch County.

Personally before me comes John F. Register 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? John F. Register Clinch Co. Ga.
2. How long and since when have you known Martha Tomlinson applicant? Since Boyhood
3. How long and since when has she continuously resided in this State? (Give date.) I think all her life
4. When and to whom was she married? To Harris Tomlinson do you know? By my own knowledge
5. How long and since when did you know Harris Tomlinson her husband? All my life.
6. When and where did Harris Tomlinson the husband of Applicant die? In Clinch County, Miss. in May 1899
7. Where the Aplicant and her husband living together as husband and wife at the date of his death? Yes.
8. If not, how long did they live apart before his death? — Were they divorced? —
9. When, where and in what Company and Regiment did Harris Tomlinson enlist? June 1862. 4th day of March Homerville Ga Company F. 50th Georgia Regt
10. Were you a member of the same Company? Yes
11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? Until the Close of the war 1865.
12. When, and where did his Command surrender, and was discharged? In Virginia April 1865.
13. Were you personally present when it was surrendered? No If not where were you in Prison at Point Lookout and how came you there? Was Captured April 6th 1865.
14. Was the husband of applicant personally present at surrender? I think not If not where was he? he got him and got furlow a short time before the war Closed when, where and for what cause did he leave Command? (Give date.) got furlow a short time before surrender By whose authority did he leave his Command? By consent of Officer in Command and how long was he granted leave? not exact to day How do you know all this? By drawing in same Company & Reg with him and I know he performed the service. Myself a Soldier in Same Regiment.
15. For what cause, if you know of your own knowledge was he prevented from returning to his Command? War Close.
16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? he went and Close was not open I found him on my return home still here and not apply for Military Service

Sworn to and subscribed before me this the 1st day of Nov 1911 — J. F. Register

J. T. Dame Ordinary,

of Clinch County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,
Clinch County.

Personally before me comes J. A. Mathis & P. A. Register who on oath says that they are freeholders of said County and that they know Martha Tomlinson 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 12 Head Mixed Cattle and one Mule

Personal property	$ 157.00
Notes and accounts due	$
Total	$

Schedule (B).

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

Personal property None	$
Money, Notes and accounts	$

Schedule (C).

We also know what property she has now in her possession, use and control to wit:

1/2 Interest in 6	Acres of land worth	$ 60.00
1 Mule	Horses and Mules	$ 75.00
12 Head	Cows and Calves	$ 84.00
	Other property None	$
	Income and earnings	$
	Total Value of all property and effects	$ 219.00

Sworn and subscribed before me this the 1st day of Nov 1911 — J. A. Mathis, P. A. Register

J. T. Dame Ordinary,

of Clinch County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch County.

I J. T. Dame Ordinary of said County do certify that, I know Martha Tomlinson the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was in the 4th Nov. 1908.

That I also know J. F. Register the witness who swears to the service of husband, and J. A. Mathis & P. A. Register 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 Martha Tomlinson Returned for Tax is for 1908 $ Nothing for 1910 $ Nothing

Sworn under my hand and official seal of office this 1st day of Nov 1911

SEAL.

J. T. Dame Ordinary,

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 the 1st January 1870, are entitled.

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

.....day of ..... 191 ..

J. T. Dame ..... Ordinary,

of 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.

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.

Ordinary's Certificate

STATE OF GEORGIA,

CLINCH, COUNTY.

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

Sworn under my hand and official seal of office this 10th day of Oct. 1919.

(SEAL) W.V.Musgrove 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. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

No. Clinch Co.

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County Clinch

Name Mary E. Tomlinson

Widow of Samuel Tomlinson

Company K

Regiment 29 Ga Inf.

Approved

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-10-1919

Mr Record

Ordinary's Certificate

STATE OF GEORGIA,
CLINCH. COUNTY.

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

Sworn under my hand and official seal of office this 10th day of Oct. 1919.

(SEAL) W.V.Musgrove 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. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Tomlinson Mary E. 1919 1920 Dupont

No. Clinch Co

Widow's Pension
Under Act 1910—as Amended by Act of 1919.

County Clinch
Name Mary E. Tomlinson
Widow of Daniel Tomlinson
Company K
Regiment 29 Ga Inf.
Approved

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-10-1919

Mrs Record

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

Questions for Applicant

STATE OF GEORGIA,
CLINCH. COUNTY.

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

1. What is your name, and where do you reside? Mary E.Tomlinson.Stockton.Ga.
2. How long and since when have you been a continuing resident of the State of Georgia? all of my life.
3. When, where and to whom were you married? Feb 15th.1872.at Stockton.Ga. Samule Tomlinson.
   a. Have you married since the death of first and soldier husband? no.
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) Nov 1861.at Darien.Ga. Co K.29th Ga Regiment.he did inlist.Infantry.
5. When and where did the commands of your husband surrender or discharge from the army? he was a prisoner at Camp chase Ohio.
6. Was your husband personally present at the time of the surrender or discharge of this command? no he was in prison.
7. If he was not present state clearly where he was? in prison.
8. Where was his command when he left? near Nashville.Tenn.
   a. For what cause did he leave his command? he was 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? good.I think.
   f. What effort did he make to return to his command?
   g. In what way was he prevented from going back to Command by being in prison.
   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? Dec.1864.near Nashville.Tenn.at Camp Chase.Ohio.
   j. When and where did your first husband die? near Stockton.Ga.
   k. Were you residing together when he died? yes.
   l If not, how long had you resided apart?
   m. Are you now a widow? yes.
9. Have you or your husband heretofore been paid a pension by the State? yes

If so, when and for what cause were you or your husband placed on the roll? for the cause of a loss of an Eye.in the Army.he was on the Pention Roll in Echols.County.

Sworn to and subscribed before me this the 10th day of Oct. 19.19.

W.V.Musgrove Ordinary
of Clinch. County.
(SEAL)

her
Mary E Tomlinson
X
Mark

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA,
CLINCH COUNTY.

Personally before me comes M.Tomlinson, 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? M.Tomlinson.Stockton.Ga.

2. How long and since when have you known Mary E.Tomlinson. applicant?
45 or 50 years.

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

4. When and to whom was she married? Samula Tomlinson. How do you know? Witness

5. How long and since when did you know Samula Tomlinson. her husband? all of his life.

6. When and where did Samula Tomlinson. the husband of applicant, die? near Stockton,Ga.

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

8. If not, how long did they live apart before his death?
Were they divorced? no

9. When, where and in what Company and Regiment did Samula Tomlinson. enlist?
Nov 1861,at Varian,Ga. Co K.29th.Ga. Regment.

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

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

12. When and where did his Command surrender, and was discharged? he was in prison,
at Camp Chase Ohio.

13. Were you personally present when it was surrendered? no. If not, where were you at home. and how came you there? I was discharged and at home,as I had lost my rig left arm in battle.

14. Was the husband of applicant personally present at surrender? no. If not where was he? in prison,at Camp Chase Ohio. When, where and for what cause did he leave Command? (Give date.) captured. By whose authority did he leave his Command? And how long was he granted leave? How do you know all this?

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

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
10th day of Oct. 1919.
W.V.Montgomery Ordinary
of Clinch County.

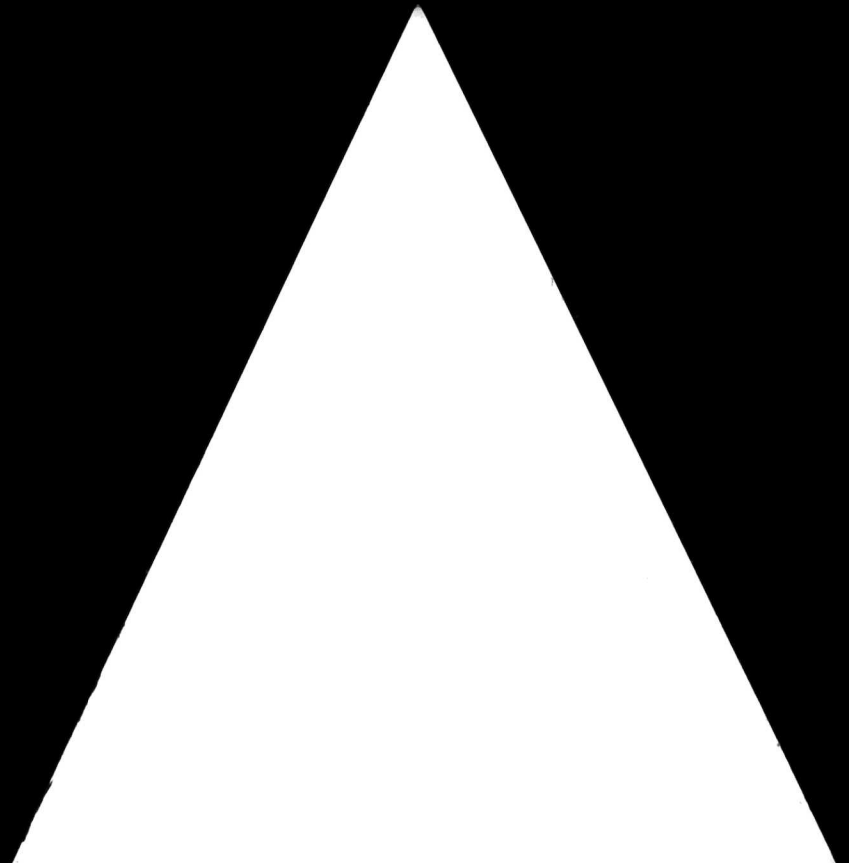
(SEAL)

M Tomlinson

[illegible] Ordinary

of Clinch County.

(SEAL)



Tomlinson, Moses
#1733

No. 774 Moses Tomlinson
Clinch Co

APPLICATION FOR

1429 Arm

FOR CONFEDERATE SOLDIER.

Moses Tomlinson

County Clinch

Limb Arm above elbow

Amount $60

Date of Warrant Jany 10th/80

Page

1880

Tomlinson #1133 Moses

No. 774 Moses Tomlinson Clinch Co

APPLICATION FOR

Lg Arm

For Confederate Soldier.

Moses Tomlinson

County Clinch

Limb Arm above elbow

Amount $60

Date of Warrant Jany 10 1880

Page

1180

STATE OF GEORGIA.

Clinch County.

Personally appeared before me Moses Tomlinson of the county of Clinch, State of Georgia, who, being duly sworn, deposes and says that he was on the 20th day of September, 1879, a bona fide resident of this State; that he enlisted in the military service of the Confederate States, or of this State, as a Private in Company H. 29th Regiment of Georgia Volunteers that while engaged in such military service, to-wit: at the battle or engagement of Jonesboro in the State of Georgia on the 31st day of August 1864, he was wounded in the arm, and that the same was amputated above the Elbow that he has not received the payment allowed him for such limb under an Act entitled an Act to carry into effect the last clause of Paragraph 1, Section 1, Article 7 of the Constitution of 1877, approved September 20th, 1879; that he has not supplied himself with an artificial Arm; or that, not having done so, he prefers to supply himself with an artificial

Sworn to and subscribed before me this 5th day of Jany 1880

W. S. Phillips J.P.

Moses Tomlinson

Note.—The above affidavit must be made before some officer authorized to administer oaths, a Judge of the Superior or County Court, Justice of the Peace, Clerk of the Superior Court, or Ordinary.

COMMISSIONED OFFICER'S AFFIDAVIT.

STATE OF GEORGIA.

County.

Personally came before me the county of ....., State of Georgia, who, being duly sworn, depose and says that he was ..... in Company ..... Regiment and that ....., the above deponent, was a ..... in said Company, and that this deponent knows that said, ... lost a ..... in the military service as said in the above affidavit.

Sworn to and subscribed before me this .....

..... day of ..... 18.....

Note.—If the affidavit of the commissioned officer is not obtainable, the following affidavit of three responsible citizens must be furnished.

AN ACT

To carry into effect the last clause of Paragraph 1, Section 1, Article 7 of the Constitution of 1877.

SECTION I. Be it enacted by the General Assembly of the State of Georgia, That any person now a *bona fide* resident of this State, who enlisted in the military service of the Confederate States, or of this State, who, while engaged in said military service, lost a limb or limbs, may furnish to the Governor of this State proof that such applicant has supplied himself with such needful artificial limb or limbs, and the Governor, on reception of such proof, is hereby authorized to draw his warrant on the Treasurer of this State in favor of such applicant for either amount hereinafter mentioned, to-wit: For a leg extending above the knee, one hundred dollars; for a leg not extending above the knee, seventy-five dollars; for an arm extending above the elbow, sixty dollars, for an arm not extending above the elbow, forty dollars: Provided, the said amounts of money may be allowed to any one entitled to the benefits of this Act who may prefer to supply himself with the said artificial limb.

SEC. II. Be it further enacted by the said authority, That such application shall contain proof of such applicants being entitled to the benefits of this Act, and shall further state whether arm or leg has been supplied. If an arm, whether extending above the elbow or not; if a leg, whether extending above the knee or not, and the Governor shall decide the sufficiency of the proof submitted.

SEC. III. Be it further enacted by the said authority, That no applicant shall receive the sum allowed under this Act oftener than once in five years.

SEC. IV. Be it further enacted by the authority aforesaid, That all laws and parts of laws in conflict with this Act be and the same are hereby repealed.

HENRY R. GOETCHIUS,
Secretary House Representatives.
WM. A HARRIS,
Secretary Senate.
Approved, September 10th, 1879.

A. O. BACON,
Speaker House Representatives.
RUFUS E. LESTER,
President Senate.

ALFRED H. COLQUITT, *Governor.*

STATE OF GEORGIA,

Clinch County.

Personally came John G. Norton W. B. N. Crews and J. W. Howell who, being duly sworn, depose and say they are acquainted with Moses Tomlinson and know that he lost a arm in the military service during the late war; that said arm was amputated above the Elbow; that he is a bona fide citizen of this State, and we are well satisfied that the facts stated by him in the above affidavit are true.

Sworn to and subscribed before me this 5th day of Jany 1880.

J. W. Howell
John G. Norton
W. B. N. Crews

C. A. Smith Clerk S.C.

STATE OF GEORGIA,

Clinch County,

I, C. A. Smith Clerk of the ~~Ordinary of~~ Superior Court of said county, do certify that I am well acquainted with Moses Tomlinson the applicant for a arm, and am well satisfied that the facts stated by him in the foregoing affidavit are true, and that I am well acquainted with John G. Norton W. B. N. Crews and J. W. Howell the citizens who make their affidavit, that they are respectable citizens of this county, and that the facts tated by them are true.

Given under my hand and official seal, this 5th day of January 1880

C. A. Smith Clerk S.C.

NOTES.

In order to avoid unnecessary delays to applicants, and to enable all parties interested to understand the laws granting allowances to disabled soldiers, as well as the rules adopted by the Governor touching the payments provided, the following suggestions are submitted:

1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physician, and followed by a plain statement of facts showing the *extent of the disability*. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.

2. The law makes no allowance for an arm or leg, unless the arm or leg has been rendered *substantially and essentially useless*.

3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of life, etc." There is no qualification to the clause of the Act in reference to the arm or leg, but the limb must for all purposes be "substantially and essentially useless."

4. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."

5. If papers are returned for correction, and amendments are *added* to any of the affidavits, the amendments must be made *under oath* before an officer, and the proofs must show that the amendments have been duly sworn to.

6. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.

The Ordinaries of the several counties are specially requested to call the attention of the physicians and applicants to these points.

Tomlinson, Moses.
Clinch Co.
H 20

No. 2228

APPLICATION FOR ALLOWANCE.

FOR

Loss of Arm

Applicant Moses Tomlinson

County Clinch

Amount 100

Date of Warrant May 17

Entered on record May 17 1889

W H H

SECRETARY EXECUTIVE DEPARTMENT.

No additional data.

W A W

For Use of Applicants Who Have not Heretofore Drawn.

STATE OF GEORGIA,
Clinch County.

PERSONALLY appears Moses Tomlinson of Clinch county, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has been such since the Twentyninth day of December 1861; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a private in Company H, of 29 th Regiment of Georgia Volunteers Wilson 's Brigade; that whilst engaged in such military service, at the battle of Jonesboro in the State of Georgia, on the 31st day of August 1864, he was wounded as follows: In the arm and that the same war amputated above the elbow

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

Sworn to and subscribed before me, this the 5th day of May 1889 } Moses Tomlinson

J. R. Allen J.P.

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

Commissioned Officer's Affidavit.

STATE OF GEORGIA,
County.

PERSONALLY came before me of the county of State of Georgia, who, being duly sworn, says that he was a commissioned officer in Company, of Regiment of Volunteers, and that deponent knows, and that he received the wounds (or contracted the disease) in the military service, as stated in his foregoing affidavit, and that wounds (or disease) permanently disables the said as stated by him in said affidavit. Deponent further states that said is a *bona fide* citizen of this State and resides in county.

The foregoing affidavit, changed to suit the facts should be made by a commissioned officer of Company or Regiment. If the affidavit of such an officer is not obtainable, the following affidavit of three responsible citizens should be furnished:

STATE OF GEORGIA,
Clinch County.

PERSONALLY came Harris Tomlinson William Touchstone and Jas. A. Mathis citizens of Clinch county, in said State, who, being duly sworn, say that they are acquainted with Moses Tomlinson and know that he received the wounds (or contracted the disease) in the military service, as stated by him in the foregoing affidavit; that said wounds (or disease) permanently disables applicant, as stated by him; that said applicant is a *bona fide* citizen of this State, and resides in Clinch county, and we are well satisfied that all the statements in his affidavit are true.

Sworn to and subscribed before me, this 2nd day of May 1887
J. R. Allen J.P

Harris Tomlinson
William Touchstone
Jas. A. Mathis

NOTE. Above affidavit *must* be made by three citizens *of the county of applicant's residence.*

STATE OF GEORGIA,
County.

PERSONALLY comes before me Ordinary of said county, and , both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined and after such examination say that the applicant has been injured as follows:

Sworn to and subscribed before me, this
day of 188

ORDINARY.

READ NOTE.—The physicians will state fully the extent of the wound, and then give facts to show the extent of the disability resulting therefrom.

STATE OF GEORGIA,
Clinch County.

I, George Cornelius Ordinary of said county, do certify that I am well acquainted with Moses Tomlinson 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. I also certify that the foregoing witnesses are persons of respectability, and that their statements are worthy of full credit and belief.

I further certify that J. R. Allen before whom the foregoing affidavits were made and power of attorney was signed, is a Justice of the Peace of said county, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 6th day of May 1887

George Cornelius
Ordinary Clinch County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

Know all Men by these Presents, That I, Moses Tomlinson of Clinch county, in said State, do hereby appoint W. A. Wright of Atlanta Ga, my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of 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 2nd day of April 1887

Moses Tomlinson (L. S.)

Executed in the presence of us:
Jas. A. Mathis
J. R. Allen J.P

Esthers
Stockton Ga

NOTES.

In order to avoid unnecessary delays to applicants, and to enable all parties interested to understand the law granting allowances to disabled soldiers, as well as the rules adopted by the Governor touching the payments provided, the following suggestions are submitted:

1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physician, and followed by a plain statement of facts showing the *extent of the disability*. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.

2. The law makes no allowance for a crippled *hand*, nor for a crippled foot, nor for an arm or leg, unless the arm or leg has been rendered *substantially and essentially useless*.

3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of life, etc." There is no qualification to the clause of the Act in reference to the arm or leg, but the limb must for all purposes be "substantially and essentially useless."

4. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."

5. It is more difficult to say when an arm is "substantially and essentially useless." The words are strong ones, however, and the injury must be very severe, and the arm in a badly damaged condition to entitle one to the allowance mentioned in the Act. The Legislature intended to limit these payments to such as were *most seriously wounded and disabled*. In the future they will doubtless provide for *all* who were badly injured, but the present law does not reach many worthy, needy cases. It was inaugurated as an experiment; if abused, it will naturally become unpopular and be repealed. If properly administered, will do great good.

6. If papers are returned for correction, and amendments are *added* to any of the affidavits, the amendments must be made *under oath* before an officer, and the proofs must show that the amendments have been duly sworn to.

7. The Ordinaries know the condition of applicants better than the Governor or his Secretaries, and they are earnestly requested to discourage any man from making application unless he is entitled under the law. Hundreds of applications have been received and disallowed because they were not disabled so as to entitle them under the law. This entails much unnecessary work upon this office; it causes delays in making payments to those who are entitled; it puts parties to expense and trouble, and in the end causes bitter disappointment and mortification.

8. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.

The Ordinaries of the several counties are specially requested to call the attention of the physicians and applicants to these points.

Tomlinson, Moses
Clinch Co

No. 1772

Application for Allowance

FOR 1890

Loss of Arm

Applicant Moses Tomlinson

County Clinch

Amount $100.00

Date of Warrant Feb 21st

Entered on Record.

Feb 22 1890

[illegible]

Secretary Executive Department.

No additional data

[illegible]

STATE OF GEORGIA,
Clinch County.

PERSONALLY appears Moses Tomlinson of Clinch county, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has been such since the 29th day of December 1861; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company H, of 29th Regiment of Georgia Volunteers Stephens's Brigade; that whilst engaged in such military service, at the battle of Jonesboro in the State of Georgia, on the 31st day of August 1864, he was wounded as follows: In arm and the same was amputated above the elbow

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and makes application for the allowance to which he is entitled thereunder.

Sworn to and subscribed before me, this the 22d day of January 1890 } Moses Tomlinson

J. R. Allen J.P.

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

COMMISSIONED OFFICER'S AFFIDAVIT.

STATE OF GEORGIA,
County.

PERSONALLY came before me of the county of State of Georgia, who, being duly sworn, says that he was a commissioned officer in Company , of Regiment of Volunteers, and that deponent knows , and that he received the wounds (or contracted the disease) in the military service, as stated in his foregoing affidavit, and that wounds (or disease) permanently disables the said , as stated by him in said affidavit. Deponent further states that said is a *bona fide* citizen of this State, and resides in county.

Sworn to and subscribed before me, this day of 188

The foregoing affidavit, changed to suit the facts, should be made by a commissioned officer of the Company or Regiment. If the affidavit of such an officer is not obtainable, the following affidavit of three responsible citizens should be furnished:

STATE OF GEORGIA,
Clinch County.

PERSONALLY came Harris Tomlinson
John A Taylor and W. W. Ayer
citizens of Clinch county in said State,
who, being duly sworn, say that they are acquainted with Moses Tomlinson
and know that he received the wounds (or contracted the disease) in the military service, as stated by him in the foregoing affidavit; that said wounds (or disease) permanently disables applicant, as stated by him; that said applicant is a *bona fide* citizen of this State, and resides in Clinch county, and we are well satisfied that all the statements in his affidavit are true.

Sworn to and subscribed before me, this
29th day of January 1890
J. R. Allen J.P

Harris Tomlinson
John A Taylor
W. W. Ayer

NOTE.—Above affidavit *must* be made by three citizens *of the county of applicant's residence.*

STATE OF GEORGIA,
County.

PERSONALLY comes before me Ordinary of said county
and , both known to
me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined and after such examination say that the applicant has been injured as follows:

Sworn to and subscribed before me, this
day of 188

ORDINARY

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

STATE OF GEORGIA,
Clinch County.

I, George Carnelius Ordinary of said county, do certify that I am well acquainted with Moses Tomlinson 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. I also certify that the foregoing witnesses are persons of respectability, and that their statements are worthy of full credit and belief.

I further certify that J. R. Allen before whom the foregoing affidavits were made and power of attorney was signed, is a Justice of Peace of said county, and that the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 29th day of January 1890

George Carnelius
Ordinary Clinch County.

When you have this please return to me M. T.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

Know all men by these presents, That I Moses Tomlinson of Clinch county, in said State, do hereby appoint W. A. Wright of Atlanta 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 twenty second day of January 1890

Moses Tomlinson [L. S.]

Executed in the presence of us:

A. L. Foreman
J. R. Allen J. P

STATE OF GEORGIA,
Clinch County.

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

I further certify that R. S. Holzendorf before whom the foregoing affidavits were made and power of attorney was signed, is a Notary Public of said county, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 19th day of January 1891

George Cornelius
Ordinary Clinch County.

STATE OF GEORGIA,
Clinch County.

I, George Cornelius Ordinary of said county, do certify that I am well acquainted with Moses Tomlinson the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, *and that he is disabled, to the extent he claims*, and I know he is the individual he repesents himself to be, and that he resides in this county.

Given under my official signature and seal, this 1st day of April 1892

George Cornelius
Ordinary Clinch County.

Tomlinson, Moses
1891
1890.
Tomlinson, Moses
Clinch Co
[illegible]

No. 97
APPLICATION FOR ALLOWANCE.
FOR YEAR ENDING OCTOBER 26, 1892
—FOR—
Loss of Arm
Applicant, Moses Tomlinson
County, Clinch
Amount, 100
Date of warrant, Feb 4
Entered on record Feb 4 1891
W.H.H.
Secretary Executive Department.
Date
WARRANT HANDED TO
W. Wright

Tomlinson, Moses
Clinch Co.
No. 798

SOLDIER'S PENSION.
1892.
FOR THE YEAR ENDING OCTOBER 26, 1892.

Name Moses Tomlinson
County Clinch
Disability Loss of Arm
Amount, $ 100
Entered on record April 1 1892.
W. H. HARRISON,
Secretary of Executive Department.
No Date
AGENT.
W.H.H.
Geo. W. Harrison, State Printer, Atlanta, Ga.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

PERSONALLY appears Moses Tomlinson of Clinch county, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has been such continually since the Twenty ninth day of December 1861; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company H, of 29th Regiment of Georgia Volunteers Jacksons 's Brigade; that whilst engaged in such military service, at the battle of Jonesboro in the State of Georgia, on the 31st day of August, 1867, he was wounded as follows: In arm above elbow from which amputation was necessary

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

Sworn to and subscribed before me, this the 19th day of January 1891

Moses Tomlinson

R. S. Hazendorf N.P.

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

POWER OF ATTORNEY.

STATE OF GEORGIA
Clinch County.

KNOW ALL MEN BY THESE PRESENTS, That I, Moses Tomlinson of Clinch county, in said State, do hereby appoint William A Wright of Atlanta my true and lawful attorney in fact, for me and in my name, to receive and receipt for what ever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

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

Moses Tomlinson [L. S.]

Executed in the presence of us:

C. C. Giffen
R. S. Hazendorf, N.P.

DIRECTION.

Send ~~money~~ to me as follows, by Give me credit on my age with State for ~~to~~ taxes P. O.

County, Georgia.

Moses Tomlinson

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

PERSONALLY appears Moses Tomlinson of Clinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of Georgia, and has been such continuously since the 29th day of December 1861; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company H, of 29 th Regiment of Georgia Volunteers Jackson 's Brigade; that whilst engaged in such military service at the battle of Jonesboro in the State of Georgia, on the Thirty first day of August 1864, he was wounded as follows: In arm which resulted in the amputation the same

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

Sworn to and subscribed before me this the 1st day of April 1892.

M Tomlinson

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.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

Know all Men by these Presents, That I, Moses Tomlinson of Clinch County, in said State, do hereby appoint Wm A Wright of Atlanta Ga my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of 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 First day of April 1892.

Moses Tomlinson [L. S.]

Executed in the presence of us:

J. E. Jackson

B. G. Mathis

DIRECTION.

~~Send money to me as follows, by~~ Pay money to R W Hardeman State to Treasurer P. O.

~~County, Georgia.~~

Moses Tomlinson

STATE OF GEORGIA,
Clinch County,

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

Given under my official signature and seal, this 13th day of March 1893.

George Cornelius
Ordinary Clinch County.

Sanderson, M.
Clinch Co.
No. 557

SOLDIER'S PENSION.
1893 3

FOR THE YEAR ENDING OCTOBER 26, 1892.

Name Moses Sanderson
County Clinch
Disability Loss of Arm
Amount, $ 100
Entered on record 3/18 1892.

W. H. HARRISON,
Secretary of Executive Department

AGENT.
W A Wright

Geo. W. Harrison, State Printer, Atlanta, Ga.
No Date

Heretofore Allowed Pensions.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 13th day of March 1894.

M Sanderson [L. S.]

Executed in the presence of us
Jesse B. Bennett
George Cornelius Ordinary

DIRECTIONS.

~~Send money to me as follows, by~~ Place the amount to my credit on acct. with the State P. O.
County, Georgia.

M Sanderson

Sanderson, M.
Clinch Co.
(For Those Already Enrolled.)
No. 553

Soldier's Pension.
1894.

Name M Sanderson
County Clinch
Disability Loss of Arm
Amount, $ 100
3/17 1894.

W. H. HARRISON,
Secretary Executive Department.

WARRANT HANDED TO
W A Wright

Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

PERSONALLY appears Moses Tomlinson of Clinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of Georgia, and has been such continuously since the 29th day of December 1861; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company H, of 29 th Regiment of Georgia Volunteers Jackson's Brigade; that whilst engaged in such military service at the battle of Jonesboro in the State of Georgia, on the Thirty first day of August 1864, he was wounded as follows:
In left arm from the Affects of which the arm was amputated above the elbow

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

Sworn to and subscribed before me this the 13th day of March 1893. M Tomlinson

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.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

Know all Men by these Presents, That I, Moses Tomlinson of Clinch County, in said State, do hereby appoint W A Wright of City of Atlanta 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 13th day of March 1893. M Tomlinson [L. S.]

Executed in the presence of us:
J. E. Jackson
J. S. Mathis

DIRECTION.

Send money to me as follows, by Express after balance on my ap with State at expense to Stockton P. O.
Clinch County, Georgia.
Moses Tomlinson

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

PERSONALLY appears M Tomlinson of Clinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 29th day of December 1861; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company H, of 29 th Regiment of Georgia Volunteers Jackson's Brigade; that whilst engaged in such military service at the battle of Jonesboro in the State of Georgia, on the 31st day of August 1864, he was wounded as follows:
In left arm which was amputated above the elbow

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1894. I have heretofore been allowed a pension of one hundred dollars, for the year 1892

Sworn to and subscribed before me, this, the 13th day of March 1894. M Tomlinson

George Cornelius ordinary

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

STATE OF GEORGIA,
Clinch County.

I, George Cornelius Ordinary of said County, do certify that I am well acquainted with M Tomlinson 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 13th day of March 1894.

Affix your seal here.

George Cornelius
Ordinary Clinch County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

KNOW ALL MEN BY THESE PRESENTS, That I, M Tomlinson of Clinch County, State of Georgia, do hereby appoint W. A. Wright of Atlanta Ga, my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate States (or of this State) as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

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

M Tomlinson [L. S.]

Executed in presence of us

H. Tomlinson

George Cornelius Ordinary

DIRECTIONS.

~~Send money~~ to me as follows, by When collected place to my credit on at wish State for year ~~to~~ 1894 P.O.

County, Georgia.

M Tomlinson

Tomlinson, M.
Clinch Co.

(For Those Already Enrolled.)

No. 2854

SOLDIER'S PENSION.

1895.

Name M. Tomlinson
County Clinch
Disability Loss of Arm
Amount, $100.00
3/15 1895.

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO
Alt

Geo. W. Harrison, State Printer, Atlanta.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, M Tomlinson hereby authorize W. A. Wright of Atlanta Ga, to receive and receipt for the pension paid hereon and request that he remit same to R. W. Hardeman State ~~by~~ Treasurer at Atlanta.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 4th day of February 1896.

M Tomlinson [L. S.]

Executed in presence of us

William Starling

George Cornelius
Ordinary

Tomlinson, M.
Clinch Co.

ACT OF 24 OCT., 1887.

(For Those Already Enrolled.)

No. 729

SOLDIER'S PENSION.

1896.

Name M Tomlinson
County Clinch
Disability
Amount, $100
2/26 1896

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO
Alt

Geo. W. Harrison, State Printer, Atlanta.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears M Tomlinson of Clinch

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 29th day of December 1861; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company H, of 29th Regiment of Georgia Volunteers, Jackson 's Brigade; that whilst engaged in such military service at the battle of Jonesboro in the State of Georgia, on the 31st day of August 1864, he was wounded as follows: On arm, and amputation was performed above the elbow

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

Sworn to and subscribed before me, this the 5th day of Febr 1895.

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

STATE OF GEORGIA,
Clinch County.

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

Given under my official signature and seal, this 5th day of February 1895.

Affix your seal here

George Cornelius

Ordinary Clinch County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch County.

Personally appears M Tomlinson of Clinch

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 29th day of December 1861; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company H, of 29th Regiment of Georgia Volunteers, Stephens 's Brigade; that whilst engaged in such military service in the State of Georgia, on the 31st day of August 1864, he was wounded, ~~injured or diseased as follows~~: in Arm which was Amputated above elbow

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

Sworn to and subscribed before me, this the 4th day of February 1896.

M Tomlinson

George Cornelius Ordinary

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

STATE OF GEORGIA,
Clinch County.

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

Given under my official signature and seal, this 4th day of February 1896.

Affix your seal here.

George Cornelius

Ordinary Clinch County.

BOARD OF VISITORS

and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26th, 1895. I have heretofore been allowed a pension of one hundred dollars, for the year 1894

Sworn to and subscribed before me, this the 5th day of Feb 1895.

Judge C. Mills Ferrell

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

STATE OF GEORGIA, Clinch County.

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

Given under my official signature and seal, this 5th day of February 1895.

Affix your seal here

George Cosmelius

Ordinary Clinch County.

Clinch county been allowed a pension of one hundred dollars, for the year 1895.

Sworn to and subscribed before me, this the 4th day of February 1896.

M Tomlinson

George Cosmelius ordinary

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

STATE OF GEORGIA, Clinch County.

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

Given under my official signature and seal, this 4th day of February 1896.

Affix your seal here

George Cosmelius

Ordinary Clinch County.

POWER OF ATTORNEY.

STATE OF GEORGIA, Clinch County.

I, M Tomlinson hereby authorize William A Wright Comptroller of Atlanta Ga, to receive and receipt for the pension paid hereon and request that he remit same to my credit on account by State as Tax Collector for Clinch County

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 9th day of January 1897.

M Tomlinson [L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA, Clinch County.

I, M Tomlinson hereby authorize Wm A Wright of Atlanta Ga. to receive and receipt for the pension paid hereon and request that he remit same to M Tomlinson by Check at Stockton Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this third day of January 1898.

M Tomlinson [L. S.]

Executed in presence of

B J Mallis

D L Tomlinson

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County,

I, M. Tomlinson hereby authorize William A Wright Comptroller of Atlanta Ga to receive and receipt for the pension paid hereon and request that he ~~remit~~ the same to my credit on ap with by State as Tax Collector to Clinch County

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 9th day of January 1897.

M. Tomlinson [L. S.]

Executed in presence of

George C. McCleary
Ordinary

Tomlinson M.
Clinch Co.
ACT OF 24 OCT., 1887.
(For Those Already Enrolled.)
No. 1490

INVALID
SOLDIER'S PENSION.
1897.

Name M. Tomlinson
County Clinch
Disability Left arm off
Amount, $ 100
2/22 1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
Wm A W

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, M. Tomlinson hereby authorize Wm A Wright of Atlanta Ga. to receive and receipt for the pension paid hereon and request that he remit same to M. Tomlinson by Check at Stockton Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this third day of January 1898.

M. Tomlinson [L. S.]

Executed in presence of
B. G. Mattis
O. L. Tomlinson

Tomlinson, M.
Clinch Co.
ACT OF 24 OCT., 1887.
(For Those Already Enrolled.)
No. 3

INVALID
SOLDIER'S PENSION.
1898.

Name M. Tomlinson
County Clinch
Disability Loss arm
Amount, $ 100.00
1/6 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
W. A. W.

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch **County.**

Personally appears M Tomlinson of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 29th day of December 1861; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company H, of 29th Regiment of Georgia Volunteers, Jackson's Brigade; that whilst engaged in such military service in the State of Georgia, on the 31st day of August 1864, he was wounded, injured or diseased of follows:

In arm, which amputated above the elbow

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

Sworn to and subscribed before me, this, the 9th day of January 1897. } M Tomlinson POST OFFICE Stockton

George Cornelius Ordinary

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

STATE OF GEORGIA,
County.

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

Given under my official signature and seal, this 9th day of January 1897.

Affix your seal here.

George Cornelius
Ordinary Clinch County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch **County.**

Personally appears M Tomlinson of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 29th day of December 1861; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a private in Company H, of 29th Regiment of Georgia Volunteers, Jackson's Brigade; that whilst engaged in such military service in the State of Georgia, on the 31st day of August 1864, he was wounded, injured or diseased as follows:

in arm which was amputated above elbow

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1898. I have heretofore under said law as a resident of Clinch county been allowed an invalid pension of One hundred Dollars, for the year 1897.

Sworn to and subscribed before me, this, the 3rd day of January 1898. } M Tomlinson POST-OFFICE Stockton Ga

George Cornelius Ordinary

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

STATE OF GEORGIA,
Clinch **County.**

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

Given under my official signature and seal, this third day of January 1898.

Affix your seal here.

Georg Cornelius
Ordinary Clinch County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, M Tomlinson hereby authorize William A Wright of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to Ordinary of Clinch Co by check at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 16th day of January 1899.

M Tomlinson [L. S.]

Executed in presence of
George Cornelius
Ordinary

Tomlinson M
Clinch County

CODE SECTION 1250
(For Those Already Enrolled.)

No. 408

INVALID
SOLDIER'S PENSION.
1899.

Name M Tomlinson
County Clinch
Disability Loss of arm
Amount, $100 a
2/15 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
Wards

GEO. W. HARRISON, STATE PRINTER, ATLANTA

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, M Tomlinson hereby authorize Wm A Wright of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to Ordinary by at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 13th day of January 1900.

M Tomlinson [L. S.]

Executed in presence of
O L Tomlinson

Tomlinson M
Clinch G

CODE SECTION 1250
(For Those Already Enrolled.)

No. 3032

INVALID
SOLDIER'S PENSION.
1900.

Name M Tomlinson
County Clinch
Disability Arm amputated
Amount, $ 100
Warrant issued Apr 13 1900.

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 M. Tomlinson of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 29th day of December 1860; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company H, of 29th Regiment of Georgia Volunteers, Jackson's Brigade; that whilst engaged in such military service in the State of Jonesboro, on the 31st day of August 1864, he was wounded, injured or diseased as follows:

in arm which was amputated above elbow

Deponent makes application for the pension to which he is entitled for the year ending October 29th, 1899. I have heretofore under said law as a resident of Clinch County been allowed an invalid pension of one hundred Dollars, for the year 1899.

Sworn to and subscribed before me, this, the 16th day of January 1899. M. Tomlinson
POST OFFICE Stockton Ga

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

STATE OF GEORGIA,
Clinch County.

I, George Connelius Ordinary of said County, do certify that I am well acquainted with M Tomlinson 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 16th day of January 1899.

Affix your seal here

George Connelius
Ordinary Clinch County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch, County.

Personally appears M Tomlinson of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State and County, and has resided therein continuously ever since the 29th day of Dec. 1860; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company H, of 29th Regiment of Georgia Volunteers, Jackson's Brigade; that whilst engaged in such military service in the State of Georgia on the 31st day of August 1864, he was wounded, injured or diseased as follows:

in arm which was amputated above elbow

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1900. I have heretofore under said law as a resident of Clinch County been allowed an invalid pension of one hundred Dollars, for the year 1899.

Sworn to and subscribed before me, this, the 13th day of January 1900. M Tomlinson
POST OFFICE Stockton Ga

George Connelius Ordinary

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

STATE OF GEORGIA,
County.

I, George Connelius Ordinary of said County, do certify that I am well acquainted with M. Tomlinson 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 13th day of January 1900.

Affix your seal here.

George Connelius
Ordinary Clinch County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I M Tomlinson hereby authorize William A Wright of Atlanta to receive and receipt for the pension paid hereon and request that he remit same to Ordinary by Chick at Homerville

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 21st day of February 1901.

M Tomlinson [L. S.]

Executed in presence of

W T Howell Ordinary

Tomlinson, Moses
Clinch Co

CODE SECTION 1793
(For Those Already Enrolled.)

No. 3410

~~DISABLED~~

~~SOLDIER'S~~ PENSION.

1901.

Name M Tomlinson
County Clinch
Disability
Amount, $ 100.

3/19 1901.

JOHN W. LINDSEY,
[redacted]
Commissioner of Pensions.

WARRANT HANDED TO
Mr

Geo. W. Harrison, State Printer, Atlanta.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I hereby authorize William A Wright of Atlanta to receive and receipt for the pension paid hereon and request that he remit same to Ordinary Clinch Co by at

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 21st day of January 1902

M Tomlinson [L. S.]

Executed in presence of

W T Howell Ordinary

Tomlinson, M. (Moses)
Clinch County

CODE SECTION 1793
(For Those Already Enrolled.)

No. 2926.

DISABLED

SOLDIER'S PENSION.

1902.

H-29 1902

Name M. Tomlinson
County Clinch
Disability
Amount, $ 2/14 100

3/14 1901.

JOHN W. LINDSEY,
[redacted]
Commissioner of Pensions.

WARRANT HANDED TO
Mr

Geo. W. Harrison, State Printer, Atlanta.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch **County.**

Personally appears M Tomlinson of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 29th day of December 1861; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company H, of 29th Regiment of Georgia Volunteers, Jackson's Brigade; that whilst engaged in such military service in the State of Georgia, on the 31st day of August 1864, he was wounded, injured or diseased as follows: ~~was killed~~ In arm which was amputated above elbow

~~Yes I do not wish to have my pension increased and do not desire to be examined before the Board of Examining Surgeons.~~

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

Sworn to and subscribed before me, this the 21st day of February 1901. M Tomlinson Postoffice Stockton Ga. W J Howell Ordinary.

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

STATE OF GEORGIA,
Clinch **County.**

I, William J Howell Ordinary of said County, do certify that I am well acquainted with M Tomlinson 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 21st day of February 1901.

W J Howell
Ordinary of Clinch County.

Affix your seal here

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Clinch **County.**

Personally appears M Tomlinson of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 29th day of December 1861; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company H, of 29th Regiment of Georgia Volunteers, Jackson's Brigade; that whilst engaged in such military service in the State of Georgia, on the 31st day of August, 1864, he was wounded, injured or diseased as follows: In arm Which was amputatia above elbow

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

Sworn to and subscribed before me, this the 21st day of January 1902. M Tomlinson Postoffice Stockton W J Howell Ordinary

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

STATE OF GEORGIA,
Clinch **County.**

I, W J Howell Ordinary of said County, do certify that I am well acquainted with M Tomlinson 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 21st day of January 1902.

W J Howell
Ordinary Clinch County.

Affix your seal here

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, M Tomlinson hereby authorize William A Wright of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to self by Check at Stockton Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 29th day of January 1903.

M. Tomlinson [L. S.]

Executed in presence of
W J Farrell

Tomlinson, Mose
Clinch Co.
CODE SECTION 1456.
(FOR THOSE ALREADY ENROLLED.)
No. 2744

DISABLED
SOLDIER'S PENSION
1903.

Name M. Tomlinson
County Clinch
Co. F 29 Regiment
Disability Loss arm
Amount, $ 100
Feb 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Self

Geo. W. Harrison, State Printer, Atlanta.

Via Lata

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, M Tomlinson hereby authorize William A Wright of Atlanta Ga to receive and receipt for the pension paid hereon, and request that he remit same to Ordinary Clinch County by check at Homerville Ga

In Witness Whereof, I have hereunto set my hand and seal, this 2nd day of February 1904.

[L. S.]

Executed in the presence of
W J Farrell Ordinary

Tomlinson, Mose
Clinch Co.
CODE SECTION 1456.
(FOR THOSE ALREADY ENROLLED.)
No. 2625

DISABLED
SOLDIER'S PENSION
1904.

Name M. Tomlinson
County Clinch
Co. Regiment
Disability
Amount, $ 100 00
FEB 24 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Check

Geo. W. Harrison, State Printer, Atlanta.

Via Lata

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County.

Personally appears M Tomlinson of Clinch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 29th day of December 1861; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a Private in Company H, of 29th Regiment of Georgia Volunteers, Jackson's Brigade; that whilst engaged in such military service in the State of Georgia, on the 31st day of August 1864, he was wounded, injured or diseased as follows:
In Arm which resulted in the amputation of same above the elbow

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

Sworn to and subscribed before me, this the 29th day of January 1903. M Tomlinson
Post-office Stockton
W T Howell Ord

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

STATE OF GEORGIA,
Clinch County.

I, W. T. Howell Ordinary of said County, do certify that I am well acquainted with M Tomlinson 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 29 day of Jan 1903.

W T Howell
Ordinary Clinch County.

Affix your seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County.

Personally appears M Tomlinson of Clinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 29th day of December 1860; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a Private in Company H, of 29th Regiment of Georgia Volunteers Jackson's Brigade; that whilst engaged in such military service in the State of Georgia, on the 31st day of August 1864, he was wounded, injured or diseased as follows:
in arm which was amputated above elbow

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

Sworn to and subscribed before me, this the First day of February 1904. M Tomlinson
W T Howell Ordinary
Post-office [illegible]

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

STATE OF GEORGIA,
Clinch County.

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

Given under my official signature and seal, this First day of February 1904.

W T Howell
Ordinary Clinch County.

Affix your seal here

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, Moses Tomlinson hereby authorize William A. Wright of Atlanta to receive and receipt for the pension paid hereon, and request that he remit same to Ordinary Clinch County by ... at Homerville Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 23rd day of January 1905.

Moses Tomlinson [L. S.]

Executed in the presence of

Tomlinson, Moses
Clinch County

CODE SECTION 1250.
(FOR THOSE ALREADY ENROLLED.)

No. 2560

DISABLED
SOLDIER'S PENSION
1905.

Name Moses Tomlinson
County Clinch
Co. Regiment
Disability
Amount, $ 100

MAR 1 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
W

THE FRANKLIN PRINTING AND PUBLISHING CO., ATLANTA
GEO. W. HARRISON, MANAGER, FOR STATE PRINTER

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, Moses Tomlinson hereby authorize William A. Wright of Atlanta to receive and receipt for the pension paid hereon, and request that he remit same to J. T. Dame ordinary by mail at Homerville Ga.

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

M. Tomlinson [L. S.]

Executed in the presence of

J. T. Dame

Tomlinson, M.
Clinch County

CODE SECTION 1250.
(FOR THOSE ALREADY ENROLLED.)

No. 283

DISABLED
SOLDIER'S PENSION
1906.

Name M. Tomlinson
County Clinch
Co. Regiment 30th
Disability Loss of Sed Arm
Amount, $100

JAN 26 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
W. A. W.

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

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch COUNTY.

Personally appears Moses Tomlinson of Clinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 29th day of December 1861; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company H, of 29th Regiment of Georgia Volunteers Dawson's Brigade; that whilst engaged in such military service in the State of Georgia, on the 31st day of August 1864, he was wounded, ~~injured or diseased as~~ follows: In arm which resulted in amputation above the elbow

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

Sworn to and subscribed before me, this the 23rd day of January 1905.

Moses Tomlinson

Post-office Stockton

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

STATE OF GEORGIA,
Clinch COUNTY.

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

Given under my official signature and seal, this 23rd day of January 1905.

Affix your seal here.

J. T. Dame
Ordinary Clinch County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Clinch **County.**

Personally appears M Tomlinson of Clinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 29th day of December 1861; that he enlisted in the military service of the Confederate States, (or of the State of Ga) during the war between the States, and served as a Private in Company H, of 29th Regiment of Georgia Volunteers Dawson's Brigade; that whilst engaged in such military service in the State of Georgia, on the 31st day of August 1864, he was wounded, injured or diseased as follows: In arm which was amputated above elbow

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1906. I have heretofore, under said law, as a resident of Clinch County, been allowed an invalid pension of Five hundred Dollars, for the year 1905.

Sworn to and subscribed before me, this the 2nd day of January 1906.

J. T. Dame
Ordinary

M Tomlinson

Post-Office Stockton

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

State of Georgia,
Clinch **County.**

I, J. T. Dame Ordinary of said County, do certify that I am well acquainted with M. Tomlinson 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 Second day of January 1906.

Affix your seal here.

J. T. Dame
Ordinary Clinch County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, Moses Tomlinson, hereby authorize
W. A. Wright of Atlanta Ga
to receive and receipt for the pension paid hereon, and request that he remit same to
L. T. Dame ordinary by mail
at Homerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 1
day of Jan 1907.

M Tomlinson [L. S.]

Executed in presence of
L T Dame

Tomlinson, Moses,
Clinch Co.,

Code Section 1250.
(FOR THOSE ALREADY ENROLLED)

No. 1575.

DISABLED
SOLDIER'S PENSION
1907.

Name Moses Tomlinson
County Clinch
Co. F Regiment 20 Ga
Disability Loss of left arm
Amount, $ 100

1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. HARRISON, STATE PRINTER, ATLANTA.

Audited May 23 1889.
Wm A Wright
COMPTROLLER GENERAL

Clinch
Maimed Soldiers.

Voucher No. 2228
Amount, $ 100
Paid to Moses Tomlinson
For Loss of arm
Ann
c May 8 1889.

Included in Warrant No.
issued to Treasurer.
[illegible] 1889.

WARRANT CLERK.

W. J. Campbell, State Printer, Constitution Job Office.

Ware

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
Clinch County.

Personally appears Moses Tomlinson of Clinch County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 29 day of Dec 1866; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company H, of 29th Regiment of Georgia Volunteers Jacksons's Brigade; that whilst engaged in such military service in the State of Georgia, on the 31st day of August 1864, he was wounded, injured or diseased as follows: The loss of left arm at Jamesburg Ga Aug 31st 1864. Limb was amputated above the Elbo.

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1907. I have heretofore, under said law, as a resident of Clinch County, been allowed an invalid pension of One hundred Dollars, for the year 1906.

Sworn to and subscribed before me, this the 1 day of Jan 1907.
J. T. Dame

M. Tomlinson
Postoffice Stockton Ga

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

State of Georgia,
Clinch County.

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

Given under my official signature and seal this 1st day of Jan 1907.

J. T. Dame
Ordinary Clinch County.

Affix your seal here

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

No. 2228

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga May 18 1889.

Mr Moses Tomlinson of the County of Clinch having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Act, Dec. 24, 1888, and the same having been allowed for Loss of Arm

He is entitled to receive the sum of One Hundred & 00/ Dollars for such disability, the same being the allowance due for the year ending October, 24, 1889

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

TREASURER'S OFFICE STATE OF GEORGIA PAID

R. B. Gordon
GOVERNOR.

By the Governor
W H Harrison
CLERK EXECUTIVE DEPARTMENT.

100
RECEIVED OF STATE TREASURER, R U HARDEMAN,
One Hundred & 00/ Dollars,
per above voucher, this 18 of May 1889.

Moses Tomlinson
W A Wright

Audited Feb 24 1890
Wm A Wright
COMPTROLLER-GENERAL.

Clinch

Maimed Soldiers.

Voucher No. 1722

Amount $ 100.

Paid to Moses Tomlinson

For Loss of Arm

Feby 22 1890

Included in warrant No.

issued to Treasurer.

Credit 1 18
Tax act.

WARRANT CLERK.

W. J. Campbell, State Printer, Constitution Job Office.

W. A. Wright

Audited Feb. 6 1891.
Wm A Wright
COMPTROLLER-GENERAL.

Tomlinson, Moses
Credit
a/c with State for taxes
Clinch

1891.

Maimed Soldiers.

Voucher No. 97

Amount $ 100

Paid to Moses Tomlinson

For Loss of Arm

Feby 5. 1891.

Included in warrant No.

issued to Treasurer.

1891.

WARRANT-CLERK.

Geo. W. Harrison, State Printer, Atlanta.

W. A. Wright
Applicant

No. 1722

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. } Atlanta, Ga., Feb. 22 1890

Mr. Moses Tomlinson of the County of Clinch having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Act, approved, Dec. 24, 1888, and the same having been examined and allowed for

Loss of arm

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

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

L/E Gordon
GOVERNOR.

By the Governor,

W A Harrison
CLERK EXECUTIVE DEPARTMENT.

$ 100 00

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

One Hundred 00/ Dollars,

per above voucher, this 22 of Feb 1890

Moses Tomlinson

W A W

1891.

No. 97

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. } Atlanta, Ga. Feby 5 1891.

Mr. Moses Tomlinson of the County of Clinch having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Acts approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for

Loss of arm

He is entitled to receive the sum of One Hundred Dollars for such disability, the same being the allowance due for the year ending October 24, 1891.

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

H. J. Norton.
GOVERNOR.

By the Governor,

W A Harrison
SEC'Y EXECUTIVE DEPARTMENT.

$ 100 00

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

One Hundred 0 0/ Dollars,

per above voucher, this 5 of Feby 1891.

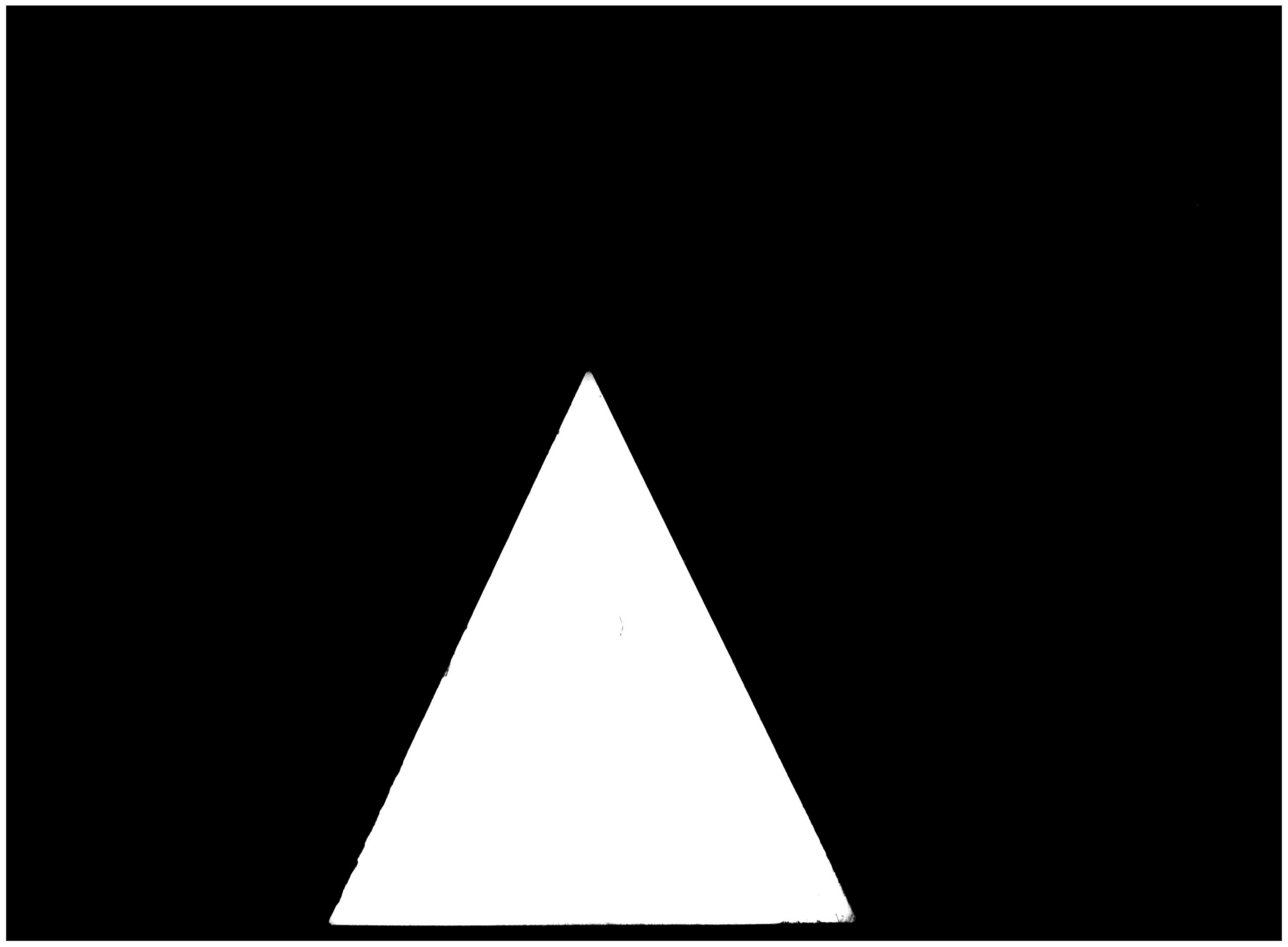
M Tomlinson

W A W

Clinch Co Ga march the 26 1893

To Mr W H Harison my Dear Brother and Friend in Christ Jesus our Lord it is again that I seate my Self to Write you afue lines to ask you to act as my attorney to drow my money fore me and Sende it to me at Stockton Ga as I have moved from coffee Co to Clinch I can State to you the case of my move I had to make the move Because I coulde not Get any land up there and I Lefte there to Get me Sume more outlet I had a Small Place on the B&W Railroad and Thay killed up my Sock so Bad that I could not have any Stock only What I could keep up and feede and I only about 50 acors of land up there So I think that I am Still intitle to my money as I am yet in the Stat of Ga so as I think that I give you my reason I Will Close - By Saying to you to rite to me at to dyrect youre letter to T. J. Sauls Stockton Ga in care of Mr R S thigpen So as I Will no When to go to the express offes So I Still remain yourse as ever

T. J. Sauls



Tomlinson Thomas
Clinch Co.

No. 3027

INDIGENT PENSION

1897. / 1897

Name Thomas Tomlinson

County Clinch

Approved 7/10 1897.

E/754

WARRANT HANDED TO

W.A.W

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

7/10 97 4/9/97

Pension Office 5/10 1897
The physicians do not appear to have been sworn
Rich. Johnson
Com. of Pensions

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County.

I, Thomas Tomlinson hereby authorize
W. A. Wright Comptr Genl of Atlanta Ga
to receive and receipt for the pension allowed and request that he remit same to Thomas
Tomlinson at Homerville Ga by Express (Eal)
in care of ordinary
Witness my hand and seal this 8th day of April 1897.

Executed in presence of
D. W. Register } Thomas his x mark Tomlinson
Clerk Supr Court.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Chinch County.

I, Thomas Tomlinson hereby authorise
D. A. Wright Capt Gus of Atlanta Ga
to receive and receipt for the pension allowed and request that he remit same to Thomas
Tomlinson at Homerville Ga by Express (col)
in care of Ordinary
Witness my hand and seal this 8th day of April 1897.

Executed in presence of
D. A. Wright
Clerk Superior Court

Thomas his x mark Tomlinson

Thomas Tomlinson
Colored
Chinch Co.
No. 3027

INDIGENT PENSION
1897.

Thomas Tomlinson
Chinch

Approved 7/10 1897.

$ 72.00

WARRANT MAILED TO
M & H

4/9/97
7/10 97

Thomas Tomlinson
Chinch Co.
No. 3027

INDIGENT PENSION
1897.

Thomas Tomlinson
Chinch

Approved 7/10 1897.

$ 72.00

WARRANT MAILED TO
M & H

4/9/97
7/10 97

Thomas Tomlinson
The physicians do not
attend him any more
Richard Tomlinson
Tom Tomlinson

Questions for Applicant.

STATE OF GEORGIA,
Chinch County.

Thomas Tomlinson of said State and County, desiring to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (give State, County and post office) Thomas Tomlinson Dupont Chinch Co Ga
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? Chinch County Ga. Seventy Years.
3. When and where were you born? in June 1827. near Dupont Ga
4. When and where and in what company and regiment did you enlist or serve Co E. 55th Ga Elected Mc March 1863 "A Day"
5. How long did you remain in such company and regiment? 3 years
6. For how long a period did you discharge regular military duty? Three years
7. When, where and under what circumstances were you discharged from service? Surrender to the Surrender.
8. What is your present occupation? Farming all My Life.
9. How much can you earn (gross) per annum by your own exertions or labor? Nothing
10. What has been your occupation since 1865? Farming along as I was able.
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"? Infirmity 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 am infirm and poverty "the Nature of infirmity is Old age and Dropsy."
13. What property, effects or income do you possess and its gross value? None whatever
14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any, did you make of same? I had no property
15. In what County did you reside during those years and what property did you then return for taxation? I was resided in Chinch County & I owned no property.
16. How were you supported during the years 1895 and 1896? By my Children & Friends
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 had none, Cost about two hundred Dollars
18. What was your employment during 1895 and 1896? What pay did you receive in each year? None. None
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? I have no family.
20. Are you receiving any pension, if so what amount and for what disability? I am not receiving any Pension

Every Question MUST be Answered.

Sworn to and subscribed before me this the 6 day of April 1897.

Thomas his x mark Tomlinson
Applicant.

George Connelly Ordinary.
of Chinch County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Clinch County.

S.W. Register, of said State and County, having been presented as a witness in support of the application of Thomas Tomlinson 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? S.W. Register Homerville in Clinch County Ga

2. Are you acquainted with Thomas Tomlinson, the applicant, is of how long have you known him? about forty years

3. Where does he reside, and how long has he been a resident of this State? near Dupont Clinch Co Ga about forty years

4. Do you know of his having served in the Confederate army ~~or the Georgia militia~~? How do you know this? yes because I served with him in the Confederate war

5. When, where and in what company and regiment did he enlist? 4th Day of March 1862. at Homerville Ga, in Co "G" 50 Regt Ga Volunteers

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? until the surrender except while wounded at Home on furlow

8. What property, effects or income has the applicant? (Give your means of knowledge.) I cant say positively but I dont think he has but very little if any

9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if any did he make of same? Cant say positively but I have not heard of him having any or disposing of any

10. What is the applicant's occupation and physicial condition? No occupation now "Was a farmer" very old and feble and has what I suppose to be Abdominal Dropsy

11. Is the applicant unable to support himself by labor of any sort, if so, why? Yes on account of Old age and I think Dropsy

12. How was he supported during the years 1895 and 1896? by his Children and friends I think "at least it is so understood"

13. What portion of his support for these two years was derived from his own labor or income? None that I have any knowledge of

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 very old and feble and has some Abdominal trouble. I suppose it to be Dropsy. he also complains of Shortness of breath

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

Sworn to and subscribed before me, this the 8th day of April 1897.

S.W. Register Witness.

George Cornelius Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
County.

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

He is very old and feble and is disabled to support himself. He was also wounded in the right thigh. Also suffering with Dropsy.

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 8th day of April 1897.

J. E. Lee M.D.
J. M. Caswell M.D.

George Cornelius Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch County.

I, George Cornelius, Ordinary in and for said County, hereby certify that the applicant Thomas Tomlinson 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.W. Register are of trustworthy character and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Clinch County show that applicant returned for taxation in his name in 1895, no property dollars of property, and in 1896, no property 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 April 1897.

George Cornelius 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." Additional affidavits may be attached if blank spaces are insufficient.

and has some Abdominal trouble. I suppose it to be Drapsy. he also complains of Shortness of breath

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

Sworn to and subscribed before me, this the 8th day of April 1897. } S M Register Witness.

George Cornelius Ordinary.

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

George Cornelius 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." Additional affidavits may be attached if blank spaces are insufficient.

STATE OF GEORGIA

OFFICE OF COURT OF ORDINARY.

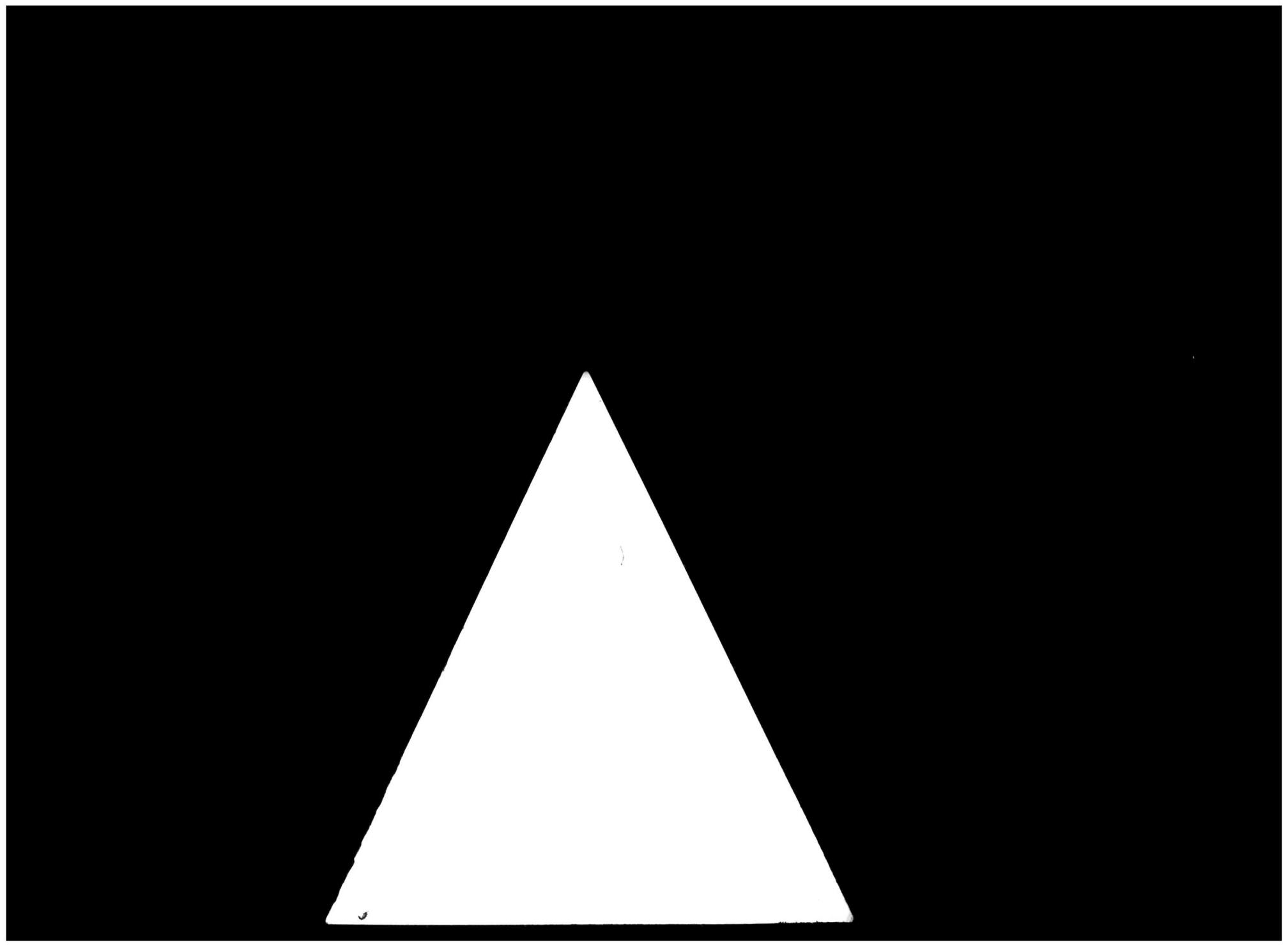
CLINCH COUNTY.

GEO. CORNELIUS, ORDINARY.

Homerville, Ga. July 9th 1897

Richard Johnson Commissioner of Pensions In regard to pension claim of Thomas Thompson. I will State that the physicians were Sworn but was neglected by my Self Signing affidavit respectfully &c

George Cornelius
Ordinary
Clinch Ga



Touchtone, Charles
Clinch Co.

No.
OK for 1911

Confederate Soldier's Application.

UNDER ACT 1910.

County Clinch

Name Charles S. Touchtone

Company H. 4th Ga Cavalry

Regiment

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

9/20/10

APPLICATION FOR PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

Clinch County.

I, Charles L. Tauchton, of said State and County, hereby applies for the pension provided by Act of 1910, to Confederate Soldiers, and submits his sworn statement, with his testimony to make out his case, and after being duly sworn, true answers to make to the questions propounded, answers as follows, to wit:

1. What is your name and where do you reside? (Give County and Post-office). Charles L. Tauchton Clinch County Georgia, Homerville Ga.

2. How long and since when have you been a continuous resident citizen of this State? Since before civil war began

3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? Yes

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) June 1863. at Abbeville Ga. Company H. 4th Ga Cavalry

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) Until Close of war April 1865

6. When and where was your Company and Regiment surrendered or discharged from the Service? At Thomasville Ga. April 1865.

7. Were you actually present with your Command when it was surrendered or discharged? Yes

8. If you were not actually present, state specifically and clearly where you were. Absent sick

a. Where was your Command when you left it? Was discharged at Thomasville Ga.

b. When did you leave the Command? When discharged at Thomasville Ga.

c. For what cause did you leave? When discharged

d. By whose authority did you leave? " "

e. For how long was your leave granted? In what way? None

f. Why did you not return to your Command after leave expired? Was discharged

g. In what way were you prevented? Was sick

h. What effort did you make to return? " "

i. Were you captured during the war? No

j. If so, when, and where? In what prison were you held and when were you released? No

9. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value.) 50 acres land worth 700 Money worth 100 Cattle worth 100 Hogs worth 50 Horses worth 150 Farming tools worth 100 Wagon worth 100 Household & kitchen furniture worth 100 Total $1250

10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov. 1908. To whom and for what price? None sold except land Gave away to Son

11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemized list). 50 acres land worth 700 Money worth 100 Cattle worth 100 Hogs worth 50 Horses worth 150 Farming tools worth 100 Wagon worth 100 Household & kitchen furniture worth 100 Total $1250

12. What annual or monthly income or earnings of yourself and wife and the source derived have you? None except farming

13. Are you drawing a pension of any amount from this State or the United States? No

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? Never applied

Sworn to and subscribed before me this the 28 day of Dec 1911

Clinch County, Ordinary, Georgia

Charles L. Tauchton

Tauchton, Charles L.
Clinch Co.

OK No. Jan 1911

Confederate Soldier's Application.

UNDER ACT 1910.

County Clinch

Name Charles L. Tauchton

Company H. 4th Ga Cavalry

Regiment

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

9/20/10

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,
Clinch County.

William T. Howell of said State and County is hereby presented as a witness in support of the application of Charles J. Sweat 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? William T. Howell Clinch County Georgia.

2. How long and since when have you known Charles J. Sweat the applicant? I have known him since 1865.

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. Was born and raised in this County and State since 1865. & by living in same County with him.

4. When, where and in what Company and Regiment did Charles J. Sweat enlist during war from 1861 to 1865? (Give date and place) He served in my Co. & 4th Ga. Cavalry Gen. Gustavus Dan Smith Company and Regiment.

5. How did you obtain your information of this Service? By serving with him in same Company and Regiment.

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) Until the surrender April 1865.

7. When and where was his Command surrendered or discharged (give date and place) April 1865. At Savannah 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? He was present.

12. When did he leave his Command? Surrendered at Savannah Ga. Where was his Command when he left it? At Savannah Ga. for what cause did he leave? Surrendered. By whose authority did he leave Gen. Gustavus Dan Smith and how long was he granted leave? Went with ours. 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. He served together in same Co. & Regt.

13. In what way was he prevented from returning to his Command? We left at How do you know? By living with him.

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?
— No.

Sworn to and subscribed before me, this the 23rd day of October 1916.
W. T. Howell
J. T. Dame Ordinary,
of Clinch County.

STATE OF GEORGIA,
Clinch County.

Personally before me came C. H. Smith and W. H. Smith who on oath says that they are freeholders residing in said County and we know Charles J. Sweat the applicant for pension and we know the property that is now in the use, possession and control of himself and wife and of the cash value to wit: (Make List by items and value.) 1 Mule 1 Cow & Calf 1 Hog 1 Sow & Pigs 1 Buggy 1 Harness 1 Set Plow Gears 1 Set Work Gears 1 Axe 1 Grubbing Hoe 1 Shovel 1 Log Chain 1 Cook Stove & Furniture 1 Bed & Bedding Total $150.00

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov. 1908? (State it fully by items) None

2. When and to whom was it sold or given to? —

3. What was the price paid or stated to be paid? —

4. What relation is the party to applicant? —

5. What disposition was made of the proceeds of the sale? —

6. Was the disposition of this property made in good faith and full value? — or was it made to obtain a pension? No

Sworn to and subscribed before me, this the 23rd day of Oct 1916.
C. H. Smith
W. H. Smith
J. T. Dame Ordinary,
of Clinch County.

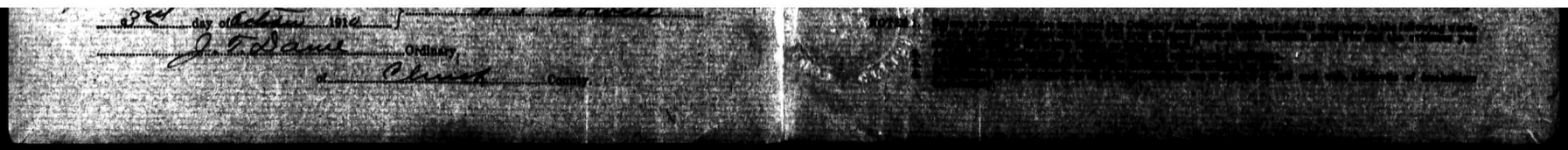
ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch County.

I, J. T. Dame Ordinary of said County, certify that I know the applicant Charles J. Sweat for Pension in the person he represents himself to be and resides in said County. That I also know William T. Howell the witness swearing to the service and C. H. Smith and W. H. Smith 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 Clinch shows that Charles J. Sweat and wife value for tax is in 1908 $ 150.00 for 1909 $ 150.00 for 1910 $ 150.00

Sworn under my hand and official seal of office this 23rd day of October 1916.
J. T. Dame Ordinary,
of Clinch County.

NOTICE: [illegible]



Trowell, R. H.

Clinch Co.

No. 61 for 1907

INDIGENT PENSION.

1905 / 1907

Name R. H. Trowell

County Clinch

Co. Clinch's light Battery artillery Regt.

Approved _____ 190__

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

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

8/24/05 9/15/06

[illegible] cannot be presumed.

J. W. Lindsey
Com. of Pensions.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY,

I, R. H. Trowell hereby authorize W. A. Wright of Atlanta Ga. to receive and receipt for the pension allowed and request that he remit same to Ordinary at Homerville Ga. mail

Witness my hand and seal this 26th day of April 190 5

R. H. Trowell [L. S.]
mark

Executed in presence of
J. T. Dank
Ordinary

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, R. H. Trowell hereby authorize W. A. Wright of Atlanta Ga 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 26th day of April 1905

R. H. Trowell [L. S.]
mark

Executed in presence of
J. T. Dame
Ordinary

Pension office 9/19/05

Not an aged man. It is not sufficient for Drs. to state infirmity, but they must as a result of their examination say, in what way his infirmity has so impaired his earning capacity. It must be shown to be such that he cannot earn his support at any kind of labor or calling. This must be clearly proven cannot be presumed.

J. W. Lindsey
Com. of Pensions.

Trowell, R. H.
Clinch Co.
No. 1902

INDIGENT PENSION.
1905
1907

Name R. H. Trowell
County Clinch
Co. Clinch Light Battery Regt.
Approved 190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta, Ga.
8/24/05 9/15/06

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,
Clinch COUNTY.

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

1. What is your name and where do you reside? (Give State County and post-office). R. H. Trowell State of Georgia Clinch Co. Hoxford Ga
2. How long and since when have you been a resident of this State? Have been in state 48 years
3. When and where were you born? South Carolina May 8th 1846
4. When and where and in what company and regiment did you enlist, or serve? in Clinch Light Battery Artillery.
5. How long did you remain in such company and regiment? about nine months 9 months
6. When and where was your company and regiment surrendered and discharged? I was Captured at Ft McCallister 13th day December 1864
7. Were you present with your company and regiment when it was surrendered? I was Captured
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 Captured at Ft McCallister 13th December 1864
9. How much can you earn (gross) per annum by your own exertions or labor? Nothing [illegible] at all
10. What has been your occupation since 1865? Farming
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? 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? My condition has been for 5 years that I could not do but very little work not enough to earn my support & not done anything in the last 2000 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? Nothing at all
15. In what County did you reside during those years, and what property did you then return for taxation? in Clinch Co. I did not return no property
16. How were you supported during the years 1899, 1900, 1901 and 1902? by the help of my children
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 was not able to do anything
18. What was your employment during 1898, 1899, 1901 and 1902? What pay did you receive in each year? I was not employed & done nothing
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead, or other property? Their ages and how employed? I have wife 50 [illegible] years old 4 children one 18 years girl one 14 years one 13 years 11 years old. the 2 boys are crippled & very little property.
20. Are you receiving any pension? If so, what amount and for what disability? None
21. Have you ever made an application for pension before? I have not
22. How many applications have you ever made and under what class? None.

Sworn to and subscribed before me this the 26th day of April 1905

R. H. Trowell
mark
Applicant.

J. T. Dame Ordinary,
of Clinch County.

Every Question MUST Be Answered.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Coffee COUNTY.

Henry Merritt & Thos P. Oneal of said State and County, having been presented as a witness in support of the application of R. H. Trowell 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? Henry Merritt and Thos P. Oneal of Coffee County Ga
2. Are you acquainted with R. H. Trowell, the applicant; if so, how long have you known him? Since 1864 and Longer
3. Where does he reside, and how long and since when has he been a resident of this State? in Clinch County — has been in State 48 years
4. When, where and in what company and regiment did he enlist, and how do you know? Clinch's Light Battery artillery
5. Were you a member of the same company and regiment? We were
6. How long did he perform regular military duty? about 9 months
7. When and where was his command surrendered? We were captured at Fort McCallister 13th December 1864.
8. Were you present when it surrendered? yes
9. Was applicant present? yes
10. If he was not present, where was he?

When did he leave his command? captured 13 Dec 64 For what cause? made Prisoner

By what authority he left? How do you know all of this? by being with him

11. What property, effects or income has the applicant? (Give your means of knowledge.) very little
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? very little and disposed of it in support of his Family
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? I dont know that he has
14. What is the applicant's occupation and physical condition? Farmer — in Weak condition Physically
15. Is the applicant unable to support himself by labor of any sort; if so, why? almost can do but little on account of disease
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? by the help of his Children who have Lift him
17. What portion of his support for these four years was derived from his own labor or income? very little
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? his age & general health
19. Who composes family? What property have they? Children's age and their earning capacity? his Wife & one or two Children
20. What interest have you in the recovery of a pension by this applicant? None

Sworn to and subscribed before me, this the 29th day of January 1905

Henry Merritt Witness.

J. T. Dame Ordinary. Thos P. Oneal

N P Exoff JP

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Clinch COUNTY.

Personally came before me Drs G. 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 R. H. Trowell, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

We find his liver enlarged & tender chronic indigestion and Constipated Bowels. This chronic condition has caused a waste of flesh & strength until he unable to do any kind of work

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

G. R. Thigpen M.D.
A. H. Culpepper M.D.

Sworn to and subscribed before me, this the 26 day of Apr 1905

J. T. Dame Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch COUNTY.

I, J. T. Dame Ordinary, in and for said County, hereby certify that the applicant R. H. Trowell resides in said County, and has been a bona fide resident of this State since the — day of — 1865 and that the witnesses, viz.: Henry Merritt and Thos P. Oneal 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 ~~1899~~ 1901 nothing Dollars of property, and in ~~1900~~ 1902 nothing Dollars of property; in ~~1901~~ 1903 nothing Dollars of property; in ~~1902~~ 1904 nothing Dollars of property.

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

Witness my hand and seal of office, this 29 day of May 1905

J. T. Dame Ordinary,
of Clinch 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, R. H. Trowell, hereby authorize N. A. Wright of Atlanta Ga to receive and receipt for the pension allowed, and request that he remit same to J. T. Dame ordinary at Homerville Ga by mail

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

R. H. Trowell [L. S.]

Executed in presence of
J. T. Dame

Trowell, R. H.
21 Clinch Ga
1260
Code Section 1254.
(FOR THOSE ALREADY ENROLLED)
No. 4655

INDIGENT
SOLDIER'S PENSION
1907.

Name R. H. Trowell
County Clinch
Regiment Clinch light Battery Arty
Co.

WARRANT ISSUED
1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
Clinch **County.**

Personally appears R. H. Trowell 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 8 day of May 18 57; that he is 66 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of [redacted]) during the war between the States, and served for the term of One year in Company ____, of ____th Regiment of Georgia Vol; 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, 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 this is now Brooks County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 1st day of Jan 1907. R. H. Trowell

J. T. Dame Ordinary.

State of Georgia,
Clinch **County.**

I, J. T. Dame Ordinary of said County, do certify that I am well acquainted with R. H. Trowell 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 Jan. 1907.

J. T. Dame
Ordinary Clinch County.

Affix your seal here

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

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

Jan 30
3
63

TO PAY—
1930, $ 70
Cig. & C. Tax. $
TOTAL.

[illegible] County

19[illegible]

Application for Pension
Due Deceased Pensioner
(UNDER ACT 1904)
(To pay expenses of last illness and funeral)

[illegible] Ordinary

For [illegible]

Date of Death [illegible]

Amount $ [illegible] 30 [illegible] 70

Approved and ordered

Paid

R. deT. LAWRENCE
Commissioner

APPROVED FOR PAYMENT

PAID TO ORDINARY ON THIS CLAIM:			
DATE 1933	FUND FROM WHICH PAID	$	
11-4	Oxe	30	00
2.25.35	1930	70	00
	TOTAL	100	00

—STATEMENT—

Homerville, Ga., 1933

M J. T. Dame
Homerville Ga

In Account With

HOMERVILLE HARDWARE & FURNITURE COMPANY

EVERYTHING FOR THE HOME AND FARM

Morticians Funeral Directors

Jan 24	1 Casket	85 00
	1 Burial Suite	15 00
		100 00

For Burial of
R H Trowell, Deceased
Pensioner of Clinch Co
Georgia

Paid
Jan 24, 1933
Homerville Hdwe & Furn Co
By T. C. Chambers, Mgr

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 J.T. Dame of said County, who, after being sworn, on oath says that he knew R.H. Trowell 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 24th day of January, 1933, and that pensioner left no widow surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of $100.00, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me,
Kate C. Pafford, Ordinary
Clinch County
(Seal of Ordinary)

J.T. Dame

CERTIFICATE OF ORDINARY

GEORGIA, Clinch County.

I, Kate C. Pafford, Ordinary of said County, do certify that I personally know J.T. Dame, who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew R.H. Trowell 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 Hundred Sixty, $ no/100 ($360.00) Dollars in said County for 1932, 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 24th day of February, 1933
(Seal of Ordinary)

Kate C. Pafford, Ordinary
Clinch County

INSTRUCTIONS

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

2nd. Each account must be sworn to before the Ordinary, and in the following form:

"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.

3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to,

---

Homerville Ga 9/13/06

Hon Jno. W. Lindsey
Commissioner of Pensions
Atlanta Ga

My Dear Sir:

I herewith return to you application of R.H. Trowell. Drs G.R. Higgins and A.H. Colpepper have amended their original or added to the Certificate. As to Trowell's Condition.

He is in very feeble health and has been for quite a while and I consider him worthy of a pension. if you think he is entitled under the law and Certificate attached.

Yours very truly
J.T. Dame
Ordinary Clinch Co.

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 J.T. Dame of said County, who, after being sworn, on oath says that he knew R.H. Trowell 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 24th day of January, 19 32, and that pensioner left no widow surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of $100.00, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me,
Kate C. Pafford, Ordinary
Clinch County
(Seal of Ordinary)

J.T. Dame

CERTIFICATE OF ORDINARY

GEORGIA, Clinch County.

I, Kate C. Pafford, Ordinary of said County, do certify that I personally know J.T. Dame, who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew R.H. Trowell 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 Hundred Sixty; & no/100 ($360.00) Dollars in said County for 1932, 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 5th day of February, 19 32
(Seal of Ordinary)

Kate C. Pafford, Ordinary
Clinch County

INSTRUCTIONS

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

2nd. Each account must be sworn to before the Ordinary, and in the following form:

"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.

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

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

5th. Return this application, and attached bills, properly receipted, to the Pension Department.

Hamersville Ga 9/13/06

Hon Jno. W Lindsey
Commissioner of Pensions
Atlanta Ga

My Dear Sir.

I herewith return to you Application of R H Trowell. Dr. D R. Higdon and A H Culpepper Have amended their original or added to the Certificate. And R Trowell [illegible]

He is in very feeble health and Has been for quite a while and I Considder him worthy of a Pension. if you think he is entitled I return the Law and Certificate attached.

Yours very truly
J. T. Dame
Ordinary Clinch Co.

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 J.T. Dame of said County, who, after being sworn, on oath says that he knew R.H. Trowell 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 24th day of January, 1933, and that pensioner left no widow surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of $100.00, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me,
Kate C. Pafford, Ordinary
Clinch County
(Seal of Ordinary)

J.T. Dame

CERTIFICATE OF ORDINARY

GEORGIA, Clinch County.

I, Kate C. Pafford, Ordinary of said County, do certify that I personally know J.T. Dame, who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew R.H. Trowell 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 Hundred Sixty, $ no/100 ($360.00) Dollars in said County for 1932, 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 24th day of February, 1933
(Seal of Ordinary)
Kate C. Pafford, Ordinary
Clinch County

INSTRUCTIONS

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

2nd. Each account must be sworn to before the Ordinary, and in the following form:

"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.

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

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

5th. Return this application, and attached bills, properly receipted, to the Pension Department.

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

Homerville Ga 9/13/06

Hon Jno. W. Lindsey
Commissioner of Pensions
Atlanta Ga

My Dear Sir:-

I herewith return to you application of R.H. Trowell. Drs G.R. Higgins and A.H. Colpepper have amended their original or added to the Certificate as to Trowels Condition.

He is in very feeble health and has been for quite a while and I consider him worthy of a pension if you think he is entitled under the Law and Certificates attached.

Yours very truly
J.T. Dame
Ordinary Clinch Co.

Mrs. Kate C. Pafford
Ordinary, Clinch County
Homerville, Ga.

Itemized Statement of funeral expense
of R.H. Trowell, deceased soldier pensioner.

I Casket ---------- $ 85.00
I Suit ---------- 15.00
$100.00

Personally before me the undersigned came J.T. Dame who on oath says the above is an itemized statement of the funeral expenses of R.H. Trowell, deceased soldier pensioner, which was paid by him. and R.H. Trowell, left no estate of value.

J.T. Dame

Sworn to and subscribed before me this Feb. 15th. 1933.

Kate C. Pafford
Ordinary Clinch County, Ga.

I have this day received from Kate C.. Pafford, Ordinary of Clinch County, Georgia, $30.00 payment on funeral expenses of R.H. Trowell, deceased, pensioner of Clinch County, this being all money available at this time to receive from the pension department to pay on this funeral bill.

This Jan. 6th. 1934.

J.T. Dame

Mrs. Kate C. Pafford
Ordinary, Clinch County
Homerville, Ga.

Feb. 25th. 1933.

Hon. S.M. Ayers,
Commissioners of pensions,
Atlanta, Ga.

Dear Sir:

Find enclosed claim for funeral expenses for R.H. Trowell, deceased Soldier pensioner of Clinch County, who died on January, 24th. 1933.

Yours very truly,
Kate C. Pafford
Ordinary.

A Certificate

STATE OF GEORGIA, County of Clinch

IN RE: Expenses last illness and funeral R.H. Trowell

This is to certify that from an examination of the records in my office, and from personal knowledge, or inquiry, it is ascertained that this pensioner:

1. Died inside of the State of Georgia;
2. Left no estate of any kind or value, sufficient to pay these expenses.

This the 7 day of August, 1933.

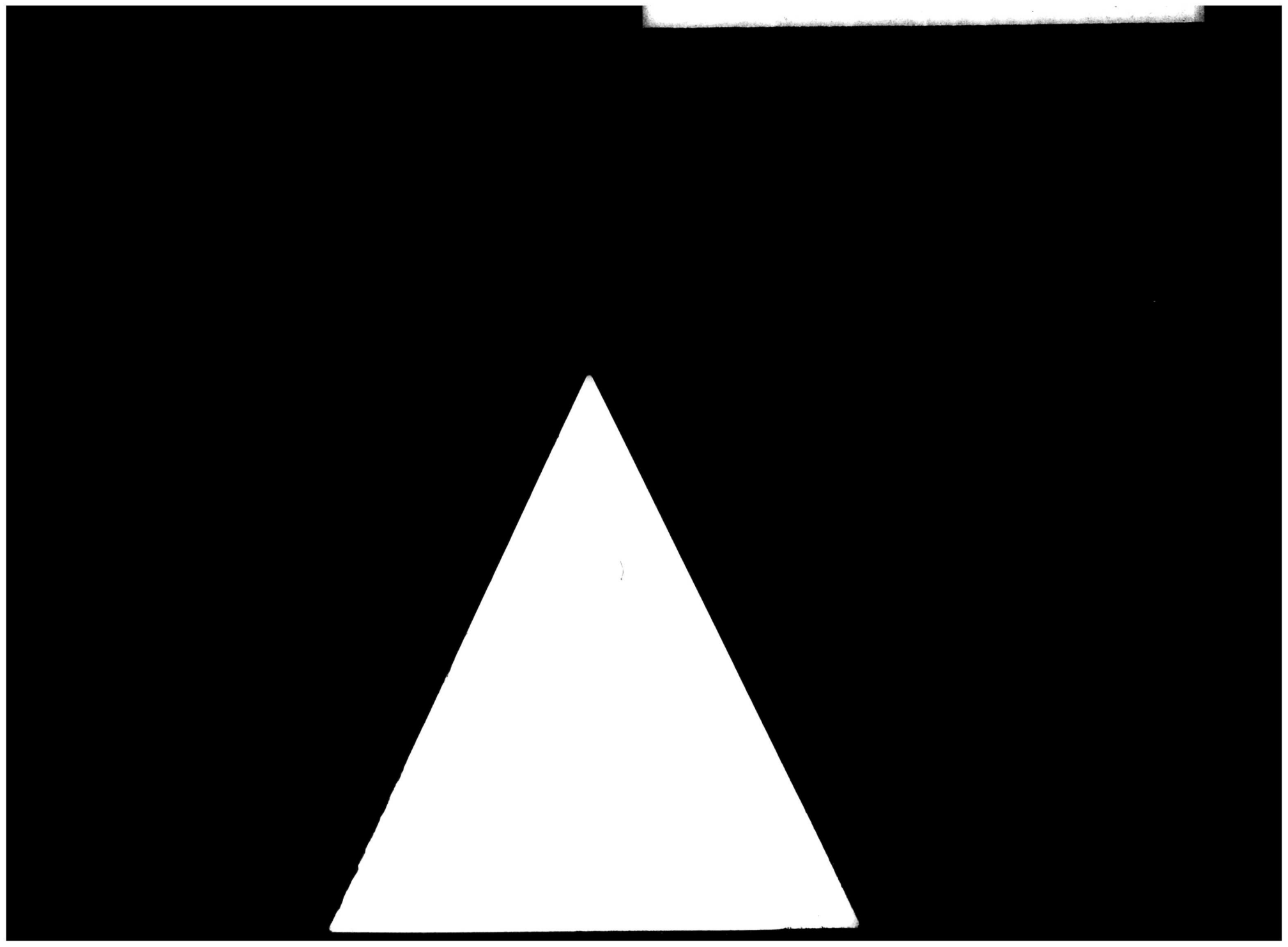
(SEAL) Kate C. Pafford, Ordinary

(Ordinary will please complete and return immediately to A. L. Henson, Director, Veterans Service Office, State Capitol, Atlanta, Ga.)

I, have this day received from Kate C. Pafford, Ordinary Clinch County, Georgia, $70.00 in cash balance due me for the funeral expenses for R.H. Trowell, deceased, soldier pensioner of Clinch County, Georgia.

This 4th. day of March, 1933.

J.T. Dame



Clinch Co

G.M. Jan 1910

INDIGENT PENSION.

1907

Name Freeman L Watson

County Clinch

Co. I 4th Ga Regt.

Approved _____ 190_

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

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

9-27-07.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
Clinch County. }

I, [illegible] Watson, of the County and State aforesaid, do hereby appoint [illegible] my true and lawful Attorney, for me and in my name, to [illegible] Pension Warrant [illegible] Pension Roll of the State of Georgia, [illegible] Pension Roll of the State of Georgia, [illegible] Pension Roll of the State of Georgia,

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, Truman L Walker hereby authorize
W A Wright of Allenhurst Ga
to receive and receipt for the pension allowed and request that he remit same to J T Dame
at Homerville by mail

Witness my hand and seal, this 2 1 day of May 1907

Truman L Walker [L. S.]

Executed in presence of
J T Dame

Warrant Issued to Truman L Walker
Co. No. for 1910
INDIGENT PENSION.
1907
Name Truman L Walker
County Clinch
Co. 1 4th Ga Regt
Approved 190
JOHN W. LINDSEY,
WARRANT HANDED TO

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,
Clinch COUNTY.

Truman L Walker of said State and County, desiring to avail himself of the Pension Act of August 1907, Clinch County relating to pensions, and after being duly sworn according to law answers the following questions and makes the following statements:

1. What is your name and where do you reside? (Give Militia District and County.) Truman L Walker Homerville Militia District Clinch County Georgia

2. How long and since when have you been a resident of this State? Since I was born and have lived in Ga. ever since

3. When and where were you born? Ware Co. Ga. July 2nd 1843

4. When and where and in what company and regiment did you enlist or serve? April 1861 Co. D Lowe Wayne Co. Ga. Cavalry 2 Fourth Georgia Cavalry.

5. How long did you remain in such company and regiment? Remained in the command till April 1865 was in cavalry the hole time 4 years & 2 months

6. When and where was your company and regiment surrendered and discharged? I do not remember where my Company and regiment was disbanded I think Lenoir N C I was with the 4th Ga Cav

7. Were you present with your company and regiment when it was surrendered? No

8. If not present, state specifically and clearly when you were when you left your command, for what cause and by whose authority? I was detailed & detailed for driving beef cattle for the army in S C & Ga

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

10. What has been your occupation since 1865? Farming & Farm

11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? Age 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. Caused with rheumatism for several years suffering badly from rheumatism and rheumatism in the stomach in leg and hip

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 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift, have you made of same? I have none

15. In what County did you reside during these years, and what property did you then return for taxation? Clinch Co. Ga. and returned my Farm Location

16. How were you supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? By Farm and Farming

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? Not a cent Contributed by me

18. What was your employment during 1901, 1902, 1903, 1904, 1905, 1906 and 1907? What pay did you receive in each year? Farming & Farm worked for market made

19. Have you a family? If so, who composes such family? Give their means of support. Have they a homestead, or other property? Their ages and how employed? I have a wife and no children

20. Are you receiving any pension? If so, what amount and for what disability? No

21. Have you ever made an application for pension before? No

22. How many applications have you ever made and under what laws? One Act of 1907

Sworn to and subscribed before me this the 1 day of June 1907
J T Dame Clerk County.

Truman L Walker Applicant.

Read Question and Answer

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Clinch COUNTY.

J. R. Dickerson of said State and County, having been presented as a witness in support of the application of Freeman L. Walker 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? J. R. Dickerson Clinch County Georgia
2. Are you acquainted with Freeman L. Walker the applicant; if so, how long have you known him? I am. and have known him all his life
3. Where does he reside, and how long and since when has he been a resident of this State? In Clinch Co. He has been in this all his life.
4. When, where and in what company and regiment did he enlist, and how do you know? April 1st 1864 at Jesup Wayne Co. Ga Co. F 4th Reg
5. Were you a member of the same company and regiment? Yes
6. How long did he perform regular military duty? Until close of war
7. When and where was his command surrendered? At Thomasville Ga 3d Thomasville in April 1865.
8. Were you present when it surrendered? I was
9. Was applicant present? Think so
10. If he was not present, where was he? Think he was with detail sent home on
When did he leave his command? For what cause?
By what authority he left? How do you know all of this?
By being member of same Company and Regiment
11. What property, effects or income has the applicant? (Give your means of knowledge.)
none
12. What property, effects or income did the applicant posses in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, none
and what disposition, if any, did he make of same?
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? none
14. What is the applicant's occupation and physical condition? Laying by Some Time Physical Condition Bad. Not able to work by being crippled
15. Is the applicant unable to support himself by labor of any sort; if so, why? Too old and unable to support himself By being badly crippled and not able to work.
16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? By industry with he could do. and the help of his wife.
17. What portion of his support for these four years was derived from his own labor or income? But very little.
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code By being crippled and not able to work
19. Who composes family? What property have they? Children's ages and their earning capacity? himself wife. no children
20. What interest have you in the recovery of a pension by this applicant? none

Sworn to and subscribed before me, this the 2 day of May 1907.
J. T. Dame Ordinary.

J. R. Dickerson Witness

AFFIDAVIT OF PHYSICIAN.

STATE OF GEORGIA,
Clinch COUNTY.

Personally came before us L. R. Hopkins and A. H. Culpepper who, being duly sworn, say on oath that they have examined carefully Freeman L. Walker applicant for pension under Section 1254, Code, and after such examination say that the proper physical condition is as follows:

Applicant Has a Gun Shot Wound Received in the Left Side of Stomach Ball Supposed to Be Some Where in Left Side Ball Has Never Been Found Applicant Has Been Crippled Ever Since Has Not Been able to Do Any Kind of Manual Labor

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

Sworn to and subscribed before me, this the 2 day of May 1907.
J. T. Dame Ordinary.

L. R. Hopkins M.D.
A. H. Culpepper M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch COUNTY.

I, J. T. Dame Ordinary, in and for said County, hereby certify that the applicant Freeman L. Walker resides in said County, and has been a bona fide resident of this State since the all day of Live Life 189 and that the witnesses, viz. J. R. Dickerson L. R. Hopkins & 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 none Dollars of property, and in 1902 none Dollars of property; in 1903 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 my opinion the foregoing claim is Clinch & made in good faith.

Witness my hand and seal of office, this 2 day of May 1907.
J. T. Dame Ordinary,
Clinch County.

NOTES

1. Before any questions are answered the Ordinary shall cause applicant and the witnesses to be sworn to tell the truth, the whole truth, and nothing but the truth, so help you God.
2. Additional affidavits may be attached if found necessary or desirable.
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.

Sworn to and subscribed before me, this the 3 day of May 1907

J R Dickerson
Witness.

J T Dame
Ordinary.

1. Before any questions are answered, the Ordinary shall cause applicant, and the witnesses in the following words: "You shall true answer make to each of the questions asked of you, and the witnesses 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.

Westberry, John L.
Pr. Jn 1906
Clinch County

#12 No.

INDIGENT PENSION.

1903.

Name Westbury J. L.

County Clinch

Co. I. 12th Ga Regt.

Approved _____ 1903.

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.

8/29/04

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, John S. Westberry hereby authorize W. A. Wright at Fulton Ga. Ga. to receive and receipt for the pension allowed and request that he remit same to W. L. Howell at Knowville, Ga. by mail

Witness my hand and seal, this 26 day of August 1904.

John S. Westberry [L. S.]

Executed in the presence of
W. L. Howell

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, John S. Westberry hereby authorize W. A. Wright of Fulton Co Ga to receive and receipt for the pension allowed and request that he remit same to W. L. Howell at Homerville Ga by mail

Witness my hand and seal, this 26 day of August 1904

John S. Westberry [L. S.]

Executed in the presence of
W. L. Howell

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,
Wiggs COUNTY.

John S. Westberry 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, depose and answer as follows:

1. What is your name and where do you reside? (give State, County and post-office) John S. Westberry State of Georgia Clinch County Post office Ga
2. How long and since when have you been a resident of this State? Sixty five years
3. When and where were you born? in Lowndes County in 1842
4. When and where and in what company and regiment did you enlist or serve? in Company G Florida Battalion after some time I was transfered to Co. I 12 Georgia
5. How long did you remain in such company and regiment? I served in Co G 5th Florida until 1863 or was transfered to Co I in the 12 Georgia Regiment and served there
6. When and where was your company and regiment surrendered and discharged? at Petersburg Virginia

Every Question Must be Answered.

7. Were you present with your company and regiment when it was surrendered? no
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? I was captured on the 6 of may 1864 at the Battle of Wilderness Va
9. How much can you earn (gross) per annum by your own exertions or labor? about $50 per year
10. What has been your occupation since 1865? working on a farm
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? age 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? it has broke my eyeglass I could not earn my support
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 in the eyeglass mentioned above
15. In what County did you reside during those years, and what property did you then return for taxation? in 1894 and 5 I was in Echols Co the balance in Clinch
16. How were you supported during the years 1899, 1900, 1901 and 1902? By work & Labor Myself
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 supposed cost about $100 I contributed about $ 00
18. What was your employment during 1898, 1899, 1901 and 1902? What pay did you receive in each year?
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead, or other property? Their ages and how employed? a wife and five Children the oldest Land all small & girls nearly grown which helps me some
20. Are you receiving any pension? If so, what amount and for what disability? none
21. Have you ever made an application for pension before? no
22. How many applications have you ever made and under what class? none

Sworn to and subscribed before me this the 6 day of October 1903. John S. Westberry Applicant.
W. L. Howell Ordinary,
of Clinch County.

Woodbury Johns & Co. Ft. Valley, Ga. 1905
Clinch County
No. 12
INDIGENT PENSION.
1903.
Name Anthony S. Ft
County Wright Co. Ga. Regt.
Approved 1903.
JOHN W. LINDSEY, Commissioner of Pensions.
WARRANT HANDED TO
Recorded in Book ... Page ... Comptroller's Office
Recorded in Book ... Page ... Treasurer's Office
10/5/03

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Lowndes COUNTY.

W. D. Hardee of said State and County, having been presented as a witness in support of the application of John S. Westberry 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. D. Hardee Kinderlou Ga.
2. Are you acquainted with John S. Westberry, the applicant; if so, how long have you known him? all his life
3. Where does he reside, and how long and since when has he been a resident of this State? now in Clinch County & in State all his life
4. When, where and in what company and regiment did he enlist, and how do you know? he was in 12 Ga. in Co. [illegible] one year or more
5. Were you a member of the same company and regiment? yes
6. How long did he perform regular military duty? one year or more
7. When and where was his command surrendered? April 1865 in Va
8. Were you present when it surrendered? yes
9. Was applicant present? no
10. If he was not present, where was he? in prison about one year
When did he leave his command? May 6 1864 For what cause? captured
By what authority he left? captured ~~as~~ How do you know all of this? he & I were in same company for 1 year & he was captured May 6 1864 & taken to prison
11. What property, effects or income has the applicant? (Give your means of knowledge.)
12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same?
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom?
14. What is the applicant's occupation and physical condition?
15. Is the applicant unable to support himself by labor of any sort, if so, why?
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902?
17. What portion of his support for these four years was derived from his own labor or income?
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code?
19. Who composes family? What property have they? Children's age and their earning capacity?
20. What interest have you in the recovery of a pension by this applicant? none

Sworn to and subscribed before me, this the 9 day of Oct 1903.
D. M. Smith Ordinary.

W. D. Hardee Witness.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Clinch COUNTY.

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

That he is Physically unable to obtain for himself & family a support we find that he suffers from Hernia "Inguinal" General Debility & Blindness

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

J. A. Moon M.D.
W. J. Stapleton M.D.

Sworn to and subscribed before me, this the 20 day of October 1903.
W. L. Howell Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Clinch COUNTY.

I, W. L. Howell Ordinary, in and for said County, hereby certify that the applicant John S. Westberry resides in said County, and has been a bona fide resident of this State since the 1 day of Dec 1888 and that the witnesses, viz.: W. B. N. Crews 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 show that applicant returned for taxation in his name in 1899 no Dollars of property, and in 1900 no Dollars of property, in 1901 no Dollars of property, in 1902 no Dollars of property.

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

Witness my hand and seal of office, this 26 day of August 1903.
W. L. Howell Ordinary,
of Clinch 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. L. Wesbery hereby authorize W. A. Wright of Atlanta Ga to receive and receipt for the pension allowed, and request that he remit same to Ordinary at Hamerville Ga by

WITNESS my hand and seal, this 16th day of Jan 1905.

J. L. Westbery [L. S.]

Executed in the presence of

[illegible]

Westbery, John S.
Clinch County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 6305

INDIGENT
SOLDIER'S PENSION
1905.

Name J. L. Wesbery
County Clinch
Co. Regiment

WARRANT ISSUED
MAR 1 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,
Clinch COUNTY.

I, J. L. Wesbery hereby authorize W. A. Wright of Falon Co. Ga to receive and receipt for the pension allowed, and request that he remit same to J. T. Dame Ordinary at Hamerville Ga by mail

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

J. L. Wesbery [L. S.]

Executed in the presence of

J. T. Dame

Wesbery, J. L.
Clinch County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 1840

INDIGENT
SOLDIER'S PENSION
1906.

Name J. L. Wesbery
County Clinch
Co. E Ga Regiment 5th Ga 12th Ga

WARRANT ISSUED
JAN 26 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
W. A. W.

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

no data

Co E. 5th Regt. Florida
Trans to Co I, 12th Georgia

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County.

Personally appears J. S. Westbery 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 23 day of April 1838; that he is 66 years old and by occupation a Farming, that he enlisted in the military service of the Confederate States (or of the State of Florida) during the war between the States, and served for the term of 2 years in Company E, of 5th Regiment of Florida ~~Vol~~ Regt.; that his physical condition is as follows: Infirmity Poverty and not able to work

that his property consists of the following items: Nothing

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 1905. I have heretofore as a resident of Clinch County been allowed a pension for the ~~year 1904~~. this is a new Pensioner

Sworn to and subscribed before me, this the 14th day of Jan 1905.

J. T. Dame Ordinary. J. S. Westbery

STATE OF GEORGIA,
Clinch County.

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

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

J. T. Dame
Ordinary Clinch County.

Affix your seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

Co E. 5th Fla Regt
Co. I. 12th Ga. Regt

State of Georgia,
Clinch County.

Personally appears J. L. Wesbery 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 23 day of April 1838; 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 Florida) during the war between the States, and served for the term of 3 years in Company ~~I~~ ~~E~~, of ~~12~~ 5th Regiment of ~~Vol~~; that his physical condition is as follows: Infirmity Poverty 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 2 day of Jan 1906. J. L. Wesbery

J. T. Dame Ordinary.

State of Georgia,
Clinch County.

I, J. T. Dame Ordinary of said County, do certify that I am well acquainted with J. L. Wesbery 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.

Affix your seal here

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

STATE OF GEORGIA

OFFICE OF

COURT OF ORDINARY

Lowndes County.

D. M. SMITH, ORDINARY.

Valdosta, Ga. 190

State of Georgia, Lowndes County.

This is to certify that W.D.Hardee is a citizen of this county and any statements made by him is made in good faith and is intitle to credit and beleif, and he is a man of trustworthy caracter,

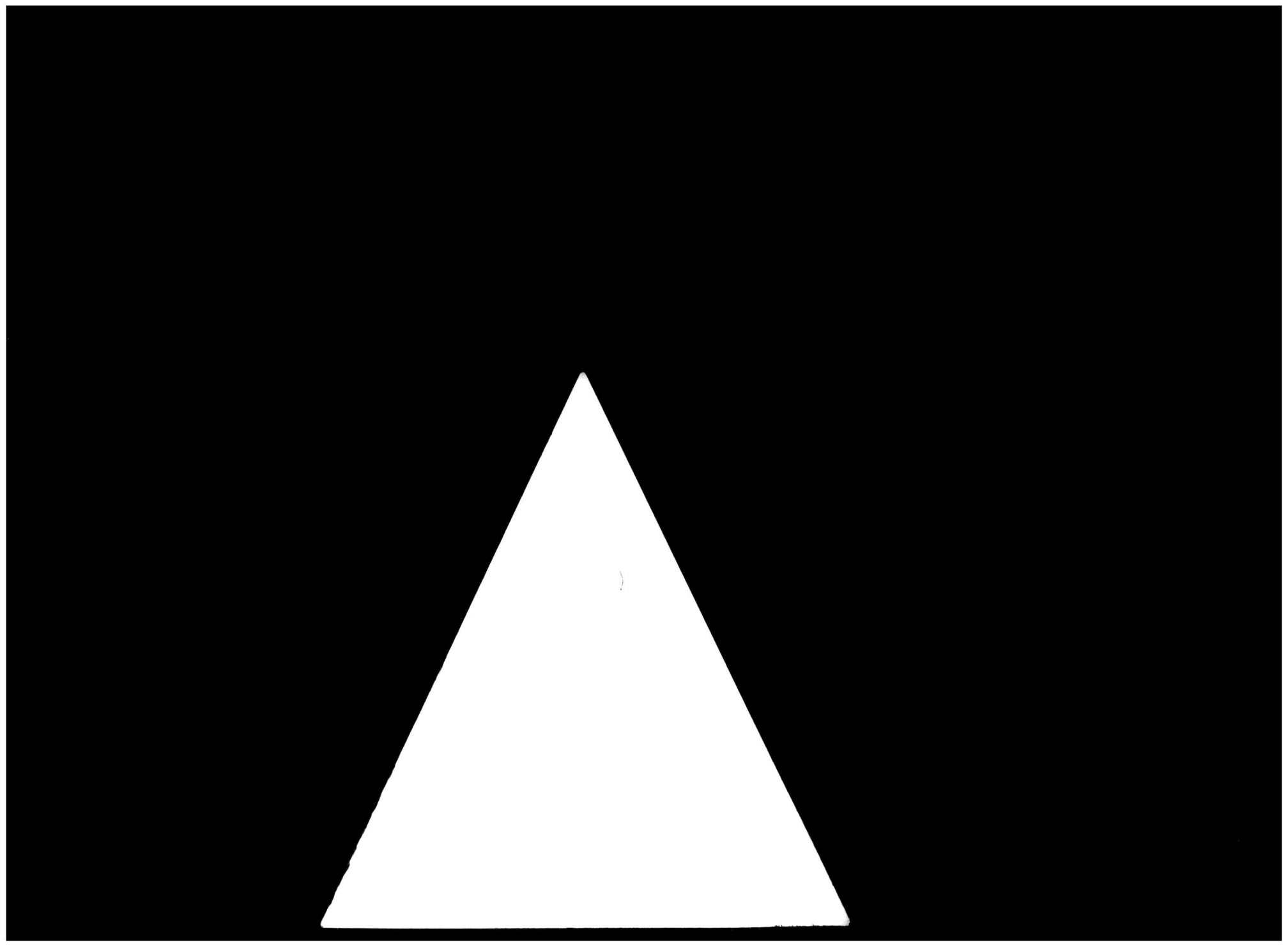
Given under my official hand and seal, this the 9th, day of Oct.1903.

D.M. Smith
Ordinary, Lowndes County

Georgia, Clinch County!
Personally appeared before me an officer of said State duly qualified by law to administer oath W. B. N. Crews who on oath says that he is personally acquainted with John S. Weatherry and knows him to be old and infirm and unable to earn a living by his own exertion or labor. He has no property out of which he can earn a support.

W B N Crews

Sworn to and subscribed before me this Oct. 20 - 1903
R. G. Dickerson
Clk. Ct. Ordinary



Whilden, J. T.
Clinch Co.

X No. W.H. Jan 1920

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1919

County Clinch

Name J. T. Whilden

Company

Regiment 5 Ga Res

Approved

No record in R.O.

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

9/12-1919

Ordinary's Certificate

STATE OF GEORGIA,
_____ COUNTY.

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

Sworn under my hand and official seal of office this _____ day of _____ 19____

_____ Ordinary
of _____ County.
(SEAL)

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

Ordinary's Certificate

STATE OF GEORGIA,

---------- COUNTY.

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

Sworn under my hand and official seal of office this----------day of----------19----

---------- Ordinary

of ---------- County.

(SEAL)

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

Wellborn, J. C.
Clinch Co.
No. 10 Jan 1920

Confederate Soldier's Application
Under Act 1910—As Amended by Act of 1919

County Colquitt
Name J. T. Whilden
Company
Regiment
Approved

No record in R. O.

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

7/2-1919

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

Questions For Applicants to Answer

STATE OF GEORGIA,

Clinch COUNTY.

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

1. What is your name and where do you reside? (Give County and Post-office) J. T. Whilden Stockton Ga Clinch County
2. How long and since when have you been a continuous resident citizen of this State? about 65 years
3. Did you enlist in the Army of the Confederate States or in the organized militia of this State from 1861 to 1865? Georgia Reserves State Troops
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) Spring of 1864 Blackshear Ga Co H 5 Ga Reserves
5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge) Till about Mch 1865
6. When and where was your Company and Regiment surrendered or discharged from the Service? April 1865 I think my Company was in S.C. N.C.
7. Were you actually present with your command when it was surrendered or discharged? No.
8. If you were not actually present, state specifically and clearly where you were. Dropped behind on account of Army going on S.C.
   a. Where was your command when you left it? S.C.
   b. When did you leave the command? about Mch 1865
   c. For what cause did you leave? Surrender
   d. By whose authority did you leave?
   e. For how long was your leave granted? In what way?
   f. Why did you not return to your command after leave expired? On account of Sherman's Army
   g. In what way were you prevented? Surrender Army
   h. What effort did you make to return? I reported to an Officer at home to be returned the last time I returned he told me to go home
   i Were you captured during the war? No
   j If so, when, and where? In what prison were you held and when were you released?
9. Are you drawing a pension of any amount from this State or the United States? No.
10. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? No

Sworn to and subscribed before me, this the 11th day of Sept 1919

W. D. Margrave Ordinary

of Clinch County.

(SEAL)

J. T. Whilden

Questions for Witness as to Service

STATE OF GEORGIA,
Lawndes COUNTY.

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

1. What is your name and where do you reside? W. S. Fender Valdosta Ga Lawndes County

2. How long and since when have you known J. T. Whilden the applicant? July 1864 to the present

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? Stockton Ga Clinch Co Since I knew him in 1864

4. When, where and in what Company and Regiment did J. T. Whilden enlist during war from 1861 to 1865? (Give date and place.) Spring of 1864 Blackshear Ga Co H. 5th Ga Reserves

5. How did you obtain your information of this Service? In some Company with him

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date) Till about March 1865

7. When and where was his command surrendered or discharged (give date and place) April 1865 in N.C. Johnson Army

8. Were you personally present at the surrender? No

9. If not, where were you and how came you there? In N.C. sick & cut off from the Command by part of Sherman's Army

10. Was the applicant personally present with his command at surrender? No

11. If not where was he and how came him there? in S.C. on a/c of Sickness

12. When did he leave his command? Mch. 1865 Where was his command when he left it? S.C. Calling on District For what cause did he leave? Sickness By whose authority did he leave ✓ and how long was he granted leave? ✓ How do you know all that you have stated to be true? If of your own knowledge, tell clearly and specifically Present in the same Company

13. In what way was he prevented from returning to his command? By Sherman's Army How do you know? Was there

14. What effort did he make to return to his command and how do you know? DK

15. Was applicant captured as a prisoner DK If so, when and where? DK In what prison was he held? ✓ and when released ✓

Sworn to and subscribed before me, this the 9th day of Sept 1919 } W. S. Fender

T. N. Halcombe Ordinary of Lawndes County.

(SEAL)

GEORGIA LOWNDES COUNTY,

I, T N. Holcombe, Ordinary of said County do hereby certify that I knew W.S.Fender, the witness swearing to the service of J.T. Whildem, that he is a resident of Lowndes County, Ga. and was duly sworn before me, and that his affadavit is entitled to full faith and credit.

Sworn under my hand and seal of Office this Sept. 9th, 1919. T N Holcombe

Ordinary, Lowndes County, Ga.

NAME Whildon, J. T. YEAR 1920 COUNTY Clinch.

WHEN AND WHERE BORN? A resident of Georgia about 65 years.

ENLISTED WHEN AND WHERE? Spring of 1864, Blackshear, Georgia.

RANK:

COMPANY AND REGIMENT? Company H, 5th Georgia Reserves.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? Sick while in service and dropped out in South Carolina.

CAPTURED, WHEN AND WHERE?

RELEASED:

WHEN AND WHERE SURRENDERED? Command surrendered April,1865, North Carolina. (I think).

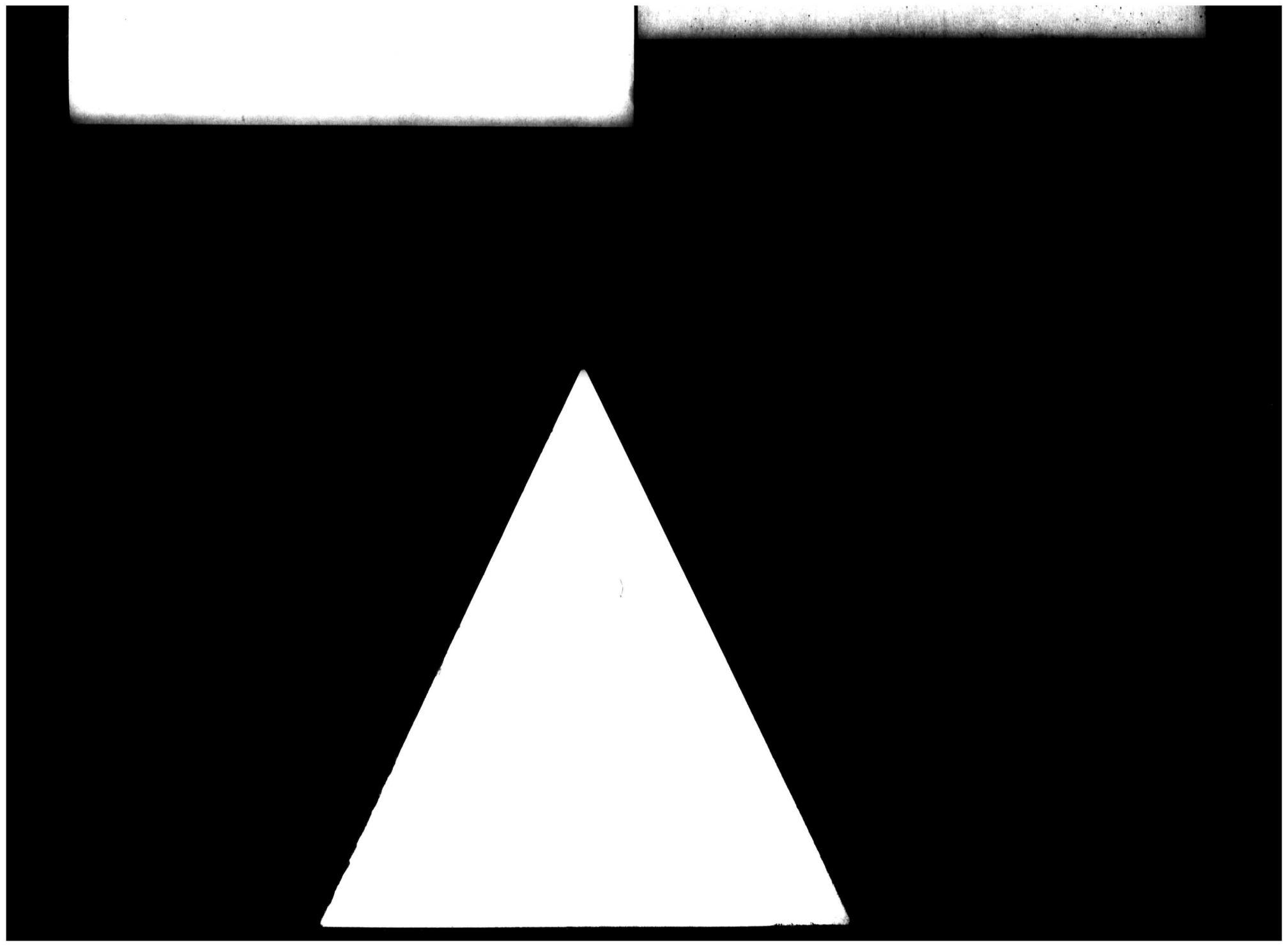
IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? Dropped out on account of sickness in South Carolina. Reported to an officer four (4) times and was sent home every time but the last time I reported he advised me to go Home - that Lee had surrendered.

DIED, WHEN AND WHERE?

BURIED:

WITNESSES: W. T. Fender - same company - - - No data.

SB



Clinch Co.
for 1902

ACT DEC. 16, 1901.

No.

WIDOW'S PENSION,

190

Mrs. Rucilla W Pulley

County of Clinch Co

Widow of Berry

Warrant issued K 26 Ga 190

and handed to

J. W. LINDSEY,
Commissioner of Pensions.

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

2/6 - 1906

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, Rucilla W Pulley hereby authorize
W. A. Wright of Atlanta Ga
to receive and receipt for the pension allowed and request that he remit same to
Robinson at Homerville by mail

Witness my hand and seal, this 2nd day of July 1906

Rucilla W Pulley [SEAL]

Executed in presence of
J. G. Dunnell

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch COUNTY.

I, Rucilla Whitley hereby authorize W. A. Wright of Atlanta Ga 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 2nd day of Feby 1906

Rucilla her X mark Whitley [SEAL]

Executed in presence of
J. F. Dame

Whitley, Rucilla
Clinch Co.
Ga Apr 1902

ACT DEC. 16, 1901.

No.

WIDOW'S PENSION,

190

Mrs. Rucilla Whitley
County of Clinch Co
Widow of Berry
Warrant issued K 26 Ga 190
and handed to

J. W. LINDSEY,
Commissioner of Pensions.

Geo. W. Harrison, State Printer, Atlanta, Ga.
2/6 - 1906

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,
COUNTY OF Clinch

Personally came Mrs. Rucilla Whitley who says on oath she is the widow of Berry Whitley to whom, in the County of Ware State of Georgia, she was married on the 4 day of July 1852, that she remained his wife up to the 24 day of October 1905, at which time he died, and that she has not since married.

At the time of his death he was a resident of Ware County, in said State of Georgia, and was on the Indigent pension roll of the State of Georgia, having been allowed a pension of $60.00 per annum on account of being a soldier in Company K 26 Regiment, Ga Volunteers or State Ga

What affliction have you and how does it affect you? age & poverty.

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

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

What have you acquired since, and what income have you now?
none

What disposition have you made of any property since 1st January, 1900, and at what price and for what purpose? Have not disposed of any property

Deponent further says that she is now a resident of Clinch County, and has continuously resided in the State of Georgia since the 4 day of April 1828

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

Sworn to and subscribed before me, this 2nd day of Feby 1906

Mrs Rucilla her X mark Whitley

J. F. Dame
Ordinary of Clinch County.

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

AFFIDAVIT FOR THREE WITNESSES.

STATE OF GEORGIA, } Personally came J. J. Davis
COUNTY OF Wan Clinch } Mary A. Davis and
H. B. Wilson, known to me to be reputable and truthful person, who says on oath that from his own personal knowledge Mrs. Rucilla Whitley who made the foregoing affidavit, is the widow of Berry Whitley who died in Wan County and State of Georgia on the ____ day of October 1905, and that she has not since married; that she became his wife ~~on the ____ day of ____ 18__~~ prior to 1860, and so remained up to the time of his death, and that she has resided in this State continuously since the ____ day of ____ 1860

With what affliction does she suffer? Infirmity from age

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

What has she in her possession and control now?
none

How was she supported in 1900 and 1901? by her children and husband's pension of $60.00 per annum

I have no personal interest in the pension asked for { J. J. Davis / Mary M. Davis / H. B. Wilson

Sworn to and subscribed before me, this 2nd day of Feby 1906

J. T. Dame
Ordinary Clinch County, Georgia.

PHYSICIANS' AFFIDAVIT.

STATE OF GEORGIA, } Personally came before me
COUNTY OF coffee } W. J. Stapleton M. D.
and J. V. Dalley M. D., both of whom are known to me to be reputable physicians, who say on oath that they personally know Rucilla Whitley mentioned in the foregoing affidavit, that she is permanently afflicted with (state disease and how it prevents her earning a support) with age & Disease relative to females her age is 68 years & is the mother of Eleventh children and is the only & Sowerful wife of Berry Whitley Deseast whose Death occurred oct 27-1905 from an abscess of the Sower Bowels

Sworn to and subscribed before me, this 23 day of December 1905

J. T. Dame
Ordinary of Clinch County.

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

STATE OF GEORGIA, } I, J. T. Dame Ordinary,
COUNTY OF Clinch } in and for said County of Clinch State of Georgia, hereby certify that I am acquainted with Mrs. Rucilla Whitley the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to me by reputable witnesses) that she resides in this County, and that she has resided in the State of Georgia continuously since the 00 day of Stated by her 18__, and has not lived out of the State since that date. I also certify that the witnesses, to-wit: J. J. Davis Mary A. Davis and H. B. Wilson whose testimony she presents to sustain her claim, are *known to me to be truthful witnesses*, entitled to full faith and credit as such, and that the full text of the affidavit was read to and understood by them before same was signed. I am fully satisfied that this claim is made in good faith, and I have caused the applicant and the witnesses to read or hear read the proofs they sign.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the 2nd day of Feby 1906

J. T. Dame
Ordinary.

{SEAL}

NOTES.

The Pension is only payable to those widows whose husbands were on Pension Roll at the time of death. The marriage must have existed at the time husband was a soldier, and the widow must have remained unmarried since the death of such husband. Date of marriage is essential and must be submitted.

Proofs by one witness and two physicians will be accepted when it is shown that the same cannot be furnished, but in all cases the best proof accessible will be required, and it is incumbent on the applicant to make out a clear case covering the above points.

Affidavits must be made in presence of the Ordinary.

Ordinary of Clinch County.

but in all cases the best proof accessible will be required, and it is incumbent on the applicant to make out a clear case covering the above points.

Affidavits must be made in presence of the Ordinary.

Guardian Deed from
Missouri C. Everett
to
Eliza L. Mattox.
Town lot in Homerville, Ga.

State of Georgia,) Office of Clerk
)SS
Clinch County.) Superior Court
)

Filed for Record at __ o'clock, ___ M., this 23 day of April, 1900, and Recorded in Book R, Folio 475, to 478, this 24 day of April, 1900.

S. W. Register. Clerk.

Appointment of Missouri C. Everet, Guardian. Petition and Order to sell Land, and this Deed included in the above pages.

S. W. Register.

Clk. S. C. C. C.

Fee $1.43

Witness whereof, the saud guardian has hereunto set her hand and affixed her seal, the day and year first above written.

Signed, sealed and delivered in the presence of:

Missouri C. Everett,
Guardian for Harry Whittington.

By Levi O'Steen, her Atty in fact.

S. L. Drawdy.

S. W. Register.
Clk. S. C. C. C.

Georgia Clinch County
I A Gibbs, Clerk of the Superior Court of said County hereby Certify That I have Compared the foregoing One and one eighth (1⅛) page of Typewritten matter with the Orginal record, and the same is a True Copy. Given under my hand and seal of office at Homerville Ga this 30 Day of Dec - 1916
A Gibbs Clerk S C

GEORGIA, CLINCH COUNTY.

THIS INDENTURE made this ----day of April, 1900, between Missouri C. Everett, guardian for Harry Whittington, minor heir of Margarette Whittington late of said county, deceased, as party of the first part and Mrs. Eliza L. Mattox of the county of Clinch State of Georgia, as party of the second part.

WITNESSETH, that whereas, the Court of Ordinary of Telfair County, did at its regular February Term 1900, duly authorize the said guardian to sell certain real estate belonging to said minor, herein after described, and whereas, the said guardian, after advertising such sale in the Clinch County News, a news paper having a general circulation in the county where said real estate lies, once a week for four weeks after the leave was granted and before sale, did expose the same at public auction on the first Tuesday of the month of April 1900, between the legal hours of sale, at the courthouse in said county, when the same was then and there knocked off to said Mrs. Eliza L. Mattox as the highest and best bidder, at and for the sum of Two Hundred Seventy Five Dollars.

Now therefore, the said guardian, in consideration of said sum of $_____ in hand paid, receipt whereof is hereby acknowledged doth sell and convey to the said Mrs. Eliza L. Mattox the following real estate to wit: One house and lot in the town of Homerville, Clinch Georgia, said county, being one half acre of land, bounded on the North by a street and the lands of S. L. Drawdy, on the East by a street and the lands of Mrs. C. C. Drawdy, South by right of way of the S. F. & W. R'y. Co., and on the West by lands of C. C. Gillican, being a portion of lot of land number _____ in the _____ District of said State and county, and better known as the "Whittington" house and lot in said town.

To have and to hold said property as fully and completely as the same was held by said Harry Whittington, minor heir of Maragrette Whittington, late of said county, deceased.

ette Whittington, late of said county, deceased.

March 7 1889.

Wm A Wright
COMPTROLLER-GENERAL.

Williams, James M.
Lewis Co.

Maimed Soldiers.

Voucher No. 1162

Amount. $ 100.

Paid to J. M. Williams

For Loss of arm

Mch 6 1889.

Included in Warrant No.

issued to Treasurer.

1889.

WARRANT CLERK

W. J. Campbell, State Printer, Constitution Job Office.

No. 1162

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. } Atlanta, Ga. Mch. 6 1889

Mr. James M. Milliams of the County of Meriwether having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Act, Dec. 24, 1888, and the same having been allowed for

Loss of left arm

He is entitled to receive the sum of One Hundred 00 Dollars for such disability, the same being the allowance due for the year ending October 24, 1889.

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

GOVERNOR.

By the Governor

CLERK EXECUTIVE DEPARTMENT.

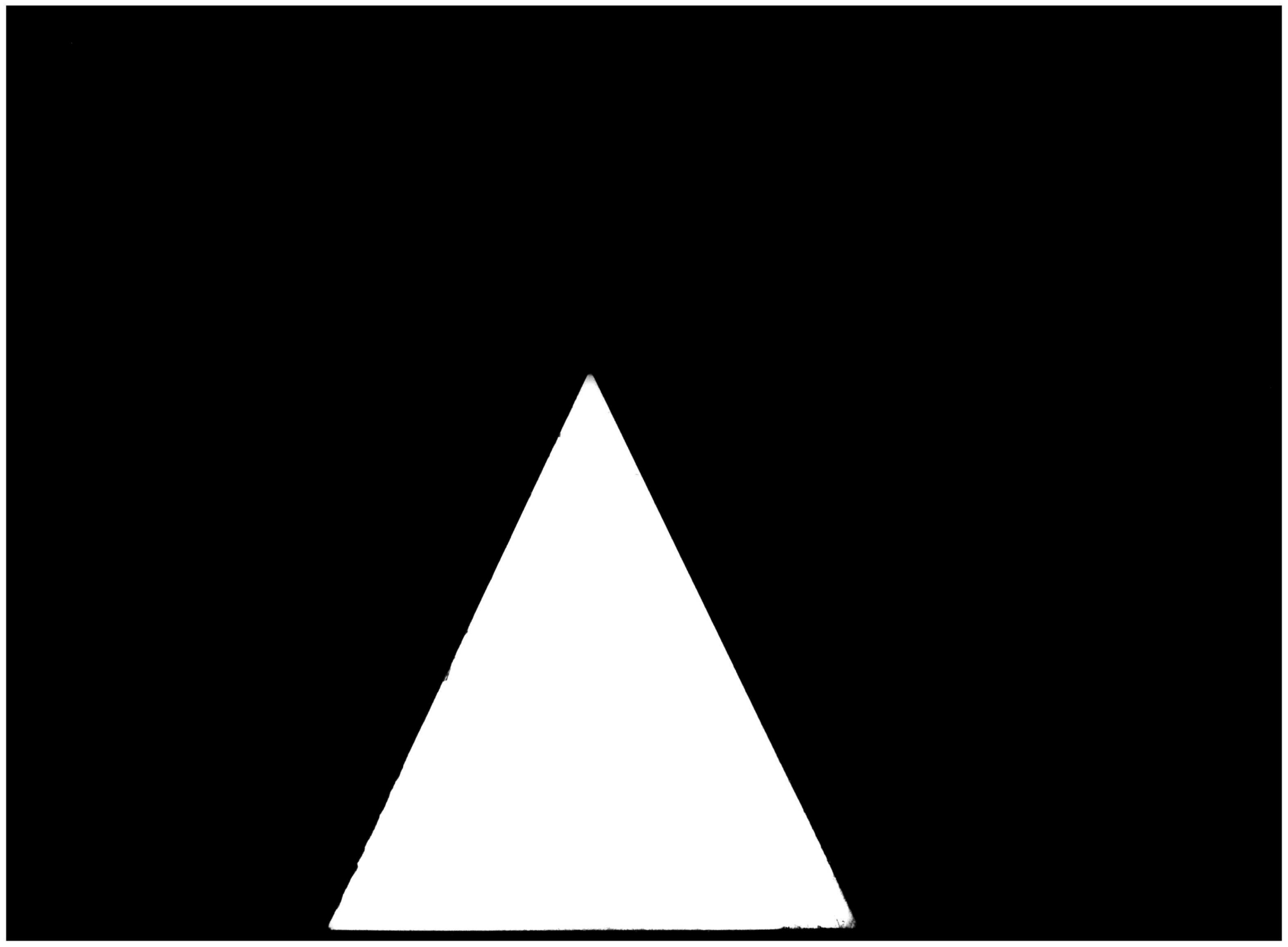
10c.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

One Hundred 00 Dollars.

per above voucher, this 6 of March 1889.

James M. Milliams
by W. W. Harrison



POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA,

Clinch County.

Know all Men by these Presents, That I, [illegible]

of [illegible]

County, in said State, do hereby appoint William A. Wright Comp. Tenn.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 4th day of August 1891

Nancy Williams [L. S.]

Executed in the presence of us:

Louis Smith

George Cornelius ord

DIRECTIONS.

If allowed, send amount by Express to me at Homerville Georgia, and oblige,

Nancy Williams

Williams Nancy
Clinch County
1891.

No. 3601
Pd. Cr. 8.60
Rep. Sec.

Widows' Pension

PAID TO Mrs. Nancy Williams
OF Clinch County.

$100.00.

Warrant Issued 1891

AND HANDED TO

E 1959

Geo. W. Harrison, State Printer Atlanta.

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA,
Clinch County.

Know all Men by these Presents, That I, Nancy Williams
of Clinch
County, in said State, do hereby appoint William C. Knight Comp. Ten-
of Clinch County my true and lawful attorney in fact, for
me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 4th day of August 1891

Nancy Williams [L. S.]

Executed in the presence of us:

George Connelly J.P.

DIRECTIONS.

If allowed, send amount by Express. to me at Homerville Clinch County, and oblige,

Nancy Williams

Williams Nancy
Clinch County
Ga.
1891.

No. 3601
Reg. Feb. 6 1891

Widows' Pension

PAID TO Nancy Williams
OF Clinch County

$100.00

Warrant Issued

1891

AND HANDED TO

Chas. W. Harrison, State Printer, Atlanta.

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA,
County of Clinch

In person came before me, the undersigned Ordinary in and for the County of Clinch

Mrs. Nancy Williams, who being sworn according to law, says under oath that she is the widow of John Williams, who was a soldier in the service of the Confederate States, and served as a member of Company B, of the 2nd Battalion Regiment of Georgia Volunteers; that he enlisted in said service on or about the 1st day of March 1862, and was in the Confederate Army up to June 1864 That while in the Army, he was on the 20th day of July 1864, (See Note No. 1)

That was killed by a cavalry scout
Nathan Williams in Clinch County
Georgia in Clinch County
Necessary affiant further saith not
and on oath says that the said John Williams was shot and killed by Nathan Blanchard a citizen in Clinch County on the 20th day of July 1864 That John Williams was on detail duty to arrest said Blanchard a deserter in Clinch County on the day he was killed by said Blanchard

Sworn to and subscribed before me
this the 4th day of Aug 1891
George Connelly J.C.C.

Deponent further swears that she was the wife of said deceased soldier during his term of service in the Army, and that she has never married since his death; that she became his wife on the 10th day of May 1862, and that she has resided in Georgia continuously since the 14th day of May 1862; that Georgia is her home, and was such on the 23d day of December, 1890, and since said date she has not lived in any other State or locality. Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February 15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this the 4th day of August 1891.

Nancy Williams

George Connelly
Ordinary.

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

Form No. 2.

Affidavit for Three Witnesses.

STATE OF GEORGIA,
County of Clinch

In person came before me, the undersigned Ordinary in and for said County, witnesses D. H. Johnson, J. H. Mattox and John Knight (each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge, Mrs. Nancy Williams, of the County of Clinch, State of Georgia, is the widow of John Williams, who was a soldier in Company B of the 2nd Battalion Regiment of Georgia Volunteers. That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the 1st day of May 1864 That while in said service, or by reason of said service in the Army, he lost his life as follows: Shot and killed by a deserter named Nathan Blanchard in Clinch County on the 20th day of July 1864 He was on detail duty in said County at the time of his death to arrest deserters and send them back to their Commands

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

Sworn to and subscribed before me, this, the 4th day of August 1891.

George Cornelius
Ordinary.

John H. Mattox +
Pwn. H. Johnson X
John Knight

Form No. 3.

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

STATE OF GEORGIA,
County of Clinch

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 4th day of August 1891.

SEAL

George Cornelius
Ordinary.

Form No. 4.

NOTES.

The pension is only payable to certain classes of widows.

Those whose husbands were killed in service.

Those whose husbands died *in the army* of wounds or disease contracted in the service.

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

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

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

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

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

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

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

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

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

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

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

By order of the Governor.

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

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

Form No. 2.

STATE OF GEORGIA, County of Clinch

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 6th day of February 1893.

SEAL

George Cornelius Ordinary.

POWER OF ATTORNEY.

Form No. 3.

STATE OF GEORGIA, Clinch County.

KNOW ALL MEN BY THESE PRESENTS, That I, Nancy Williams of Clinch County, in said State, do hereby appoint William A Wright Comp Gen of Atlanta Georgia my true and lawful attorney in fact, for me and in my name, to receive and receipt for [illegible] from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 6th day of February 1893

Nancy her X mark William [L. S.]

Executed in the presence of us:
George Cornelius Ord.
J. C. Kirkland Ex. Jr.

DIRECTIONS.

Send amount by Express to me at Homerville Ga, and oblige

Nancy Williams

Williams, Nancy
Clinch County
FOR THOSE HERETOFORE PAID.
2/12 4

1893.

No. 1/32

Widows' Pension,

for year ending February 15th, 1893.

—PAID TO—

Mrs. Nancy Williams

—OF—

Clinch County.

Jul 1891

Warrant Issued

2/16 1893

AND HANDED TO

W. A. W.

Geo. W. Harrison, State Printer, Atlanta.

E 1959

Form No. 1.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Clinch

Personally comes Mrs. Nancy Williams

who being sworn, says on oath, that she is a bona fide resident of said County of Clinch State of Georgia, and that she has *resided* in said State continuously ever since 1860 That she is the Widow of John Williams who was a Soldier in Company I of the 6th Regiment of Georgia Volunteers, that he enlisted in said Regiment on or about the month of September 1864 and served in the Army up to Sept 1864 That he lost his life on the _____ day of _____ 18__ (*State here full particulars of the husband's death, when, where and from what cause.*) (That the said Soldier husband was detail out of his command for the purpose of looking up deserters and other absentees from the confederate army. and while engaged in said duty he was shot and killed by a deserter by the Name of Nathan Blanchard on the 3d day September 1864 in Clinch County Georgia)

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year about 1856; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1892, and now apply for the allowance provided by law for the year ending February 15th, 1893.

Sworn to and subscribed before me, this 6th day of February 1893.
George Cornelius Ordinary.

her
Nancy X Williams
mark
Post-office Homerville Ga