

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

Form No. 2.

STATE OF GEORGIA, County of *Clutch*

I, *George Cornelius*, Ordinary in and for said County of *Clutch*, 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, 1860, 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.

George Cornelius Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, *Clutch* County.

KNOW ALL MEN BY THESE PRESENTS, That I, *Nancy Williams* of *Clutch* County in said State, do hereby appoint *William A. Wright* 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.

Executed in the presence of us: *Nancy Williams* [L. S.]

Breton Williams
George Cornelius only

DIRECTIONS.

Send amount by *Express* to *me at Homeville Ga* and oblige *Nancy Williams*

WIDOW'S PENSION,
for year ending February 15th, 1894.
—PAID TO—
Nancy Williams
—OF—
Clutch County.
WARRANT ISSUED
AND HANDED TO
W A WRIGHT
1894.

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

Form No. 2.

STATE OF GEORGIA, County of *Clutch*

I, *George Cornelius*, Ordinary in and for said County of *Clutch*, 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, 1860, 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.

George Cornelius Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, *Clutch* County.

KNOW ALL MEN BY THESE PRESENTS, That I, *Nancy Williams* of *Clutch* County in said State, do hereby appoint *William A. Wright* 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.

Executed in the presence of us: *Nancy Williams* [L. S.]

Breton Williams
George Cornelius only

DIRECTIONS.

Send amount by *Express* to *me at Homeville Ga* and oblige *Nancy Williams*

WIDOW'S PENSION,
for year ending February 15th, 1895.
—PAID TO—
Nancy Williams
—OF—
Clutch County.
WARRANT ISSUED
AND HANDED TO
W A WRIGHT
1895.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Clutch*

Personally comes Mrs.

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

Clutch State of Georgia, and that she has resided in said State continuously ever since

1840 That she is the Widow of

who was a Soldier in Company

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. 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.)

The said Soldier husband was on detail from his command to gather up deserters and deserters, and was shot and killed by one William Simons, while trying to capture 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.

Post-office

Hamersville Ga

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Clutch*

Personally Comes Mrs.

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

Clutch State of Georgia, and that she has resided in said Statecontinuously ever since *the year* 1850 That she is the Widow of*John Williams* who was a Soldier in Companyof 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 hislife 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 deserters, and was killed while in such service by a deserter on the 3rd day of September 1864

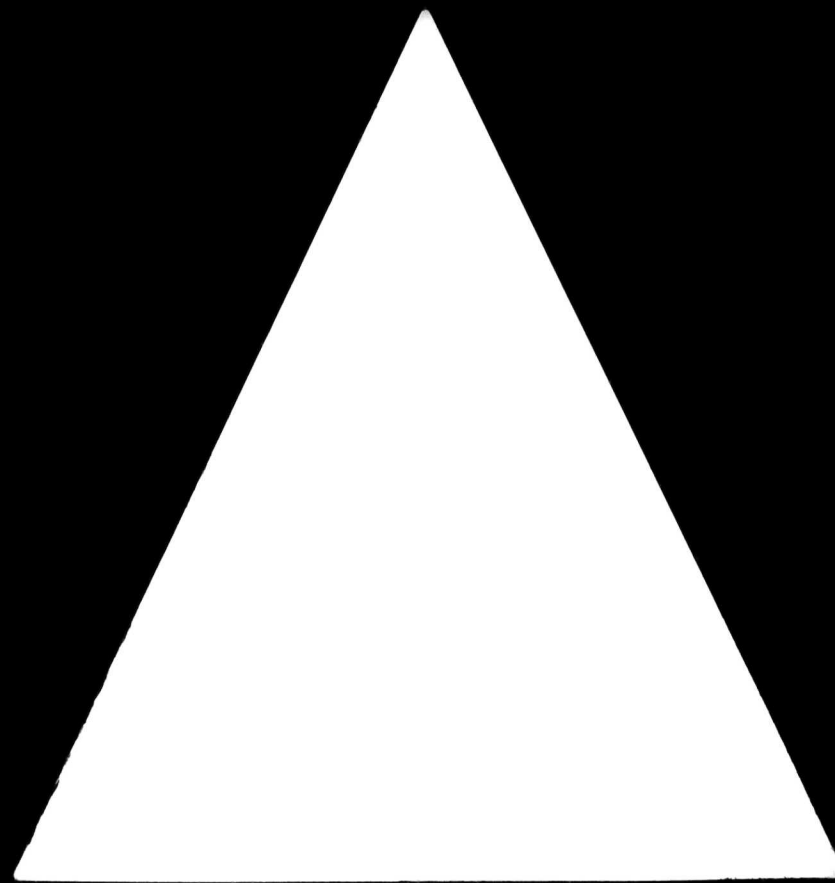
Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1856, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not 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 *Jan* 1895.*George Cornelius* Ordinary.

Post-office

Hamersville Ga



Wilson Helen
John 1914
Clusick

+ 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 *Clusick*

Name *Helen Wilson*

Widow of *John M. Wilson*

Company *St. 29 La. Ry.*

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAR. P. BYRD, State Printer, Atlanta.

10/7/1913

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

Clutch 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 Clutch 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 15 1867 and that she has not since his death remarried. At the time of his death he was a resident of Clutch County, in Ga said State of Georgia, and he was on the Indigent Pension Roll of the State and paid a pension of \$60.00 in Clutch County for 1862 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 Cows, etc. \$ 100.00

Total Cash value of all property \$

That she is now a bona fide resident citizen of said County of Clutch and she has so continuously resided since all her life day of 10

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

J. J. Same Ordinary,

of Clutch County.

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

STATE OF GEORGIA,

Clutch County.

Personally before me come Haris Simon 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 Clutch County in said State of Ga on 13 day of Sept 1867 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 Clutch County when he died.

Sworn to and subscribed before me, this the 4th day of Oct 1913 } Haris Simon

J. J. Same Ordinary,

of Clutch County.

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 Clutch

Name Hellen Wilson

Widow of John M. Wilson

Company 29th Ga Regt

Approved

J. W. LINDSEY,

(Commissioner of Pensions)

CHAS. F. BYRD, STATE PRINTER, ATLANTA.

10/7/1913

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,

Cherokee

County.

I, J. J. Danner Ordinary of said County, do certify, that, I know Mrs. M. L. 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..... 1912.....

That I also know Maria Simon 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 Cherokee County shows that..... returned property to the amount of..... for 1908 \$..... for 1909 \$..... for 1910 \$.....

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

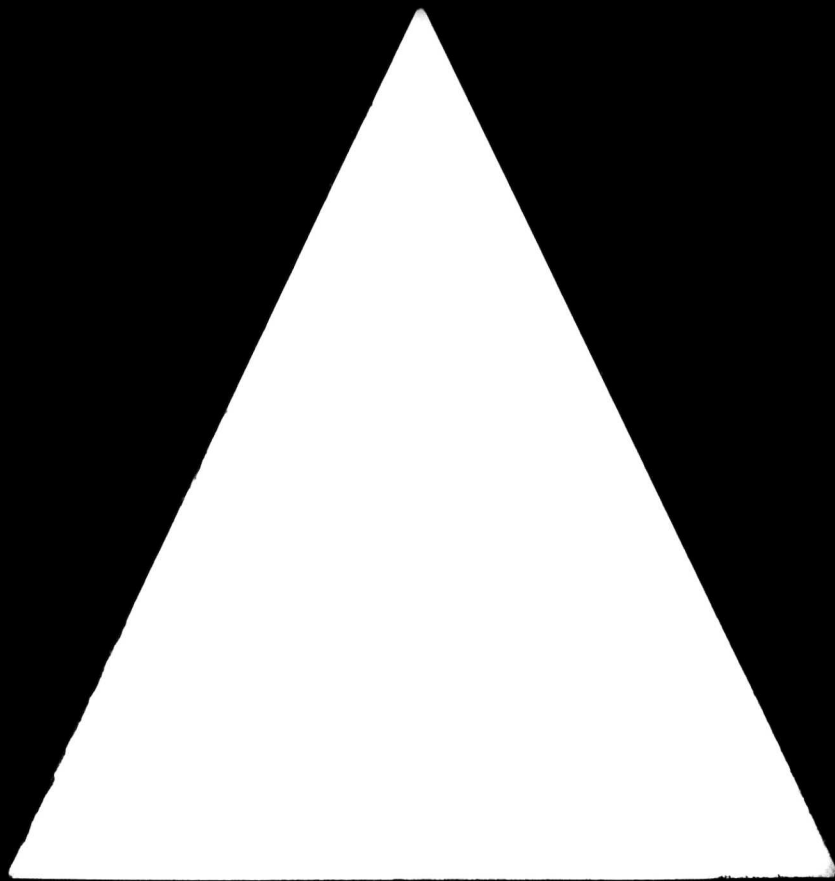
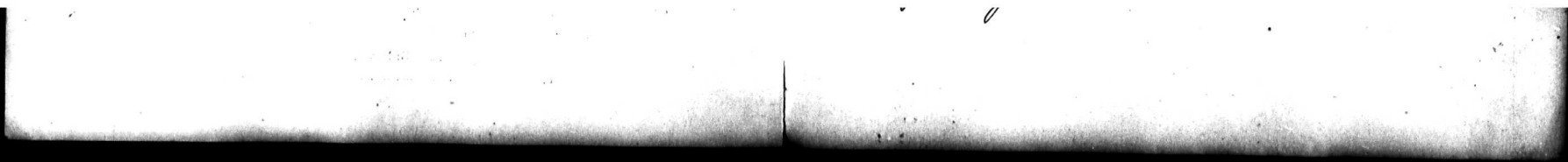
(SEAL.)

Ordinary.

Cherokee County.

- NOTES 1. Before any questions are answered, the Ordinary shall swear applicant and the witness in the following words "You do solemnly swear that you will give 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.



POWER OF ATTORNEY.

STATE OF GEORGIA,

Clutch COUNTY, }

I, John M. Wilson of Clutch County, Georgia, do hereby authorize

to receive and receipt for the pension allowed and request that he remit same to J. W. Lindsey residing at Hamlet by mail

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

John M. Wilson [L. S.]

Executed in presence of

J. W. Lindsey

John M. Wilson
Applicant
No. 1907
Clutch County

INDIGENT PENSION.

1907

Name John M. Wilson

County Clutch

Co. 26th Regt.

Approved 1907

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

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

10/21/07

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, John M. Wilson hereby authorize

W. D. Wright of Attalla Ga

to receive and receipt for the pension allowed and request that he remit same to J. T. Adams

Ordinary at Hornville by mail

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

John M. Wilson [L. S.]

Executed in presence of

J. T. Adams

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Cherokee COUNTY.

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

1. What is your name and where do you reside? (Give, State, County and Postoffice.)

John M. Wilson Georgia Cherokee Co Post

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? Cherokee Co 1836

4. When and where and in what company and regiment did you enlist or serve? Coast Mail

Company H. 36th Regt. U.S. Cavalry

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

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

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, "infirmary and poverty," or third, "blindness and poverty"? Age & Poverty

12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third,

state whether you are totally blind and when and where you lost your sight? 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?

Cherokee County no Property

16. How were you supported during the years 1901, 1902, 1903, 1904 and 1905?

By carriage & 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? Very little

18. What was your employment during 1901, 1902, 1903, 1904 and 1905? What pay did you receive in each year?

Carriage Mail Postmaster

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

stead, or other property? Their ages and how employed? Wife of seventy

years old - one little Grand Son lives

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

J. T. Adams Ordinary.

of Cherokee County Ga

J. T. Adams Ordinary.

John M. Wilson Applicant.

Every Question MUST Be Answered

INDIGENT PENSION.

1907

Name John M. Wilson

County Cherokee

Age 76 Regt. 36th

Approved 1907

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Ordinary, with name of Applicant, Company and Regiment as hereon indicated.

This warrant is to be returned to the Ordinary of the County of the Applicant.

10/21/06

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, depose 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? Just 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? year 1861 Company N 26 Regiment state Ga
5. Were you a member of the same company and regiment? was Member of Rymer
6. How long did he perform 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? At Fort Sumter 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 somewhat over age old and carrying
mail some miles with a Blind pony
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 don't 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 & Infirmary & Poverty
19. Who composes family? What property have they? Children's ages and their earning capacity? himself & wife & Grand 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 13 day of July 1906
W. T. Joyce Ordinary.
for Clinch Co Ga
J. T. Dams ordinary C.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Clinch COUNTY.

Personally came before me J. A. Moor and J. 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 & lost Limbs
J. A. Moor
J. 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. Dams Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Clinch COUNTY.

I, J. T. Dams 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 1892 day of 1892 and that the witnesses, viz: J. A. Moor & J. 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 \$65 Dollars of property, and in 1902 \$58 Dollars of property; in 1903 \$47 Dollars of property; in 1904 \$103 Dollars of property.

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

Witness my hand and seal of office, this 16 day of November 1907
J. T. Dams 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 PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

Clatsop County, Idaho 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, Clatsop County, Idaho
2. How long and since when have you been a continuous resident citizen of this State? Since 1881
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 Fort, N. M., Co. 22, 22nd
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) 1861, United States, 1861
6. When and where was your Company and Regiment surrendered or discharged from the Service? I was captured and taken to the Union Army, at Fort, N. M., 1861
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. At Fort, N. M., 1861
9. Where was your Command when you left the Service? At Fort, N. M., 1861
10. When did you leave the Command? 1861
11. For what cause did you leave? Captured
12. By whose authority did you leave? Captured by the Union Army
13. For how long was your leave granted? In what way? Captured

14. Why did you not return to your Command after leave expired? I was in the Union Army
15. In what way were you prevented? Same reason as above
16. What effort did you make to return? None
17. Were you captured during the war? Yes, during the Union Army
18. If so, when, and where? In what prison were you held and when were you released? 1861, Union Army, 1861
19. 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
20. 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
21. What property 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.) None
22. What annual or monthly income or earnings of yourself and wife and the source derived have you? None
23. Are you drawing a pension of any amount from this State or the United States? None
24. Have you ever applied for the Georgia Pension and has it refused? and for what cause it was not allowed? None

Sworn to and subscribed before me, this the

6 day of January, 1912

John M. Wilson Ordinary

Clatsop County

**Confederate
Soldier's Application.**

UNDER ACT 1910.

County Clatsop
Name John M. Wilson
Company Co. 22
Regiment 29th Reg
Approved _____

J. W. LINDSEY.

Commissioner of Pensions

CHAS. P. BYRNE, State Printer, Albany

Soldier's Application.

UNDER ACT 1910.

Confederate

County Clack
 Name John William
 Company Co. 2d
 Regiment 29th Reg
 Approved _____

J. W. LINDSEY,
 Commissioner of Pensions

CHAS. P. BROWN, State Printer, Atlanta.

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 William Clack, Co. 2d, 29th Reg.
2. How long and since when have you been a continuous resident citizen of this State?
Since 1861, make for 29th Reg.
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 1st Reg. Co. 2d, 29th Reg.
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge)
1861, until captured in 1865.
6. When and where was your Company and Regiment surrendered or discharged from the Service?
1st Reg. Co. 2d, 29th Reg. surrendered in 1865, at the Battle of Gettysburg.
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.
At the Battle of Gettysburg.
9. Where was your Command when you left the Service?
At the Battle of Gettysburg.
10. When did you leave the Command?
1865.
11. For what cause did you leave?
Confederate.
12. By whose authority did you leave?
Confederate.
13. For how long was your leave granted? In what way?
Confederate.
14. Why did you not return to your Command after leave expired?
Confederate.
15. In what way were you prevented?
Confederate.
16. What effort did you make to return?
Confederate.
17. Were you captured during the war?
Yes.
18. If so, when, and where? In what prison were you held and when were you released?
1865, at the Battle of Gettysburg.
19. 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.)
20. 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?
21. 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).
22. What annual or monthly income or earnings of yourself and wife and the source derived have you?
23. Are you drawing a pension of any amount from this State or the United States?
24. Have you ever applied for the Georgia Pension and has it refused? and for what cause it was not allowed?

Sworn to and subscribed before me, this 1st

day of _____ 1865

John W. Clack

Ordinary

County

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA.

Cherokee County.

Colonel W. Park of said Cherokee County is hereby presented as a witness in support of the application of John M. Williams 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? Cherokee County, Ga. I reside at the residence of the applicant.
 2. How long and since when have you known 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? Cherokee County, Ga. I have known him all his life.
 4. When, where and in what Company and Regiment did John M. Williams enlist during war from 1861 to 1865? (Give date and place) Enlisted in the 1st Georgia Infantry, 1861.
 5. How did you obtain your information of this Service? By hearing him tell.
 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) At Fort Fisher, N.C. and the rest of the fort.
 8. Were you personally present at the Surrender? I was not, but I was at the fort.
 9. If not, where were you and how came you there? I was at the fort.
 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 to the prison at the other prison.
 12. When did he leave his Command? At the fall of the fort. Where was his Command when he left it? Captured near Fort Fisher. for what cause did he leave? Captured by the enemy.
By whose authority did he leave Captain. and how long was he granted leave? None. How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) I was a Lieutenant of the same Co. and Regiment.
 13. In what way was he prevented from returning to his Command? By being in prison. How do you know? He was in prison and I was at the fort.
 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? At Fort Fisher, N.C. In what prison was he held? At Camp Chase, Ohio. and when released? I know in June 1865.
- Sworn to and subscribed before me, this the 6th day of August 1910.
J. T. Adams Ordinary.
 of Cherokee County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Cherokee County.

Personally before me comes Colonel W. Park 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.

1907 State is full up.

1. When and to whom was it sold or given to?
2. What was the price paid or value to be paid?
3. What evidence is there to support it?
4. What document was made at the time of the sale?
5. Was the document or 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.

County.

ORDINARY'S CERTIFICATE.

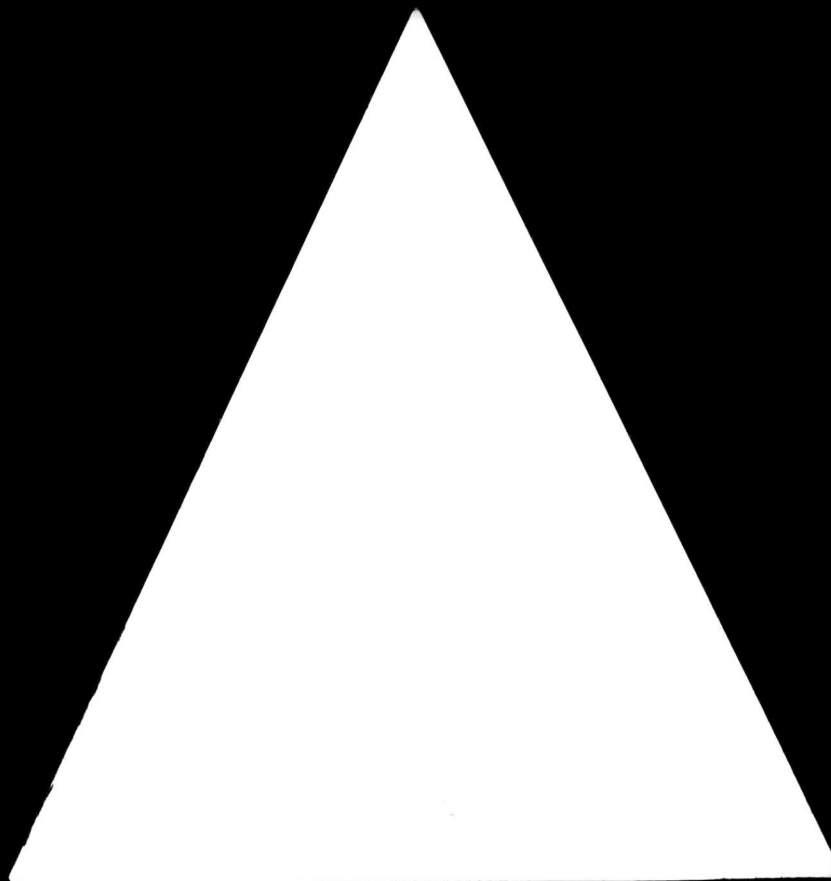
STATE OF GEORGIA.

Cherokee County.

J. T. Adams Ordinary of said County, certify that I know the applicant John M. Williams for Pension is the person he represents himself to be and resides in said County. Thus I also know Colonel W. Park the witness swearing to the service and Colonel W. Park 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 Records of Cherokee County shows that John M. Williams and wife value for tax is in 1908 \$ 1000.00 for 1909 \$ 1000.00 for 1910 \$ 1000.00.
 Sworn under my hand and official seal of office this 6th day of August 1910.
J. T. Adams Ordinary Cherokee County.

- NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words: You do solemnly swear that you will true answers make to each question asked you and the evidence you shall give shall be the whole truth so help you God.
2. Additional affidavits may be attached if blank spaces are indicated.
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.

1. What property, if any, has been sold or given away by the applicant or his wife since 4. Nov.



END

CLINCH

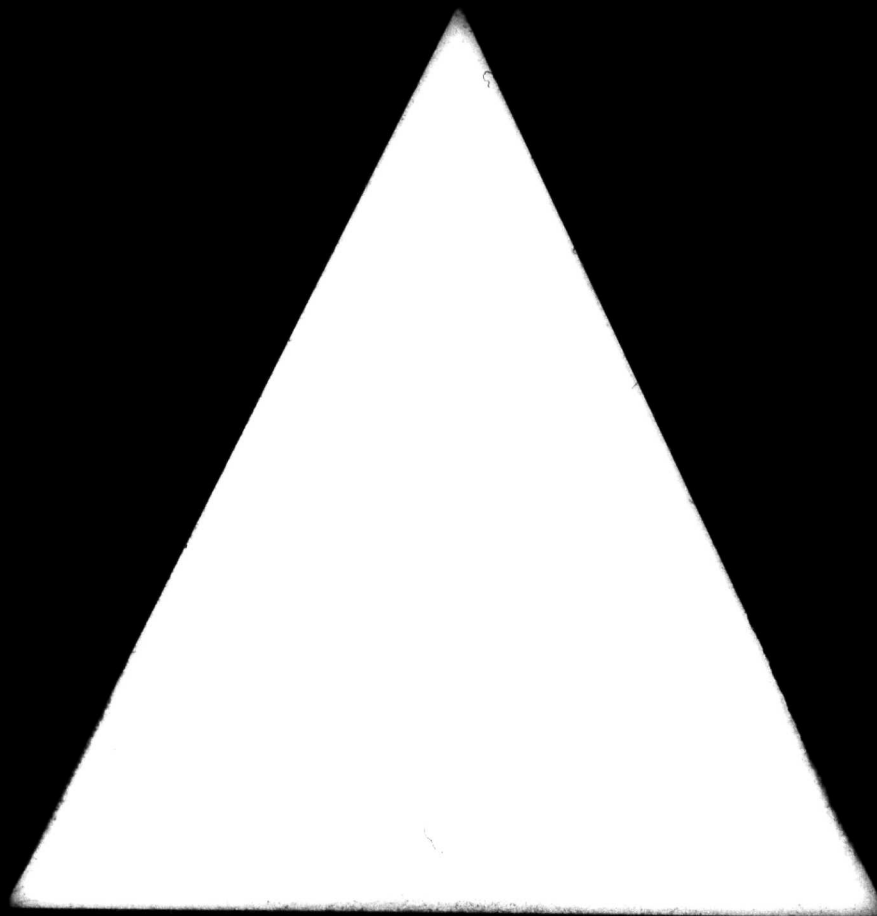
COUNTY

BEGIN

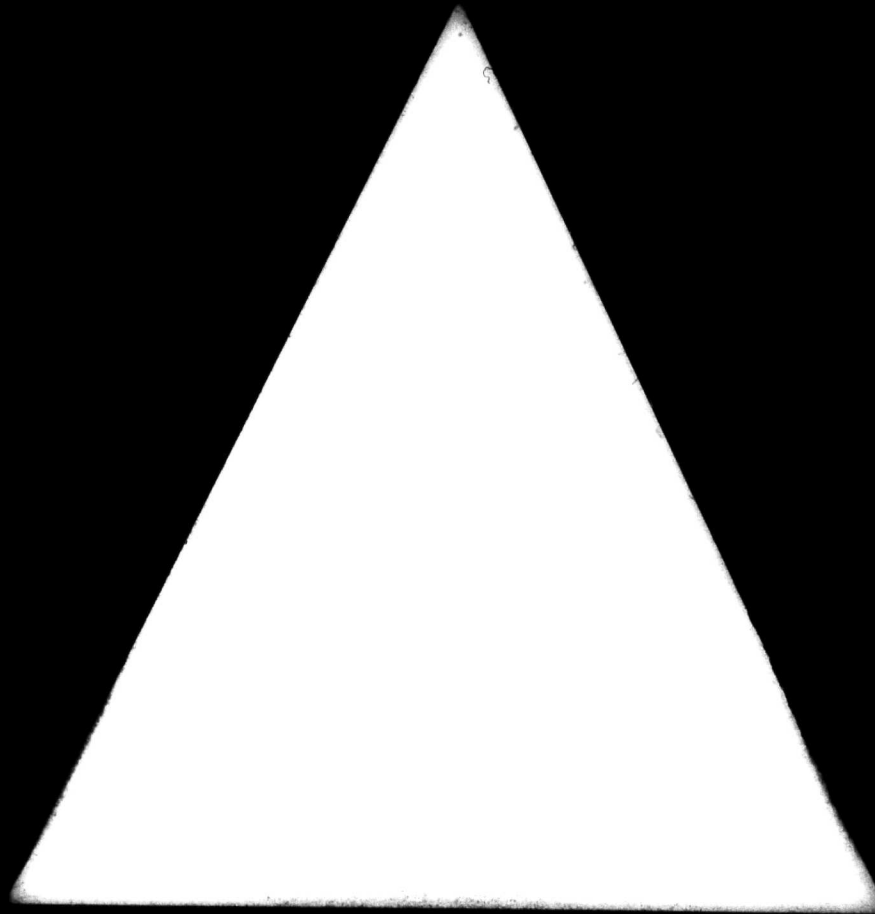
COBB

COUNTY

COBB

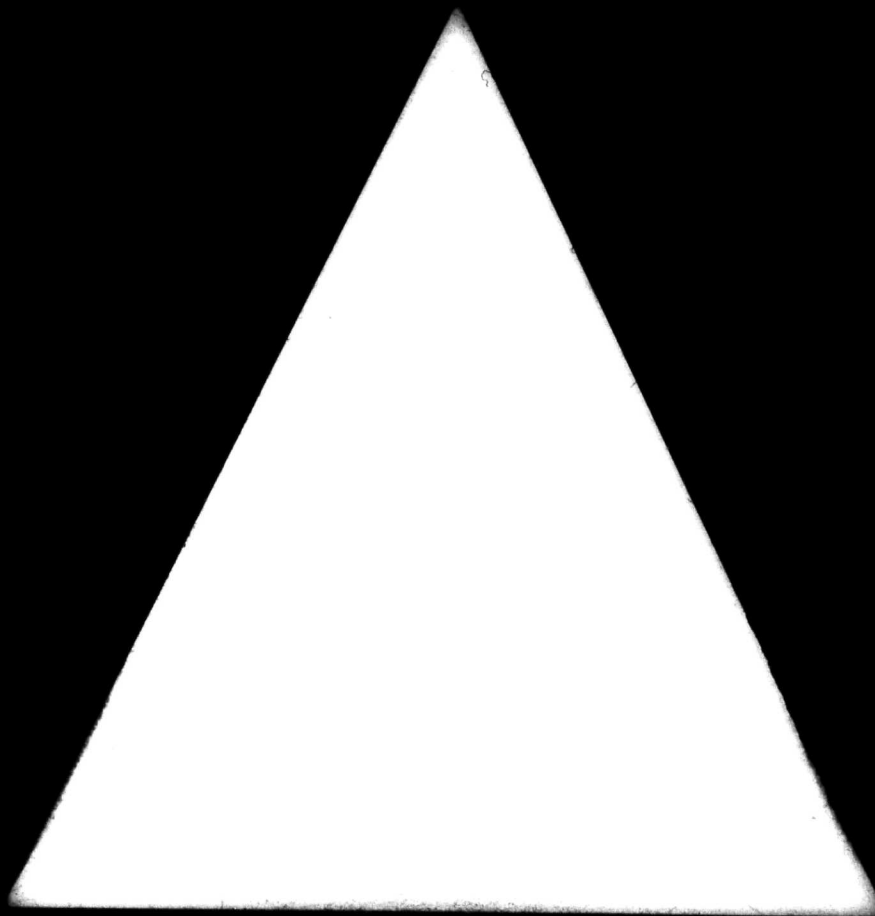


COBB



COUNTRY

COBB



COUNTY

POWER OF ATTORNEY.

STATE OF GEORGIA.

Paulding County.

I, *A. B. Adams*

hereby authorize *Sam'l Stone*

of

Marion Ga.

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

me

by

them

at

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

day of

1897.

A. B. Adams [L. S.]

Executed in presence of

E. M. Fleming

Paulding 1906
Adams, A. B.
Cobb County
ADOPTED 15 DEC. 1894.
(For Those Already Enrolled.)

No. *973*

INDIGENT
Soldier's Pension.
1897.

Name *A. B. Adams*

County *Cobb*

4/6 1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

James Stone
SEA. W. HARRISON, STATE PRINTER, ATLANTA.

No date

POWER OF ATTORNEY.

STATE OF GEORGIA.

Colt County. }

I, *D. R. Adams* hereby authorize *J. M. Stone*
of *Marion 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 *Jan'y* 1897.

Executed in presence of
G. M. Fleming

D. R. Adams [L. S.]
m k

POWER OF ATTORNEY.

State of Georgia,

Colt County. }

I, *D. R. Adams* hereby authorize *J. M. Stone*
of *Colt 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 *Jan'y* 1898.

Executed in presence of
G. M. Fleming

D. R. Adams [L. S.]
m k

Pending 96
Adams
ACT OF 15 DEC. 1894.
(For Those Already Enrolled.)

No. *973*

INDIGENT

Soldier's Pension.

1897.

Name *D. R. Adams*
County *Colt*

1897.

1/16

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO

J. M. Stone
Secy. of Pensions, STATE OFFICE, GEORGIA.

No date

INDIGENT

SOLDIER'S PENSION.

1898.

Name *D. R. Adams*
County *Colt*

WARRANT ISSUED

1/13/1

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO

J. M. Stone
Secy. of Pensions, STATE OFFICE, GEORGIA.

No date

Applicant Resided in Paulding County in 1896

Enlisted in Co. D. 1st Phila. Legion
Trans. to

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 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 A, of 40th Regiment of Yg 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 Jan., 1897.

J.M. Stone Ordinary.

D.R. Adams
mark
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 Jan., 1897.



Ordinary J.M. Stone Cobb County.

NOTE—The blank 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 day of October 1853; that he is 64 years old and by occupation farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 Yrs in Company D of 1st Phila. Legion; that his physical condition is as follows: 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 Jan., 1898.

J.M. Stone Ordinary.

D.R. Adams
mark
Bonar 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 Jan., 1898.



Ordinary J.M. Stone Cobb County.

NOTE—The blank spaces must be filled.

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb County.

I, *J. R. Adams* hereby authorize
John Adams of *Manetta*

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

by *me*
him

Witness my hand and seal this *10* day of *Sept* 1899.

Executed in presence of
J. R. Adams
me

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb County.

I, *J. R. Adams* hereby authorize
John Adams of *Manetta*

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

by *me*
him

Witness my hand and seal, this _____ day of _____ 1900.

Executed in presence of
J. R. Adams [L. S.]
me

Executed in presence of
T. J. Haubty

Adams, J. R.
Cobb Co.
code sec. 1284.

(For These Already Enrolled.)

No. *1132*

INDIGENT

SOLDIER'S PENSION,

1899.

Name *J. R. Adams*
 County *Cobb*

WARRANT ISSUED

1899

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

Prescribed by T. J. Haubty
code sec. 1284.

No date

Reg. to Adams, J. R.
Aug. 11, 1899

Cobb Co.

code sec. 1284.

(For These Already Enrolled.)

No. *787*

INDIGENT

SOLDIER'S PENSION,

1900.

Name *J. R. Adams*
 County *Cobb*

WARRANT ISSUED

1900.

January 11
 JOHN. W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

J. M. Pence
code sec. 1284.

No date

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 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 B, of 48th Regt. Va. Vols Legion Ha. 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 1898.

Sworn to and subscribed before me, this, the

10th day of Jan 1899.

Ordinary.

D. R. Adams
mark
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 10th day of Jan 1899.

ALL
your
oath
here.

Ordinary J. M. Stone 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 B, of 48th Regt. Va. Vols Legion Ha. 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.

Ordinary.

D. R. Adams
mark

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 10th day of January 1900.

ALL
your
oath
here.

Ordinary J. M. Stone Cobb County.

NOTE.—The blank spaces must be filled.

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

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1890.

Notify

Ordinary Colt County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1890.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Colt County.

I, D. R. Adams hereby authorize John W. Lindsey
of Monetta

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

at Monetta

by hand

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

D. R. Adams [L. S.]

Executed in presence of

Joe M. Tamm

Adams, D. R.
Colt Co.

(For These Words Enrolled.)

No. 194

INDIGENT

SOLDIER'S PENSION.

1901.

Name D. R. Adams
County Colt

WARRANT ISSUED

Jan 15 1901.

JOHN W. LINDSEY,

Commissioner of Prisons.

WARRANT HANDED TO

Lindsey

JOHN W. LINDSEY, Commissioner of Prisons, Atlanta.

Notify

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, *D. R. Adams* hereby authorize *John W. Lindsey*
of *Monetta*

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

at *Monetta*
by *hand*

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

D. R. Adams [L. S.]

Executed in presence of

John M. Gann

Adams, D. R.
Cobb Co.

GOOD AND TRUE
(For Those Already Enrolled.)

No. *124*

INDIGENT

SOLDIER'S PENSION.

1901.

Name *D. R. Adams*
County *Cobb*

WARRANT ISSUED

Jan 15 1901.

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT HANDLED TO

Adams

CO. W. B. BARNES, State Printer, Atlanta.

No debt

STATE OF GEORGIA

NOT APPLICANTS HEREFORE ALLOWED PENSIONS.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Colb

County,

Personally appears *D. R. Adams* of *Colb*
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* 18*93*; that he is *67* years old and
by occupation a *farmer* that he enlisted in the military service of the Con-
federate States (or of the State of _____) during the war between the
States and served for the term of *3 years* in Company *C*, of *Phillips*
of *Regiment* *Colb*; that his physical condition is as
follows: *On account of Age Infirmary 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 *Colb*
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 A. Awtrey

Ordinary.

STATE OF GEORGIA,

Colb

County.

I, *John A. Awtrey* 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 *14th*

day of *January* 1901.

John A. Awtrey
Colb 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 1896

I Eury Algood Ordinary
in and for said County
of Paulding hereby certify that
J. R. Adams. draw a pension
under act 1891 as an indigent
Confederate Soldier
Given under my hand
and seal of office
Eury Algood
Ordinary

Ordinary

Jos M Stone

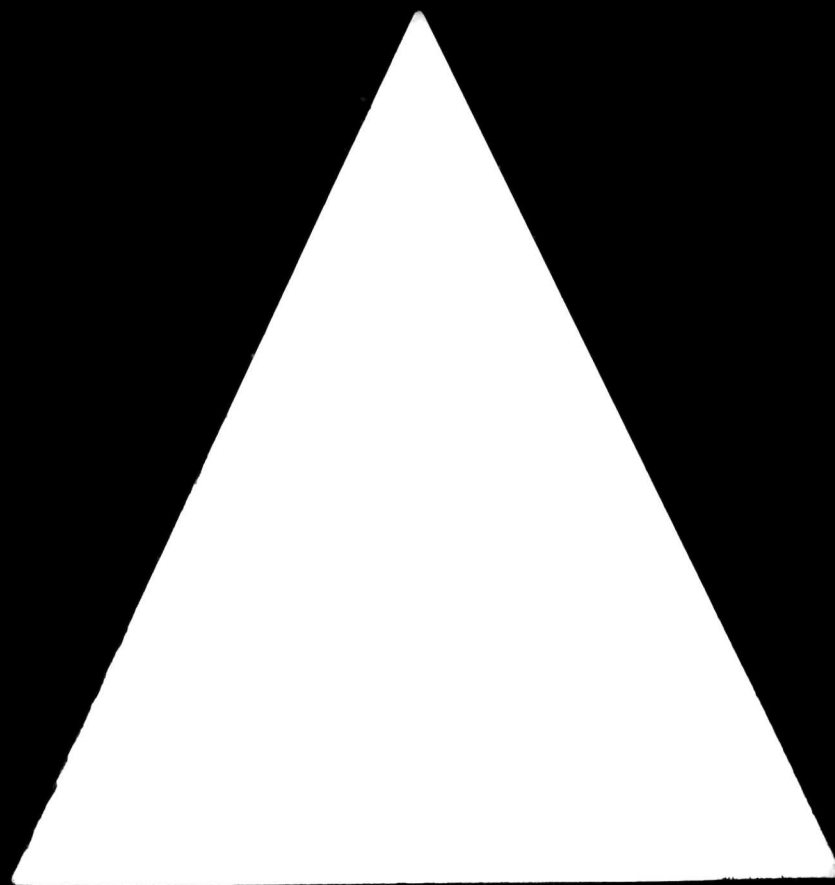
Dear Sir

This old pensioner
and his papers are O.K.

Dallas Ga

Dec 5 1896

W R Combs



Pension Office, Sept. 13, 1917.
Must amend and state: "Was battalion 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
See page 13 over for
Original - 15 a 1 - 1001
OK for 9/15/18

**Confederate
Soldier's Application.**

71. UNDER ACT 1910.

County *Calhoun*
Name *R. A. Adams*
Company *B*
Regiment *1st Battalion Infantry*
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

CHAR. P. BYRD, State Printer, Atlanta.

1-19-17
3/8-1918

Pension Office, Sept. 13, 1917.
Must amend and state: "Was battalion cavalry or infantry; was it of Confederate Army or State troops or militia? Summarize 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.
N. UNDER ACT 1910.

County Cobb
Name R. V. Adams
Company 73
Regiment 8th Regt. Ala. Inf.
Approved _____
J. W. LINDSEY,
Commissioner of Pensions.
CHAS. F. BYRD, State Printer, Atlanta.

1-19-17

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

Cobb County.

R. V. 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) Residence to be 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 Organized Militia of this State from 1861 to 1865? Yes
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) Sept 1864 Co D B Dyala Battalion
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? War 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
day of April 1917
J. M. Gandy 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 field church Gwinnet County with company B Dyers Batt.
5. How did you obtain your information of this Service? "as 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 surrender 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? Surrender Apr. 1865 Where was his Command when he left it? Surrender Athens for what cause did he leave? Surrender. 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. 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 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,

Cobb County.

I, J. M. Gamm 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 \$75.00 for 1915 \$22.00

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

J. M. Gamm Ordinary, 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.

Georgia Gwinnett Co. nly of said County, do hereby certify that J.N. Tullis is a freeholder of said County and we all know the facts to be true.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Clutch County.

Personally appears L. A. Simons of Clutch County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 1st day of July, 1899; that he is 59 years old and by occupation a Lawyer; 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 Bullington Cavalry; that his physical condition is as follows: Liver Complaint - Neuralgia - Catarrh - Kidney & urinary derangement - this year I had two bronchitis & suffer 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 Clutch 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. Simons Ordinary.

State of Georgia,
Clutch County.

I, George Corns Ordinary of said County, do certify that I am well acquainted with L. A. Simons the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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.



George Corns Ordinary Clutch 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,

Clutch County.

Personally appears L. A. Simons 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, 1899; that he is 60 years old and by occupation a Lawyer; 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 Bullington Cavalry; that his physical condition is as follows: Liver Complaint - Catarrh - Neuralgia - Kidney & urinary derangement - 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 Clutch county been allowed a pension for the year 1897-8-9.

Sworn to and subscribed before me, this, the 3rd day of January, 1900. L. A. Simons Ordinary.

State of Georgia,
Clutch County.

I, George Corns Ordinary of said County, do certify that I am well acquainted with L. A. Simons the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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.



George Corns Ordinary Clutch County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clutch County.

I, L. A. Simmans hereby authorize William A. Wright of Atlanta to receive and receipt for the pension allowed and request that he remit same to Ordinary at Womerville Clutch Co. Ga. by mail

Witness my hand and seal, this 1st day of January 1901.
L. A. Simmans [L. S.]

Executed in presence of

George Bonduca
Ordinary

(For Those Already Enrolled.)

No. 113

INDIGENT

SOLDIER'S PENSION.

1901.

Name L. A. Simmans
County Clutch

Georgia

WARRANT ISSUED

Jan 14 1901.

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

Wright

JOHN W. HARRISON, State Printer, Atlanta.

12/10/01

Simmans, L. A.
Clutch County

CODE SECTION 124.

(FOR THOSE ALREADY ENROLLED.)

No. 5133

INDIGENT

SOLDIER'S PENSION

1902.

Name L. A. Simmans
County Clutch

Co. A Regiment 24

Bohm

WARRANT ISSUED

24 1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Dr

JOHN W. HARRISON, State Printer, Atlanta.

No entry

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clutch County.

I, L. A. Simmans hereby authorize Wm. A. Wright of Atlanta Ga. to receive and receipt for the pension allowed and request that he remit same to The Ordinary at Womerville Clutch Co. Ga. by mail

Witness my hand and seal, this 1st day of January 1902.
L. A. Simmans [L. S.]

Executed in presence of

W. H. Howell
Ordinary

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Clutch County }

Personally appears L. A. Scrimans of Clutch County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever since the 1st day of July 1889; that he is 62 years old and by occupation a Lawyer 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 Battalion of Cavalry; that his physical condition is as follows: I have 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 Clutch county been allowed a pension for the year 1900 - plague

Sworn to and subscribed before me, this the 1st day of January 1901, L. A. Scrimans Ordinary.

STATE OF GEORGIA,

Clutch County. }

I, George Bonnell Ordinary of said County, do certify that I am well acquainted with L. A. Scrimans the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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.



Ordinary George Bonnell 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,

Clutch County. }

Personally appears L. A. Scrimans of Clutch County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever since the 1st day of July 1889; that he is 62 years old and by occupation a Lawyer 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; that his physical condition is as follows: I have kidney Complaint, Catarrh, gonorrhea, & 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 Clutch county been allowed a pension for the year 1901 - plague

Sworn to and subscribed before me, this the 1st day of January 1902, L. A. Scrimans Ordinary.

STATE OF GEORGIA,

Clutch County. }

I, W. Z. Howell Ordinary of said County, do certify that I am well acquainted with L. A. Scrimans the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1902.



Ordinary W. Z. Howell County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clint County.

I, L. A. Simmons hereby authorize Wm. A. Wright, Capt. of Militia to receive and receipt for the pension allowed and request that he remit same to W. F. Howell at Homerville Ga by mail

Witness my hand and seal, this 1 day of January 1903.
L. A. Simmons [L. S.]

Executed in presence of

W. F. Howell

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clint County.

I, L. A. Simmons hereby authorize Wm. A. Wright, Capt. of Militia 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 4 day of January 1904.

L. A. Simmons [L. S.]

Executed in the presence of

W. F. Howell

Please fill all blanks in with name of Simmons & W. F.
(FOR THOSE ALREADY ENROLLED)
Clint County

No. 5657

INDIGENT

**SOLDIER'S PENSION
1903.**

Name L. A. Simmons

County Clint

Co 20th Regt 4th Army

WARRANT ISSUED

Feb 1903

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

W
Gen. Harrison State Printer, Atlanta.

no data

Simmons, L. A.
Clint County

(FOR THOSE ALREADY ENROLLED)
Given January 1904

No. 2761

INDIGENT

**SOLDIER'S PENSION
1904.**

Name L. A. Simmons

County Clint

Co. Regiment

WARRANT ISSUED

Feb 24 1904

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Clint
Gen. 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, 1897; 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 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.

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 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. J. 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 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, 1897; 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 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 1902 & before

Sworn to and subscribed before me, this the 1st day of January, 1904.

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 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. J. 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, L. A. Sirmans 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 Homer ville Ga
by mail

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

L. A. Sirmans [L. S.]

Executed in the presence of

J. T. Dame

CODE SECTION 1234.
(FOR THOSE ALREADY ENROLLED.)

No. 424

INDIGENT

**SOLDIER'S PENSION
1905.**

Name L. A. Sirmans
County Clinch
Co. _____
Regiment _____

WARRANT ISSUED

MAR 1 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

no data

STATE OF GEORGIA,

Clinch COUNTY.

I, L. A. Sirmans 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 Homer ville Ga
by mail

WITNESS my hand and seal, this _____ day of _____ 1905.

L. A. Sirmans [L. S.]

Executed in the presence of

J. T. Dame

CODE SECTION 1234.
(FOR THOSE ALREADY ENROLLED.)

No. 1637

INDIGENT

**SOLDIER'S PENSION
1906.**

Name L. A. Sirmans
County Clinch
Co. A Regiment 20th
In _____

WARRANT ISSUED

JAN 28 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

W. A. W.
The Pensioner and Pensions Co., Geo. W. Harrison, Mgr.

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 1 day of July 1839; that he is 66 years old and by occupation a none, 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 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, 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.

Sworn to and subscribed before me, this the 1 day of Jan 1905. L. A. Simmons
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 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 February 1905.

W. L. Howell
Ordinary, Clinch County.



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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Clinch County.

Personally appears 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 1839; that he is 66 years old and by occupation none, 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 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 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 24 day of Jan 1905. L. A. Simmons
W. L. Howell Ordinary.

State of Georgia,
Clinch County.

I, J. T. Dams 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 24 day of Jan 1905.

J. T. Dams
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, J. G. 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. Dams ordinary at Homer ville Ga
by mail

WITNESS my hand and seal, this 1st day of Jan 1907.
J. G. Simmons [L. S.]

Executed in presence of

J. T. Dams

Simmons, J. G.,
Clinch Co.,

Once Enrolled 1904.
(FOR THOSE ALREADY ENROLLED)

No. 4658

INDIGENT
SOLDIER'S PENSION
1907.

Name J. G. Simmons
County Clinch
Co. Co. C Regiment 20th Ga.

WARRANT ISSUED

1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Once W. Enrolled, Once Payers, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Chick County.

Personally appears L. A. Simons of Chick County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 1st day of July 1867; 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 Infantry; that his physical condition is as follows: Infirmary and Pauper.

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, 1864, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of Chick County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 1st day of Jan 1907. } L. A. Simons
J. T. Dams Ordinary.

State of Georgia,

Chick County.

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

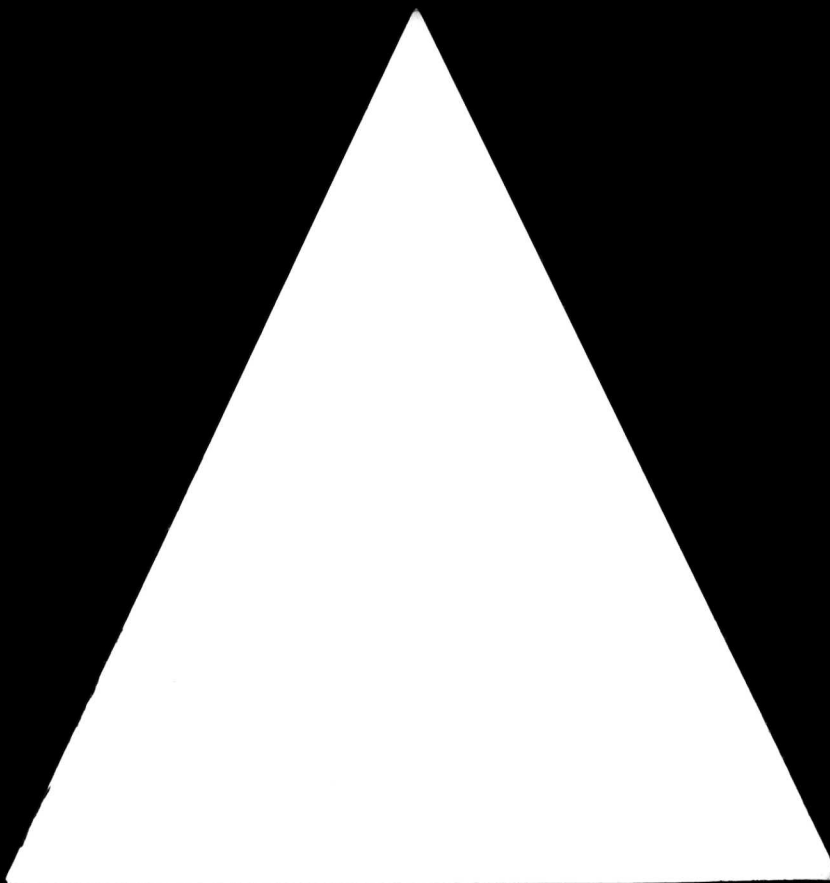
Given under my official signature and seal this 1st day of Jan 1907.

J. T. Dams
Ordinary Chick County.



From - The Clerk signed must be filed.
Note - Affidavit should not be attached before January 1st, 1907.

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



POWER OF ATTORNEY.

STATE OF GEORGIA,

Clatsop

COUNTY.

I, *Mary J. Simons*

of *Atlanta* hereby authorize

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

Ordinary at *Atlanta* by *mail*

Witness my hand and seal, this *30* day of *April* 190*4*

Mary J. Simons [Seal.]

Executed in presence of

L. A. Simons

Simons, Mary J.
Clatsop County

ACT DEC. 16, 1901.

a

No. *1911*

WIDOW'S PENSION,

✓ 190*0*

Mrs. *Mary J. Simons*

County of *Clatsop*

Widow of *L. A. Simons*

Warrant issued _____ 190_____

and handed to

E. J. Lindsey
W. LINDSEY,
Commissioner of Pensions.

CHAS. P. BYRD, STATE PRINTER, ATLANTA.

11/24/00

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clines COUNTY.

I, *Mary J. Simmons* hereby authorize

W. G. Wright of *Atlanta*

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

Ordinary at *Homer* by *mail*

Witness my hand and seal, this *20* day of *Sept* 190*0*

Mary J. Simmons [SEAL.]

Executed in presence of

J. T. Adams

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

COUNTY OF *Clines*

Personally came Mrs. *M. J. Simmons*

who says on oath she is the

widow of *L. A. Simmons* to whom, in the County of

Thomas State of *Georgia*, she was married on the

7th day of *March* 18*61*, that she remained his wife up to the *22nd*

day of *April* 190*0*, at which time he died, and that she has not since married.

At the time of his death he was a resident of *Clines* 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* *2nd* *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 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 belong to my invalid son -

Deponent further says that she is now a resident of *Clines* County, and has con-

tinuously resided in the State of Georgia since the *7th* day of *March* 18*61* -

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* 190*0* -

Mary J. Simmons

Ordinary of *Clines* County.

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

WIDOW'S PENSION,

ACT DEC. 16, 1901.

No. *1911*

1900

Mrs. *Mary J. Simmons*

County of *Clines*

Widow of *L. A. Simmons*

Warrant issued *1900*

and handed to

J. W. LINDSEY,

Commissioner of Pensions.

11/15/00

Executed in presence of

J. T. Dume

Mary J. Sermons [SEAL.]

Sermons, Mary J.
Clinch, County

ACT DEC. 16, 1901.
A. R. Dickerson
No. *1911*

WIDOW'S PENSION,
1900

Mrs. *Mary J. Sermons*
County of *Clinch*
Widow of *J. A. Sermons*

Warrant issued _____ 190
and handed to _____

W. LINDSEY,
Commissioner of Pensions.
11/16/01

day of *April* 1900, 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* *Volunteers of State* *20th 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 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 belongs 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* 19*01*-
Mary J. Sermons
J. T. Dume Ordinary of *Clinch* County.

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

AFFIDAVIT FOR THREE WITNESSES.

STATE OF GEORGIA, } Personally came *A. W. Smith*
COUNTY OF *Clinch* } *J. R. Dickerson* and
10-11-01

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

STATE OF GEORGIA, } I, *J. T. Dume* Ordinary,
COUNTY OF *Clinch* } in and for said County of *Clinch*
10-11-01

AFFIDAVIT FOR THREE WITNESSES.

STATE OF GEORGIA, } Personally came A. N. Smith
COUNTY OF Clinal } J. R. Dickerson and
W. 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 J. R. Simmons
who died in Clinal County and State of Georgia on the
22nd day of April 1880, 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 7th day of March 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?

How was she supported in 1900 and 1901?

I have no personal interest in
the pension asked for

Sworn to and subscribed before me, this 29 day of September 1900

Ordinary Clinal County, Georgia

PHYSICIAN'S AFFIDAVIT.

STATE OF GEORGIA, } Personally came before me
COUNTY OF Clinal } A. H. Culpepper
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 softening and flabby muscles she
has not the physical strength to work
for a living

Sworn to and subscribed before me, this 29 day of September 1900

Ordinary of Clinal County.

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

STATE OF GEORGIA, } I, J. T. Dams Ordinary,
COUNTY OF Clinal } in and for said County of Clinal,
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 W. H. Smith 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 1900

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 Clatsop 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

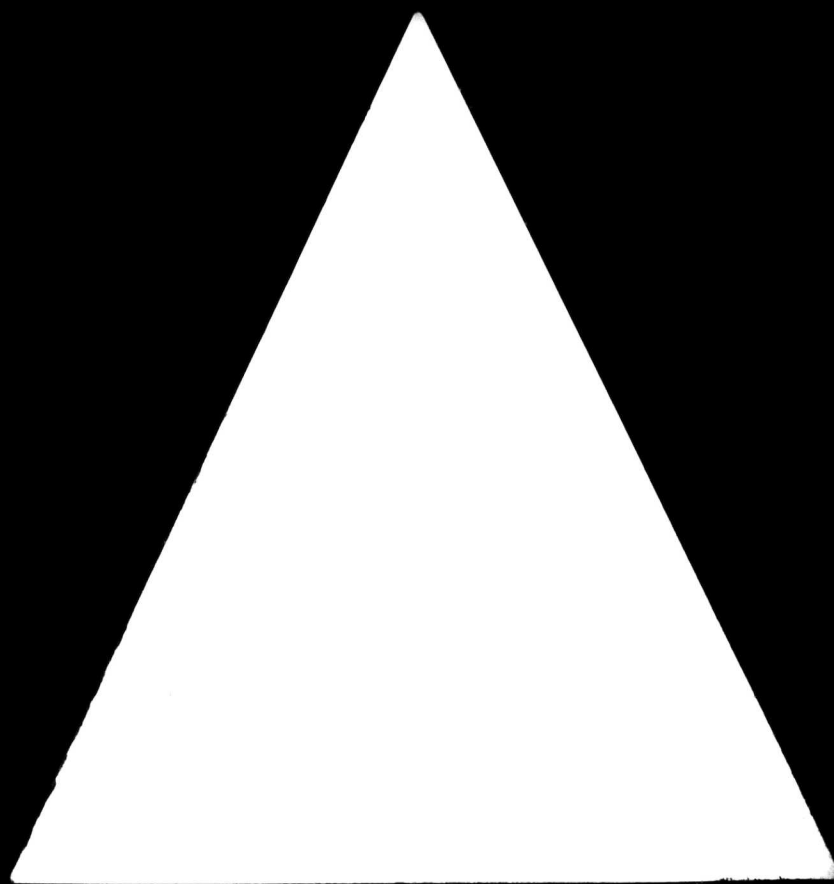
This is certify that I was present as bridesmaid and a legal witness to the marriage of L. A. Simmons and Mary J. Griffin at her father's residence on March 7th 1861 both contracting parties have been residents of the State of Georgia until his decease Apr 22/1910 of which she is still a resident and a widow. Rev Luckey officiated at said marriage

Mrs B J Alexander L.S.

1

Personally appeared before the above named witness which are true and responsible of which I am personally acquainted, and attest to, this 14th June 1910

J. M. Jones
Ordinary.



Ordinary's Certificate

STATE OF GEORGIA,

Clusick

COUNTY }

I, *William Lawrence* Ordinary of said County, certify that I know

the applicant *Smith* for pension is the person he represents himself to be and resides in said county. That I also know *Dr. 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.

Given under my hand and official seal of office this *11th* day of *Sept* 191*8*

William Lawrence Ordinary
of *Clusick* County }

(SEAL)

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and witnesses to the following words: "I am the Ordinary of the County of _____ and I will true and faithfully answer the questions asked me and the witnesses sworn to by me and I will true and faithfully answer the questions asked me and the witnesses sworn to by me."

2. Additional affidavits may be obtained if these 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 said Ordinary.

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County *Colindale*
Name *Carson Smith*
Company *K. (C.H.)*
Regiment *26th La. Inf.*
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

7/12-1919

No Record on Colindale

Smith
Clusick

Co Roll
Oct. 1920

Ordinary's Certificate

STATE OF GEORGIA,

Clint COUNTY.

I, W. L. Thompson Ordinary of said County, certify that I know the applicant J. D. Childers 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. L. Thompson Ordinary
of Clint County.

(SEAL)

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

Application for Soldier's Pension Under Act 1910

Amended by Act 1919

Questions For Applicants to Answer

STATE OF GEORGIA,

Clint 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, Staekton Ga. Route #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 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 at Simons Island Ga. "K" Co. 2d 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 Fort Sumter and was wounded at Spotylvania Va. May 12th 1864 and was never allowed to return
 - a. Where was your command when you left it? at Spotylvania 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? Commander
 - e. For how long was your leave granted? In what way? Was placed on retired list ordered to report to dir to be examined Reported Sec'y of War at Savannah Ga
 - f. Why did you not return to your command after leave expired? Physical disability not mended
 - g. In what way were you prevented? Wounded
 - h. What effort did you make to return? Reported to Physician at Savannah 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? Sept 28th 1864 at Middleburg Va. sent 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

W. L. Thompson Ordinary

of Clint County.

(SEAL)

Confederate Soldier's Application Under Act 1910—As Amended by Act of 1919.

County Clint
Name Benjamin Smith
Company K (C.A.H.)
Regiment 2d Ga. Infy.
Approved [Signature]

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

9/12-1919

No Record on Clerk's Office
Clint Co. 1920
No Ball
Sept 1920

Questions for Witness as to Service

STATE OF GEORGIA,

Clutch COUNTY.

D. C. Carmichael of said State and County is hereby presented as a witness in support of the application of Raymond 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
Macon, Hard County, Georgia
2. How long and since when have you known Raymond Smith the applicant?
Since before and ever since the Civil War in this State
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? Steaton, Ga. Smith, Pa. where he has resided
knowingly all his life
4. When, where and in what Company and Regiment did Raymond Smith enlist during war from 1861 to 1865? (Give date and place.) Fall of 1861 at Steaton, Ga. Co. G. 46th Reg
5. How did you obtain your information of this Service? Springing in Smith's mouth
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 16, 1864 at Spottsylvania, Va.
7. When and where was his command surrendered or discharged (give date and place) Apr. 9, 1865 at Appomattox, 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 18, 1864 Where was his command when he left it? Spottsylvania, Va. For what cause did he leave? Wounded
By whose authority did he leave? Commissary and how long was he granted leave? about three weeks How do you know all that you have stated to be true? If of your own knowledge, tell clearly and specifically as serving in 3rd Mass. Infantry, with him
13. In what way was he prevented from returning to his command? supposed to be on next wound How do you know? from supposition
14. What effort did he make to return to his command and how do you know? no known
15. Was applicant captured as a prisoner? Yes If so, when and where? Aug 28, 1862 at Middleburg, 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.
M. L. Mangrum Ordinary
of Clutch County.
(SEAL)

D. C. Carmichael

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
(At Savannah, Ga., and was sent
CAPTURED, WHEN AND WHERE? (back home.
Captured Aug. 28, 1862 at Middleburg, Virginia but escaped before be-
ing imprisoned.

RELEASED: Escaped before being imprisoned.

WHEN AND WHERE SURRENDERED? Command surrendered at Appomattox,
Virginia, April 9th, 1865.

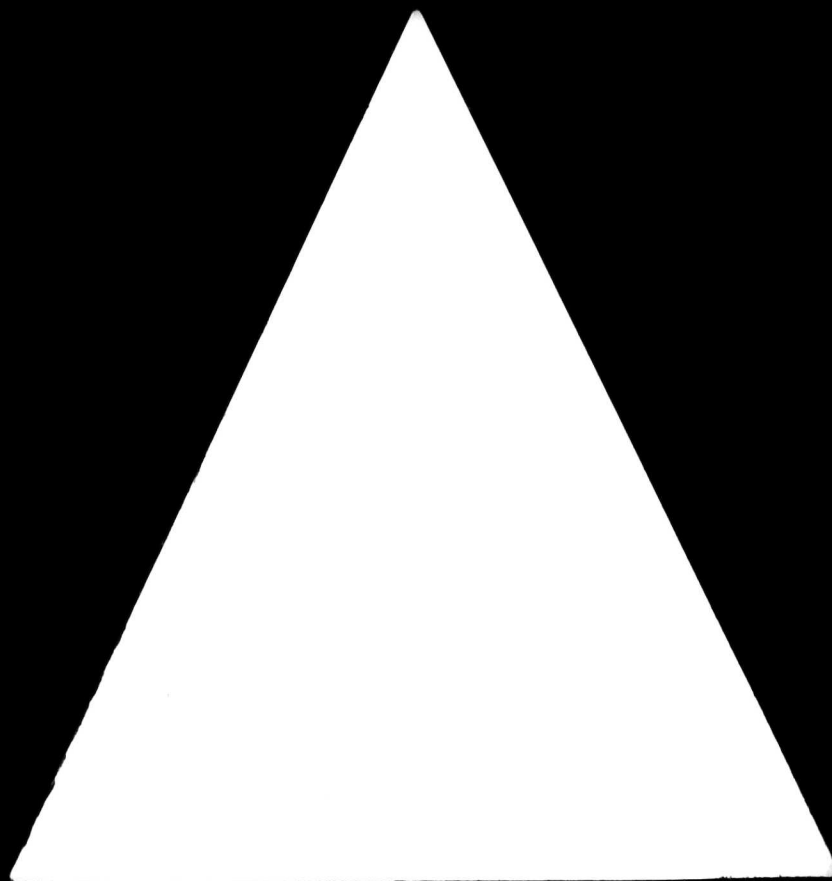
IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? At home. After being
wounded was sent home and was never able to return to service again.

DIED, WHEN AND WHERE?

BURIED:

WITNESSES: D. C. Carmichael - same company - - -No data.

SB.



Pension office
11/21-1911-

To be examined
Army from pension
cut off to not
Confederate
for examination for
any pensionable service
to the effect of the
war. This is
required before
any pension can be
granted.

Confederate

Soldier's Application.

UNDER ACT 1910.

County Chick
Name John J. Smith
Company 1st Co. 5th Regt.
Regiment Penn.

Approved _____

J. W. Lafferty

Commissioner of Pensions

THOMAS P. BYRNE, SOLD PENSION AGENT

4240 47-1911

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

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, Hornswell Church, Col. Georgia
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?
Yes. Co. H. 5th Ga. Heavy Arty.
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service.)
At Savannah, Ga. Co. H. 5th Ga. Heavy Arty. 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. What and where was your Company and Regiment surrendered or discharged from the Service?
at Hornswell North Carolina.
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
at Hornswell North Carolina.
- 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? leave.
- d. By whose authority did you leave? by order of 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? leave out of my hands.
- g. In what way were you prevented? put off by my Captain.
- h. What effort did you make to return? no effort 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?
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.)
nothing owned.
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?
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 wife and its cash value? (Make itemized list).
nothing.
12. What annual or monthly income or savings of yourself and wife and the source derived have you?
nothing.
13. Are you drawing a pension of any amount from the 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

21 day of August 1911

J. H. Smith Ordinary,

of Clay County.

Soldier's Application
UNDER ACT 1910.

Confederate

County Clay
Name John J. Smith
Company Co. H. 5th Ga. Heavy Arty.
Regiment Heavy Artillery

Approved

J. W. LINDSEY,
Commissioner of Pensions.

CHAS. E. BYRN, State Printer, Atlanta.

9/15/11 4/3-1911

STATE OF GEORGIA

 _____ County

1. What is your name and where do you reside? John J. Chavira

1. What is your name where do you reside?
 2. How long and since when have you known..... the applicant?
 3. Where does he now reside, and how long has he been a bona fide permanent resident in this State and how do you know?
 4. When, where and in what Company and Regiment did..... enlist during war from 1861 to 1865? (Give date and place).
 5. How did you obtain your information of this Service?

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) *between Nov. 1964 & Jan. 1965*
7. When and where was his Command surrendered or discharged (give date and place) *at Danville, NC, in 1965*
8. Were you personally present at the Surrender? *No*
9. If not, where were you and how came you there? *at Columbia, SC 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 in B. K.*

12. When did he leave his Command? 22 Feb 1964 Where was his Command when he left it? 1st Cavalry Div for what cause did he leave? Dis
By whose authority did he leave? 1st Cavalry Div and how long was he granted leave? 30 days How do you know?

13. In what way was he prevented from returning to his Command? *He was not allowed to.*
How do you know? *He was given the order not to return.*
14. What effort did he make to return to his Command and how do you know? *There was no way to return.*
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 21 day of Sept, 1912.
 _____ Ordinary
 of Lawrence County.

AFFIDAVIT OF TWO FREEHOLDERS

STATE OF GEORGIA

Chief County

Personally before me came E. B. Hays & S. C. Hays who on oath says that they are free holders residing in said County and we know James H. Hays is the applicant for pendon and we know the property that is now in the possession and control of himself and wife and of its cash value to wit: the lot for home and value

and wife and of its cash value to wit: (Make List by items and values.)
\$500. Money \$200. 1st & 2nd hand gold watch
\$200. 1st & 2nd hand gold watch \$100. 1st & 2nd hand gold watch

ORDINARY'S CERTIFICATE

STATE OF GEORGIA

_____ County

1. John J. O'Connell of said County, certify that I know the applicant, John J. O'Connell, for Pension in this person he represents himself to be and resides in said County. That I also know John J. O'Connell the witness swearing to the facts and true holders, that they are all married and were all sworn by on Oath as to the foregoing and that they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Receipt of John J. O'Connell shows that John J. O'Connell and wife value for 1906 for 1909 for 1910

Sworn under my hand and official seal of office this 22 day of October 1912
J. T. Adams Ordinary of Cheney County

NOTE 1: Before any questions are answered the Ordinary shall swear on oath that all witnesses in the following records "I do solemnly swear that you will tell the answers made to each question asked you and the witnesses you shall see shall be the whole truth as help you God."

1. Additional affidavits may be attached if blank spaces are insufficient.
2. All affidavits must be made before the Ordinary and certified by him.
3. Affidavits have no property at all in his possession, use or control of said and will, affidavits of Free holders

Statement Rendered
General Expense
to J. J. Smith

Received payment
April 9, 1937.
T. C. McLean

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, 1932, 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 Twenty Dollars in 1932 (\$20.00) 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 4th day of May, 1932

(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
Monterville, 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 OF GEORGIA, County of Clinch.

IN RE: Expenses last illness and funeral ~~Kate C. Pafford~~.

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 pensé oner:

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

Kennesaw, Ga.

August 7th. 1933.

Hon. A.I. 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.

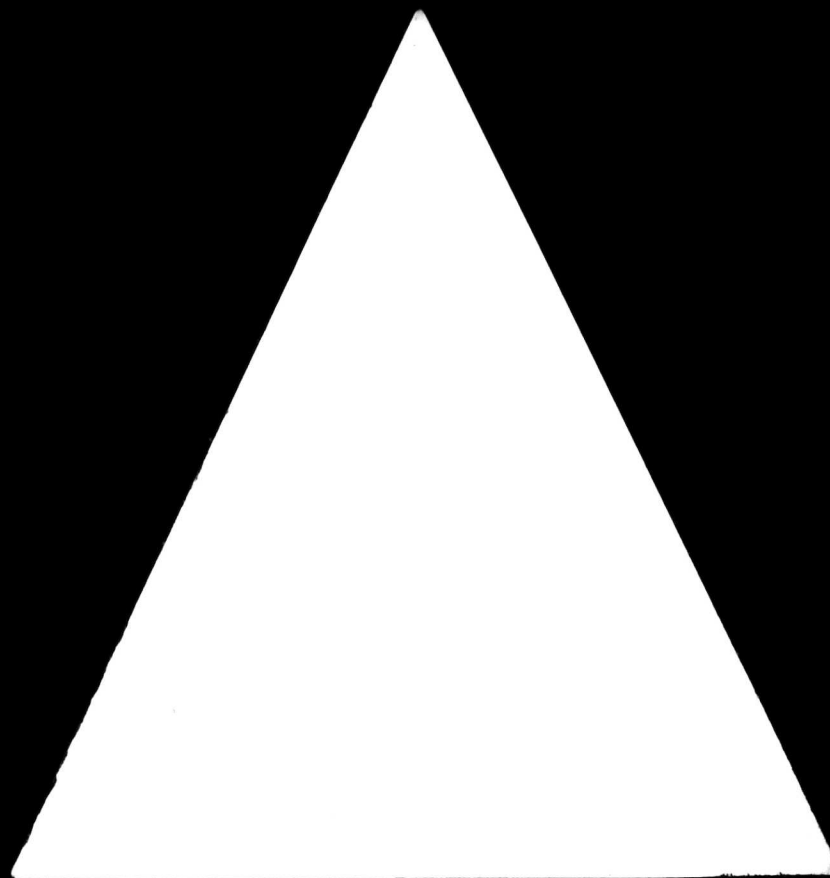
Yours very truly,

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 8th. day of March, 1933.

Calvin B. Smith



POWER OF ATTORNEY,
STATE OF GEORGIA,
County, }

I, _____, being of sound mind and memory, do hereby authorize _____ of _____ County, Georgia, to receive and receipt for any pension allowed and that he remit the same to me at _____ day of _____ 190____ by his check or registered mail.

Witness my hand this _____ day of _____ 190____

Executed in presence of _____

_____,
County, _____

I. S.

22 Jan 1905
Smith, Messiah
No. *OK for 1905*
**WIDOW'S
INDIGENT PENSION.
1903.**

Name Russiah Smith
County Clinch
Widow of Abram E. Smith
Approved _____ 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
601457 1903.
Geo. W. Harrison, State Printer, Atlanta.

7/5/04

QUESTIONS FOR WITNESSES.

STATE OF GEORGIA,

War County.

James Cox of said State and County, having been presented as a witness in support of the Application of Mrs. Ressie 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. Ressie 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 Abner E. Smith 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. Inf. left Ft. Mitchell. I was then

11. Were you a member of the same Company and Regiment? Yes

12. How long did he perform regular military duty? about 2 yrs & 5 months

13. When and where was his Company and Regiment surrendered and discharged from service?

Surrendered, Apr. 9, 1865, at Sherman, Ga.

14. Were you with the Command when it surrendered? Yes

15. Was Abner 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 Sherman, Ga. April 9, 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 Abner 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 Abner 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 22, 1904.
Warren Lott, Ordinary, Ware Co. Ga.

26. Is applicant able to earn a support at date of application, 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 interests have you in the recovery of this pension by the applicant?

Sworn to and subscribed before me this 22

day of April, 1904

Warren Lott Ordinary,

Ware County,

James Cox Witness.

AFFIDAVITS OF PHYSICIANS.

STATE OF GEORGIA,

Clinch County.

Personally before me comes J. E. Pennington and

A. H. Culp, both known to me to be reputable

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

Ressie Smith applicant for a Pension under Act of 1900, and after

such personal examination say that her physical condition is this she suffers

with a series of the attacks

and general debility, the patient is

old age and is absolutely unable to

conduct anything from personal care

and we have no interest in said pension if allowed.

Sworn to and subscribed before me this 1

day of July, 1904

W. L. Howell Ordinary,

Clinch County,

A. H. Culp M.D.

J. E. Pennington M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Clinch County.

I, W. L. Howell Ordinary, in and for said County, hereby certify

that the applicant, Mrs. Ressie Smith resides in said County,

and has been a bona fide resident of this State since the day of Jan

1862, and that the witnesses, Mr. James Cox and A. H. Culp

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. L. Howell 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 if all give will be the whole truth: So help you God."

2. Additional affidavits may be attached, if blank spaces are furnished.

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 30th 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,

War

County.

K. B. Smith

of said State and County, having

been presented as a witness in support of the Application of Mrs. Kessiah 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, Blumch

County, Ga

2. Are you acquainted with the applicant, Mrs. Kessiah Smith

If so, how long have you known her? 40 years

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 Blumch County, Ga

19. Where did he reside at his death and how long had he been a resident of Georgia at his death?

He resided in Blumch 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 support at labor of any sort, if not, what 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 one hip & has never struck 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,

County,

K. B. Smith

Witnesses.

AFFIDAVITS OF PHYSICIANS.

STATE OF GEORGIA,

County.

Personally before me comes _____ and

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,

War

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 affidavit 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,

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 26th April, 1865, not entitled.
5. _____ Witnesses and two Physicians are necessary to make out claim.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clusick COUNTY.

I, Reginald 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
himself at Hawesville Ga

In Witness Whereof, I have hereunto set my hand and seal, this 3rd
day of Dec, 1905.

Reginald Smith [L. S.]

Executed in presence of

J. T. Dame

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clusick COUNTY.

I, Reginald 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 Hawesville Ga

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

Reginald Smith [L. S.]

Executed in presence of

J. T. Dame

Smith, Reginald
Clusick County
To Those Heretofore Paid.

1905.

No. 1787

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO
Mrs. Reginald Smith
OF
Clusick County,

Widow of

Co. _____ Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
MAR 1 1905.

AND HANDED TO

7

The Pension Office and Pensions Co. Atlanta,
Geo. W. Lindsey, President, and David P. Smith.

Smith, Reginald
Clusick County
To Those Heretofore Paid.

3- 1907. 186

No. 1304

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1907.

PAID TO

Mrs. Reginald Smith

OF

Clusick County,

Widow of Reginald Smith

Co. L & 4th Cavalry Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1907.

AND HANDED TO

Dr

Geo. W. Lindsey, Vice President, Atlanta.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Clutch

PERSONALLY COMES Mrs.

Eugene Smith

who, being sworn says on oath, that she is a bona fide resident of said County of Clutch State of Georgia, and that she has resided in said State continuously ever since 1830.

That she is the Widow of C. F. Smith who was a soldier in Company N of the 4th Cavalry Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of Jan 1863 and served in the Army up to March 1865. That he died on the 18 day of March 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 1830.

I have been allowed an Indigent pension as a resident of Clutch County, under Act 1909, for the year 1904, and now apply for the pension provided by law for the year ending December 31, 1905.

Sworn to and subscribed before me, this 1 day of Jan 1905.

Post Office

Hamsville Ga

State of Georgia,

Clutch County.I, J. T. Dame

Ordinary of said County, certify that I am well acquainted with Mrs. Eugene 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 1830.

Given under my official signature and seal, this the 1 day of Jan 1905.

{ Official
Seal }

Ordinary of

Clutch County.

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1903.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Clutch

PERSONALLY COMES Mrs.

Marshall Smith

who, being sworn says on oath, that she is a bona fide resident of said County of Clutch 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 1863, and served in the Army up to March 1865. That he died on the 4 day of Jan 1892.

He died with all an O'right's down.

Age Infirmary & Family.

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 1830.

I have been allowed an Indigent pension as a resident of Clutch 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.

Ordinary.

Post Office

Hamsville Ga

State of Georgia,

Clutch County.I, J. T. Dame

Ordinary of said County, certify that I am well acquainted with Mrs. Marshall 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 1830.

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

{ Official
Seal }

Ordinary of

Clutch County.

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

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

PERSONALLY COMES MRS.

County of Clutch

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

Clutch State of Georgia, and that she has RESIDED in said State continuously ever since 1830That she is the Widow of C. F. Smith who was a soldier in Company N of the 1st Georgia Cavalry Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of Jan1862, and served in the Army up to March 1863. That he died on the 1st day of Jan 1863at age 21 by the diseaseDeponent 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 1840I have been allowed an Indigent pension as a resident of Clutch County, under Act 1900, for the year 1904, and now apply for the pension provided by law for the year ending December 31, 1905 as a new pensionerSworn to and subscribed before me, this 2nd day of Jan 1905. J. T. Dame, Ordinary.Post-Office Hamsville Ga

State of Georgia,

I, J. T. DameClutch County, Ordinary of said County, certify that I am wellacquainted with Mrs. Maggie 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 1830Given under my official signature and seal, this the 2nd day of July 1905.

Official Seal.

Ordinary of Clutch County.NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1905.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

PERSONALLY COMES MRS.

County of Clutch

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

Clutch State of Georgia, and that she has RESIDED in said State continuously ever since 1830That she is the Widow of A. B. Smith who was a soldier in Company I of the 4th Cavalry Regiment of GeorgiaVolunteers, that he enlisted in said regiment on or about the month of Jan 1863, and served in the Army up to March 1864. That he died on the 4th day of Jan 1863he died with cholera & dysenteryAge 21 by the diseaseDeponent 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 1840I have been allowed an Indigent pension as a resident of Clutch 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.Post-Office Hamsville Ga

State of Georgia,

I, J. T. DameClutch County, Ordinary of said County, certify that I am wellacquainted with Mrs. Maggie 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 theday of 1830Given under my official signature and seal, this the 1 day of Jan 1907.

Official Seal.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clint COUNTY.

I, Fizzie Smith, hereby authorize

W.A. Whisak of Fulton Co Ga

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

J.T. Dams Ordinary at Hamerwood Ga

In Witness Whereof, I have hereunto set my hand and seal, this 22nd

day of Jan 1906.

Fizzie Smith [L. S.]

Executed in presence of

J.T. Dams

Smith, Fizzie
Clint Co Ga
To those Herebefore Paid.

1906.

No. Feb

WIDOW'S PENSION

For year ending Dec. 31, 1906.

PAID TO

Mr. Fizzie Smith

OF

Clint County,

Widow of A.E. Smith

Co. I Regiment 4th army

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT ISSUED

Jan 26 1906,

W.A.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Clinch

PERSONALLY COMES Mrs.

Maggie 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

Cooley

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

Jan

1863

and served in the Army up to

March

1864

That he lost his

life on the

4th

day of

Jan

1864

(State here

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

He died

with old eye brought on 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 1841

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.

Post Office Homer ville Ga

State of Georgia,

County of Clinch

I, J. T. Dame

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

1830

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

Official Seal

CLINCH

Ordinary of

Clinch

County.

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

BOWEN & VILLOREN

STATE OF GEORGIA

Ordinary of Chick County.

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

POWER OF ATTORNEY

Pension office
7/5-1917
Applicant is the
owner of property
of great value
than before land
taken - cannot
afford this appl
Calvin

H. Lindsey
Commissioner

Smith, C. H.
Disapproval
7/5-1917
Calvin C.

No.

**Confederate
Soldier's Application.**

UNDER ACT ~~1862~~ 1917

County DeKalb

Name C. H. Smith

Company I. 4th Co. Reg.

Regiment

Approved

J. W. LINDSEY,
Commissioner of Pensions.

CHAS. P. BYRD, State Printer, Atlanta.

7/5-1917

1917
1918

Questions for Applicants to Answer.

STATE OF GEORGIA.

..... Clint County.
Walter H. Smith of said State and County, hereby applies
for the pension provided 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).
Clinton H. Smith Homerville, Ga.
2. How long and since when have you been a continuous resident citizen of this State?
All my life since 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. I was discharged at Savannah Ga. in April 1865
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service)
I enlisted in 4th Ga Cavalry Co. in Savannah Ga. in May 9 - June 12 - 1864 in the actual military service with said Company and Regiment
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 Nov 2 - 1864
6. When and where was your Company and Regiment surrendered or discharged from the Service?
Discharged at Savannah 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 Douglasville Ga.
9. Where was your Command when you left it?
I never left it till the surrender
10. When did you leave the Command?
April 1865
11. For what cause did you leave?
I was discharged
12. By whose authority did you leave?
High Officer
13. For how long was your leave granted? In what way?
I was with the army till the surrender had no leave
14. Why did you not return to your Command after leave expired?
15. In what way were you prevented?
none
16. What effort did you make to return?
never left
17. Were you captured during the war?
no
18. If so, when, and where? In what prison were you held and when were you released?
19. 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
furniture & other household goods \$50
unimproved property \$5*
20. What property of any kind have you disposed of and for what purpose since 4 Nov. 1908. To whom and for what price?
none
21. 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
22. What annual or monthly income or earnings of yourself and the source derived have you?
None
23. Are you drawing a pension of any amount from this State or the United States?
no
24. 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

28th day of August

A. V. Murawski Ordinary

of Chinch County

Confederate

Soldier's Application.

UNDER ACT ~~1917~~ 1917

County Leavenworth
Name Leah Dorrill

Company J. L. Perry

Regiment.

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. F. BYRD, State Printer, Atlanta

No

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,

Clint 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 1917 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
Honolulu - Clint - 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 Clint Ga. all his life - and resides here now.
4. When, where and in what Company and Regiment did Charlton H. Smith enlist during war from 1891 to 1895? (Give date and place.) Serviced by May 12 - 1864 - in Company D - 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 Lee's surrender - Va - 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? Serviced by. for what cause did he leave? was on duty
for Lee. By whose authority did he leave. the Captain 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 Lee's Company at the surrender on duty at the surrender.
13. In what way was he prevented from returning to his Command? was there

- How do you know? He was there
14. What effort did he make to return to his Command and how do you know? 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
N. V. Mungro Ordinary,
of Clint County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Clint County.

Personally before me comes W. H. Mungro & C. H. Dickerson who on oath says that they are freeholders residing in said County and we know Charlton H. Smith the applicant for pension and we know the property that is now in the use, possession and control of himself and of the cash value to wit: (Make List by items and value.) 316 acres \$828 of land, farm property \$1000 one mule \$100. Household goods \$100. Ranges, weapons, farm implements &c \$100

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 value? or was it made to obtain a pension?

Sworn to and subscribed before me, this the 23 day of Sept 1917 } W. H. Mungro Ordinary,
of Clint County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Clint County.

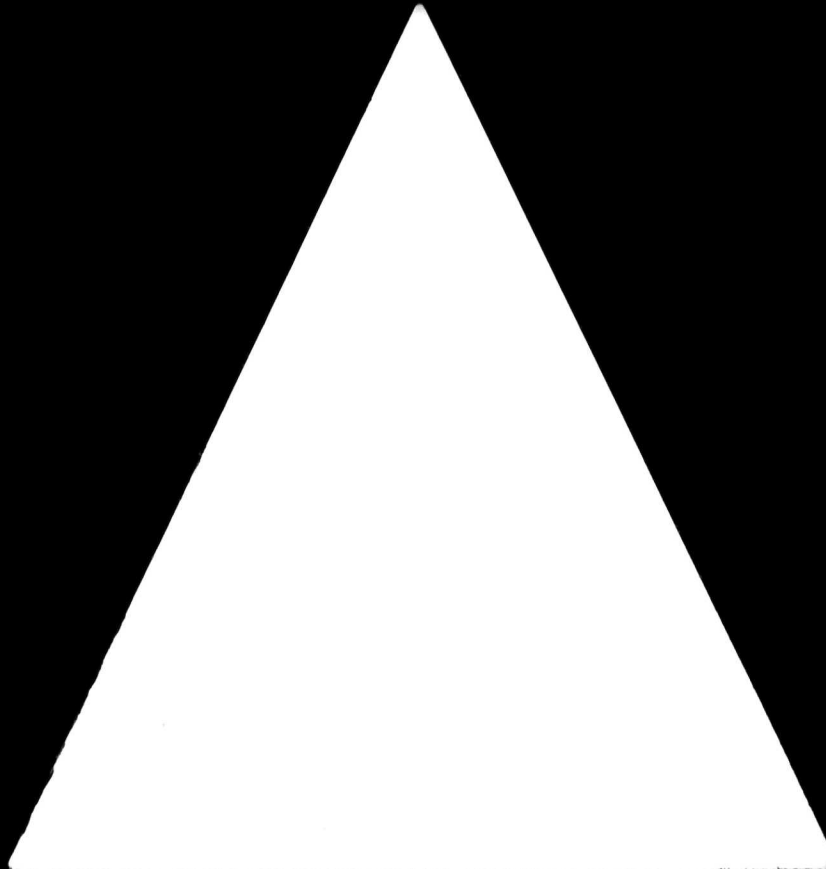
I, N. V. Mungro Ordinary of said County, certify that I know the applicant Charlton H. Smith for Pension is the person he represents himself to be and resides in said County. That I also know J. R. Dickerson the witness swearing to the service and they are all residents of said County and were duly sworn 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 Charlton H. Smith shows that:

value for tax is in 1908 \$ 2080.00 for 1909 \$ 2770.00 for 1910 \$ 3020.00
for 1911 \$ 3006.00 for 1912 \$ 3931.00 for 1913 \$ 3946.00 for 1914 \$ 3957.00
for 1915 \$ 3974.00 for 1916 \$ 3606.00

Sworn under my hand and official seal of office this 4 day of Sept 1917
N. V. Mungro Ordinary,
of Clint 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 }
N. T. Mangrove Ordinary,
of Chiswick County.



Ordinary's Certificate

STATE OF GEORGIA,

CLINCH,

COUNTY.

I, W. V. Maggione, 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, trust-worthy, 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. Maggione 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 of the same." 2. Additional affidavits may be attached if black women are handicapped. 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 5. Attached certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County CLINCH,

Name Mrs. Martha Smith,

Widow of Charlton H. Smith,

Company I

Regiment 4th

Approved W. V. Maggione

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. Misgrove, 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, trust-

worthy, 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. Misgrove 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.

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 12, 1864 at Homerville, Ga. in Company "I" 4th Ga. Cavalry, John T. 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? No.
8. Where was his command when he left? Mustered out.
- a. For what cause did he leave his command? Mustered out.
- b. By whose authority did he leave his command? No.
- c. For how long was he granted leave of absence? No.
- e. What was his physical condition when he left his command? Good.
- f. What effort did he make to return to his command? No.
- g. In what way was he prevented from going back to Command? No.
- 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? No.
- 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? No.
- m. Are you now a widow? Yes.
9. Have you or your husband heretofore been paid a pension by the State? No.

Sworn to and subscribed before me this the

10 day of February 1923

W. V. Misgrove Ordinary,

of CLINCH County.

(SEAL)

Widow's Pension

Under Act 1910 - as Amended by Act of 1919.

County CLINCH.

Name Mrs Martha Smith,

Widow of Charlton H. Smith,

Company

Regiment

Approved

J. H. HANLEY,

Commissioner of Pensions.

Byrd Printing Co., State Prison, Atlanta.

2/1923

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
I was living in the same community and knew both 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. 3rd Camp Scriven Co. I. Captain Jno. C. Nichols Co. 4th, Ga Cavalry
yes.
10. Were you a member of the same Company?
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? E.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?

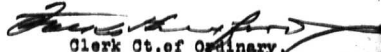
Sworn to and subscribed before me this the

18th day of July 1933
M. W. Cantu 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 appearing of record in this office in book "B" page
14 of marriage licenses. Witness my hand and seal this Feb. 9, 1923.


Clerk Ct. of Ordinary.

MARRIAGE LICENSE

Issued _____ 19__

and recorded on page _____

Book _____ of Marriage Licenses.

Ordinary.

No. 268



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.

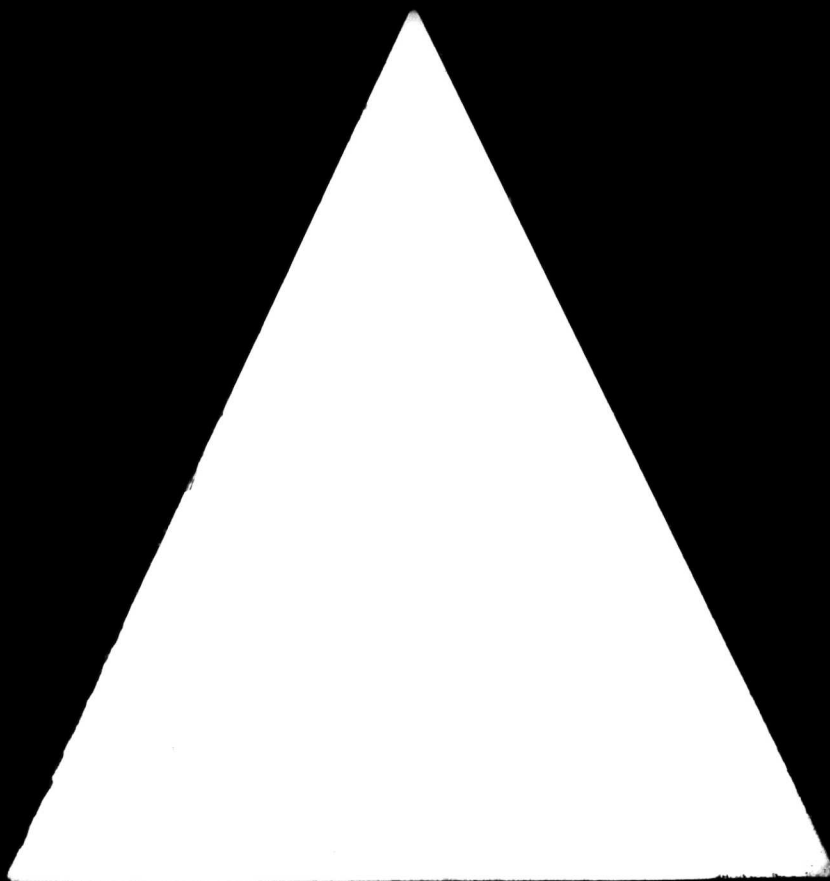
Moses Tomlinson, (L.S.) Ordinary.

STATE OF GEORGIA CLINTON COUNTY

I Certify that Charlton H. Smith *and* Martha Henderson *were joined in Matrimony by me this* 23 *day of* Sept. 1875. *Witness My Hand and Seal*

Recorded 19 G.W. Newbern, M.G. Moses Tomlinson, Ordinary.

PARTY PERFORMING CEREMONY RETURN TO ORDINARY TO BE RECORDED.



Smith, S. D.
Chick
U. R. Jan 1910

INDIGENT PENSION

1909

Name *S. D. Smith*

County *Chick*

Co. *4th* Regt

Approved _____ 190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

State of Georgia, State Printer, Atlanta.



STATE OF GEORGIA

POWER OF ATTORNEY

John W. Lindsey
Commissioner of Pensions
State of Georgia
John W. Lindsey
Commissioner of Pensions
State of Georgia
John W. Lindsey
Commissioner of Pensions
State of Georgia

POWER OF ATTORNEY

STATE OF GEORGIA

Cherokee COUNTY

I, Wm. G. Smith, do hereby authorize

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

Witness my hand and seal, this 21 day of August, 1907

Executed in presence of

J. P. Dwyer

QUESTIONS FOR APPLICANT

STATE OF GEORGIA

Cherokee COUNTY

I, Wm. G. Smith, do hereby certify that the following questions, answers and answers are correct:

1. Wm. G. Smith (Give State, County and Residence)
2. How long and when have you been a resident of this State? Since 1880
3. When and where were you born? March 21, 1840, in the State of Ohio
4. When and where and in what company and regiment did you enlist or serve? March 21, 1861, in the 1st Regt. of the 1st Div. of the 1st Army Corps, U. S. Army

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 Fort Fisher, 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 out on a special mission by the commanding officer of the 1st Regt. of the 1st Div. of the 1st Army Corps, U. S. Army
9. How much are you now (gross) per annum by your own exertions or labor? None

10. What has been your occupation since 1865? None
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty?" Age 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. Age and poverty

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 1902, 1903, 1904, 1905, 1906 and 1907, 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 retain for taxation? Cherokee County, Georgia
16. How was you supported during the years 1902, 1903, 1904, 1905, 1906, 1907, 1908 and 1909? By my wife
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? None

18. What was your employment during 1902, 1903, 1904, 1905, 1906, 1907, 1908 and 1909? What pay did you receive in each year? 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? Yes, my wife and two children. My wife is now 65 years of age and is unable to do any work. My children are 12 and 10 years of age and are attending school.

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? Yes
22. For many applications have you ever made and under what name? Wm. G. Smith
I, Wm. G. Smith, do hereby certify that the above answers are correct.
Applicant

Every Question MUST BE Answered

Smith, S. D.
Cherokee Co.
W. G. Smith
1907
INDIGENT PENSION
Wm. G. Smith
Cherokee
Cherokee
1907
JOHN W. LINDSEY
Commissioner of Pensions
WARRANT HANDLED TO
1907

QUESTIONS FOR WITNESS

STATE OF GEORGIA,

Tusculum County.

John T. Marshall of said State and County, having been presented as a witness in support of the application of H. D. Smith for pension under section 1254, Code, and after being duly sworn, has answered to make to the following questions, answers and answers as follows:

1. What is your name and where do you reside? John T. Marshall, Peach
 2. Are you acquainted with H. D. Smith the applicant? If so, how long have you known him? Fifty years ago was school teacher together
 3. Where does he reside, and how long and since when has he been a resident of this State? Resides in West Chatham County, Georgia, about 10 miles from this place
 4. When, where and in what company and regiment did he enlist, and how do you know? Enlisted at Athens, Ga. Co. G, 7th Regt. Inf. 1864
 5. Were you a member of the same company and regiment? Yes
 6. How long did he perform regular military duty? With this Regt.
 7. When and where was his command surrendered? Hamburg, S. C. August
 8. Were you present when it surrendered? Was on way home on detail
 9. Was applicant present? Yes. Was on detail from an outfit with me
 10. If he was not present, where was he? Was on way home on detail
- When did he leave his command? Detailled for what cause? Detailled
By what authority he left? By order from 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. With him and his office & son
12. What property, effects or income did the applicant possess in 1903, 1904, 1905, 1906, 1907, 1908 and 1909? Does not know
- and what disposition, if any, did he make of same? Does not 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, does not know
14. What is the applicant's occupation and physical condition? Working blacksmith shop and for 25 years has been in the line of carrying on business thereby causing him trouble to do manual labor for support
15. Is the applicant unable to support himself by labor of any sort; if so, why? Not able by reason of his age and infirmities and causing him trouble to do 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? Does 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 yrs. 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 10th day of September, 1907, John T. Marshall Witness.

John T. Marshall Ordinary,
Tusculum County, Ga.

AFFIDAVIT OF PHYSICIANS

STATE OF GEORGIA,

Chatham County.

Personally came before me, Dr. C. R. Thigpen and A. H. Culpepper both known to me as reputable physicians of said County, Ga., and after being duly sworn, they have examined carefully H. D. Smith applicant for pension under Section 1254, Code, and after such personal examination say that his present physical condition is as follows:

He is an old man & has a general debility

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

Sworn to and subscribed before me, this the

10 day of September, 1907.

J. T. Marshall Ordinary.

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

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

Chatham County.

I, J. T. Marshall Ordinary, in and for said County, hereby certify that the applicant H. D. Smith resides in said County, and has been a bona fide resident of this State since the day of all his life 180, and that the witnesses, viz: Dr. C. R. Thigpen & A. H. Culpepper

are of trustworthy character, and that their statements are entitled to full faith and credit. I further certify that before answering the foregoing questions the applicant and each witness took the oath hereon prescribed, and that the full text of the affidavit was read to the applicant and witness before same was signed.

I further certify that the tax digest of Chatham 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 True and made in good faith.

Witness my hand and seal of office, this 10th day of September, 1907.

J. T. Marshall Ordinary,
of Chatham 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.

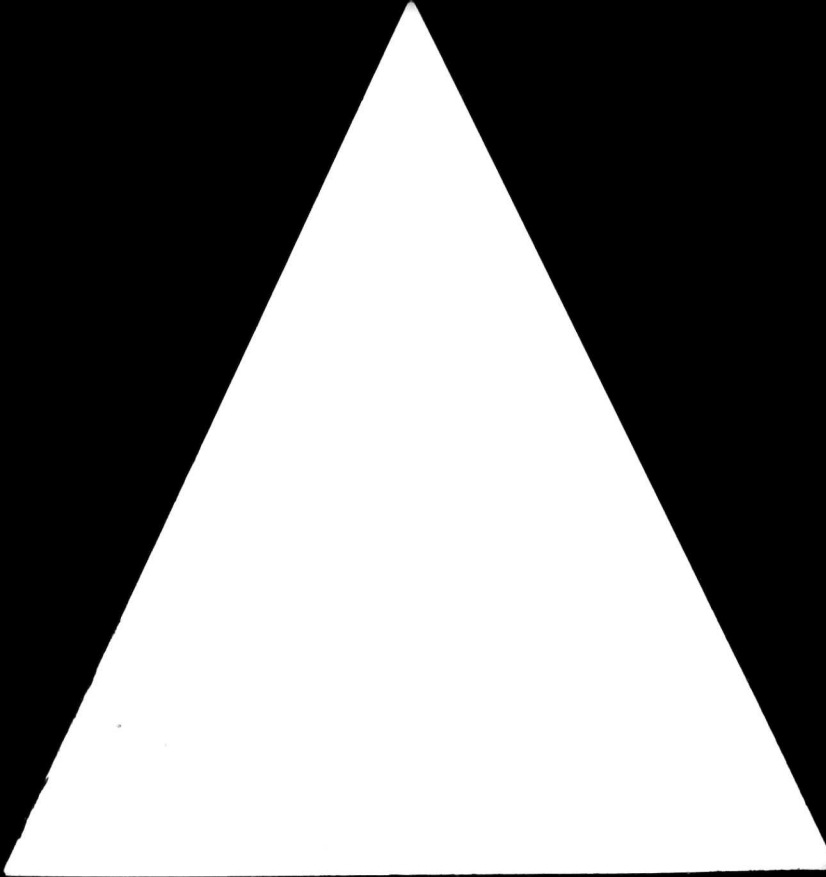
Sworn to and subscribed before me, this the

day of Feb 1907

Joe W. Kalesch
Tulsa County, Ok

John Marshall
Witness.

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.



Smith, G.
Chick
Indy 10/11/11

**Confederate
Soldier's Application.**

☒ UNDER ACT 1810.

County *Chick*
Name *P. D. Smith*
Company *Co. 19th Regt*
Regiment
Approved

L. W. LINDSEY,
Commissioner of Revenue.
CHAS. E. BYRD, State Printer, Atlanta.
10/11/11



APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants in Answer.

STATE OF GEORGIA.

Chick County, of said State and County, hereby applies for the pension provided by Act of 1910, as Confederate Soldier, and submits his sworn statement, with his testimony to make out the same, and after being duly sworn here 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) Chick
2. How long and since when have you been a continuous resident citizen of this State? Since 1862
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) 1st Co. 1st Regt. 1st Div. 1st Army
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) 1862 to 1865
6. When and where was your Company and Regiment surrendered or discharged from the Service? At Appomattox, Va. 9th 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.

- a. Where was your Command when you left it? At Appomattox, Va.
- b. When did you leave the Command? April 9th 1865
- c. For what cause did you leave? Retirement
- 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? Yes
- 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.) House, land, furniture, worth \$2000

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.) House, land, furniture, worth about \$2000

12. What annual or monthly income or earnings of yourself and wife and the source derived have you? None

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

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 9th day of April, 1910, at Chick County, Georgia.

Soldier's Application.

Confederate

UNDER ACT 1910.

Name Chick
County Chick
Company 1st Co
Regiment 1st Regt
Approved I. W. LINDSEY
Commissioner of Pensions

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Chick County.

I, J. T. Dame Ordinary of said County, certify that I know the applicant J. T. Dame for Pension is the person he represents himself to be and resides in said County. That I also know A. B. Smith & J. Z. Smith the witness swearing to the service and A. B. Smith & J. Z. 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 Chick Co shows that Chick and wife value for tax is in 1908 \$ 2000 for 1909 \$ 2000 for 1910 \$ 2000

Sworn under my hand and official seal of office this 5th day of April, 1910.

J. T. Dame Ordinary, of Chick 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 received if such cause are furnished.
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.

QUESTIONS FOR WITNESS

STATE OF GEORGIA,

Richmond County,

Daniel Turner

of said State and County is hereby summoned as a witness in support of the application of P. Hughes for the pardon 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? Daniel Turner
26 Race Ave. Augusta, Ga.
2. How long and since when have you known P. Hughes the applicant? For more than 6 years.
3. Where does he now reside, and since when has he been a bona fide, continuous resident in this State and how do you know? Naturalized in Ga. since 1873.
4. When, where and in what Company and Regiment did P. Hughes enlist during war from 1861 to 1865? (Give date and place). Co. B, 1st Reg. Va. Artillery, August 1862, Alexandria, Va.
5. How did you obtain your information of this Service? Co. B, 1st Reg. Va. Artillery, August 1862, Alexandria, Va.
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date). From August 1862 to April 24, 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? Apr 26, 1865 Where was his Command when he left it? Greensboro, N.C. for what cause did he leave? Paroled
By whose authority did he leave? Commanding Officer 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 Reg. Va. Artillery, August 1862, Alexandria, Va.
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, where and when? _____

of said State and County is hereby summoned as a witness in support of the application of P. Hughes for the pardon 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 property, if any, has been sold or given away by the applicant as his wife since 1 Nov 1905? (State in full by name). 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 to applicant? None
 5. What disposition was made of the proceeds of the sale? None
 6. Was the disposition of this property made in good faith and full value? None
- or was it made to obtain a pension? None
- Sworn to and subscribed before me, this the 10th day of Oct, 1910 W. B. Smith & F. Smith
J. Adams Ordinary
of Cherokee County.

ORDINARY'S CERTIFICATE

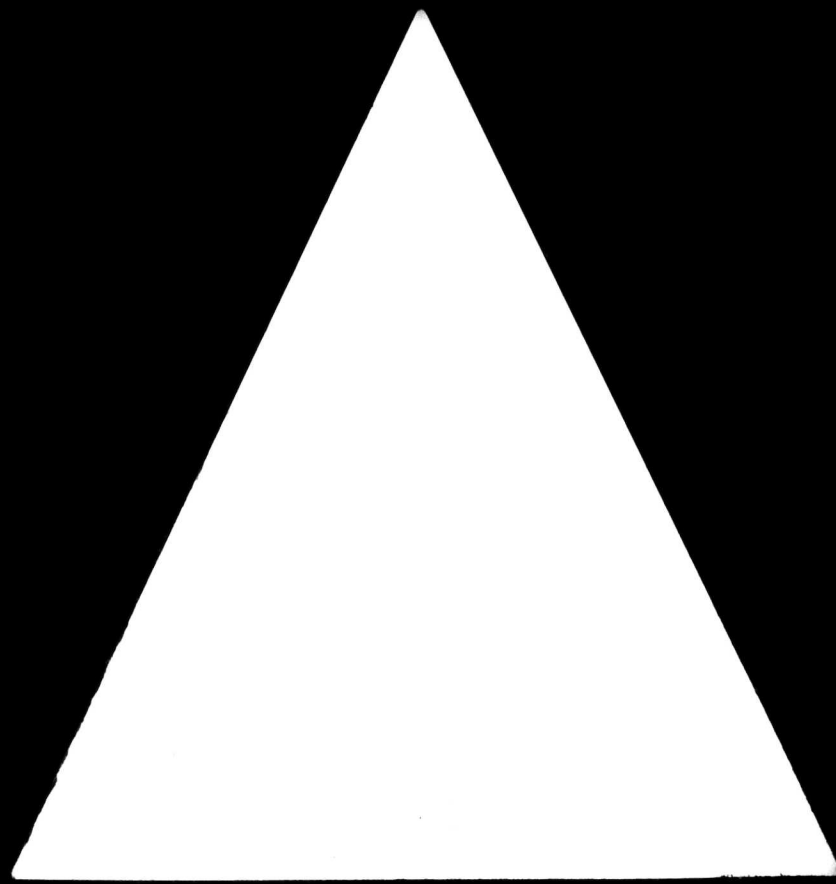
STATE OF GEORGIA,

Richmond County,

Alexander R. Tolson

Ordinary of said County, certify that I know Daniel Turner the witness swearing to the facts stated above as a bona fide continuous resident of said County and who duly swore by me before signing the foregoing affidavit and whose truthful and trustworthy statements are entitled to full faith and credit.

Only on the 2nd of March 1911
at Helmsdale



Sitness. Ch-

OK for 1919
Stapleton - W. J.
Clerk No. 2181-182 County
of M
Confederate

Soldier's Application.

UNDER ACT 1910.

2149

County Belmont

Name W J Stapleton

Company.....

Regiment 17th La. Inf.

Approved _____

1. W. L. D.

J. W. LINDSEY,
Commissioner of Pensions.

CHAS. P. BYRD, State Printer, ASHLEY.

~~SECRET~~

2/12-1918

*W. J. Stapleton, m.
found on C-57-
(M. R.)*

Witness Ok -

Ok for 1919
Stapleton - W. J.
CLIVICK No. 2181-182 County
657
Confederate

Soldier's Application.

See UNDER ACT 1910.

2189

County *Calhoun*

Name *W. J. Stapleton*

Company *6*

Regiment *15th Regt.*

Approved

J. W. Lindsey
J. W. LINDSEY,
Commissioner of Pensions.

1922
CHAS. F. BYRD, State Printer, ALBANY.

61966
7-12-1918

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

CLINCH County.

W. J. Stapleton 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. J. Stapleton, DuPont, Clinch County, Georgia.
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? arrived two terms Militia enlisted in Nov 1864 in 2nd Ga. Regt.
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) Company C-57th Ga. Regiment remained until end of war.
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) May 1st 1864 until April 26th 1865.
6. When and where was your Company and Regiment surrendered or discharged from the Service? at Reskhill, N.C.
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.
- a. Where was your Command when you left it? Hamburg, N.C.
- b. When did you leave the Command? May 14th 1865.
- c. For what cause did you leave? Paroled.
- d. By whose authority did you leave? United States.
- e. For how long was your leave granted? In what way? for all times to take up arms against the United States no more.
- f. Why did you not return to your Command after leave expired? was paroled.
- g. In what way were you prevented?
- h. What effort did you make to return?
- i. Were you captured during the war? at Reskhill, N.C.
- j. If so, when, and where? In what prison were you held and when were you released? Gen. Joseph E. Johnson surrendered.
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.)
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). 1 Cow & Cal. #40, 2 Hogs 30
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

28th day of Jan. 1912

W. J. Stapleton Ordinary

of CLINCH County.

Soldier's Application.

ALL UNDER ACT 1910.

1912

Company bellevue

Regiment 11th Regt.

Company 6

Regiment 27th Regt.

Approved

W. J. Stapleton

W. J. Stapleton

W. J. Stapleton

W. J. Stapleton

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,

Learned... 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 W.J. Stapleton 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? serving 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 until 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? discharged. 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 Sumner County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

CLINCH County.

Personally before me comes J.B. Gann 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 the 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 value? or was it made to obtain a pension?

Sworn to and subscribed before me, this the

28th day of Jan. 1918.

M.V. Mangrove Ordinary,

of CLINCH County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

CLINCH County.

I, W.V. Mangrove, 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. Gann, 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 \$111. for 1913 \$111. for 1914 \$111. for 1915 \$111.

Sworn under my hand and official seal of office this 28th day of Jan. 1918.

M.V. Mangrove 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

Ordinary,

of Linn County.

W. F. L. Smith

E. D. White

Linn

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clint County.

Richard Johnson, hereby authorize

John A. Taylor to receive and receipt for the pension allowed and

by John A. Taylor at Clint County

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 21st day of October 1896.

day of October 1896.

John A. Taylor

Executed in presence of:

E. J. McMillan

George L. Landon
John A. Taylor

Received 5th 2/22/97
The witnesses are requested to say whether applicant appeared in person or by a competent person - how long had he been in service before he became disabled - and whether his present infirmities are traceable directly to the service - and state where -
Rich Johnson
Com of Pension

Approved 12/15/97
Rich Johnson
Com of Pension

ACT 24th October, 1896

Taylor, John A.
Clint Co.
SOLDIER'S PENSION

E. J. 1896. / 897

Name John A. Taylor

County Clint

Disability physical disability

Amount, \$ 50

1896.

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO

W. W. HARRISON, STATE PRINTER, ALBANY.

1/22 97

POWER OF ATTORNEY.

STATE OF GEORGIA,

Chick County.

I, John A. Taylor hereby authorize Wm. A. Wright of Attom to receive and receipt for the pension allowed and request that he remit same to John A. Taylor by Express at Stanton 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:

J. McMillan
George Cornelius
Ordinary

From Sept 3/22 1897.
The witnesses on my signature to
my relative applicant when
he enlisted was a sound &
healthy man - then long had
he been in service before he
became diseased - & whether
his present infirmities are
traceable directly to the
service or not alone -
Rich Johnson
Com p. Putnam

12/15/1897
ACT 24th October 1896
Taylor is John A.
Collected Co.
SOLDIER'S PENSION
E. 49 1800. 1897
Name John A. Taylor
County Chick
Disability Physical disability
Amount 50
1896
RICHARD JOHNSON,
Secretary Pension Department.
WARRANT HANDED TO
12/29/97

For Use of Applicants Who have Not Heretofore Drawn.

STATE OF GEORGIA,

Chick County.

PERSONALLY appears John A. Taylor of Chick County, State of Georgia, who being duly sworn says on oath that he was born on the 26th day of January 1822, that he is a bona fide citizen and resident of Georgia, and has been continuously since the 26th day of January 1822, 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 G of 2nd Regiment Georgia Volunteers 1st Brigade; that whilst engaged in (military service, and in line of duty in the State of Georgia, 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 24th day of December 1862. He has since then never been able for duty or manual labor 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 24th, 1896.

Sworn to and subscribed before me, this 26th day of July 1896.

George Cornelius
Ordinary.

NOTE—State fully name of disease or character of disease which causes the disability, and explain particularly the extent of the disability. If disease, give full and correct history of disease, tracing it directly to the service.
NOTE—Do not sign this paper until you are fully satisfied that the facts are true.
NOTE—The Ordinary will not sign this paper until when the affidavits are signed.

The Instructions, as set out in the Notes, MUST be observed.

AFFIDAVIT FOR WITNESSES.

STATE OF GEORGIA.

Wilcox County.

PERSONALLY appears before me, the undersigned, Ordinary in and for said County,

Henry & 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 litth 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 disabled state as when was discharged & has never been able to labor to make a 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 serve about ten months as private Co E 49th Regt 1st Thomas Brigade

and we also state that the applicant John A. Taylor at the time of enlistment was a sound & healthy man & that he did serve about ten months as private Co E 49th Regt 1st Thomas Brigade

and we also state that the applicant John A. Taylor at the time of enlistment was a sound & healthy man & that he did serve about ten months as private Co E 49th Regt 1st 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 December 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. Baingum

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.

PHYSICIANS' AFFIDAVIT.

STATE OF GEORGIA.

Clinch County.

PERSONALLY comes before me _____ 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. A. Taylor and after such personal examination, say that the present condition of applicant is as follows: He has the symptoms of a chronic disease of the bladder & spinal parts

that he is unable to do any kind of manual labor the too is a very poor man

and he has not labored any for two years

and that said condition is permanent.

Nothing to speak on top of an inner

We further say that said condition arises from the following facts: cold & exposure during his camp life in the late war

and that said condition is permanent.

Nothing to speak on top of an inner

and that said condition is permanent.

We have treated applicant professionally for 4 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 Goodwin

ORDINARY.

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.

STATE OF GEORGIA.

Clinch County.

I, George Goodwin, 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 Goodwin

Ordinary Clinch County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Chick 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 of
at Atlanta Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 17
day of January 1898.

John A. Taylor [L. S.]

Executed in presence of

W. G. Taylor
George W. Taylor

POWER OF ATTORNEY.

STATE OF GEORGIA,

Chick 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

Ordinary by Mail
at Atlanta Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 17
day of January 1898.

John A. Taylor [L. S.]

Executed in presence of

W. G. Taylor
George W. Taylor

Complete & forward with
other like 2 copies 1898
John A. Taylor

ACT OF 24 OCT 1897
(For Those Already Enrolled.)
Chick Co
No. 1837

INVALID
SOLDIER'S PENSION.
1898.

Name John A. Taylor
County Chick
Disability Disease
Amount, \$ 50.00
2/15 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO
NAH
W. W. HARRISON, STATE PRINTER, ATLANTA.

No data

Taylor John A.
Chick County

COPIES SECTION 1897
(For Those Already Enrolled.)

No. 907

INVALID
SOLDIER'S PENSION.
1898.

Name John A. Taylor
County Chick
Disability Disease
Amount, \$ 50.00
2/15 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO
Wm A Wright
W. W. HARRISON, STATE PRINTER, ATLANTA.

No data

FOR REPRODUCTION HEREON, ALLOWED PENSION

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Chunck County.

Personally appears John A. Taylor of Chunck 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 1862; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a private in Company 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 about May 1862, he was wounded, injured or diseased as follows:

that I was taken while with his own men at Gettysburg N. C. was taken sick with measles, then followed with kidney trouble and spinal affection, and returned

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 never under said law as a resident of Chunck county been allowed an invalid pension of

25 Dollars, for the year 1898.
Sworn to and subscribed before me, this, the 17th day of January 1898. POST-OFFICE John A. Taylor

George Cornelia 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,

Chunck County.

I, George Cornelia 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.



George Cornelia
Ordinary Chunck County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Chunck County.

Personally appears John A. Taylor of Chunck 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 1862; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a private in Company 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:

that I was discharged from service on account of general paralysis caused from exposure while in the Confederate service. He was honorably discharged on the 26th day of December 1862. & is still living.

Deponent 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 Chunck County been allowed an invalid pension of 50 Dollars, for the year 1898.

Sworn to and subscribed before me, this, the 9th day of January 1898. POST-OFFICE John A. Taylor

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,

Chunck County.

I, George Cornelia 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 1898.



George Cornelia
Ordinary Chunck County.

RECORDED & INDEXED

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, John A. Taylor hereby authorize Wm. A. Wright
Compt. Gen. of Attentio go

to receive and receipt for the pension paid hereon and request that he remit same to
John A. Taylor by Express
 at Homeraville 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 Connelley
Ordinary

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, John A. Taylor hereby authorize Wm. A. Wright
Compt Gen of Attentio go

to receive and receipt for the pension paid hereon and request that he remit same to
John A. Taylor by Mail, in care of
 at Homeraville 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 Connelley
Ordinary

Taylor, John A.
Cherokee Ga
 CODE SECTION 120
 (For Those Already Enrolled.)

No. 3034

INVALID

SOLDIER'S PENSION.

1900.

Name John A. Taylor
 County Cherokee
 Disability Physical Disability
 Amount, \$ 50
 Warrant issued Jan 13 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Wright

Geo. W. Harrison, State Printer, Atlanta.

No date

Taylor, John A.
Cherokee Ga

CODE SECTION 120
 (For Those Already Enrolled.)

No. 3034

DISABLED

SOLDIER'S PENSION.

1901.

Name John A. Taylor
 County Cherokee
 Disability Physical Disability
 Amount, \$ 50

Jan 24 1901.
 JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Wright

Geo. W. Harrison, State Printer, Atlanta.

12/1901
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 1833; 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 49th th Regiment of Georgia Volunteers, Thomas Brigade; that whilst engaged in such military service in the State of North Carolina 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 of general disability
caused from exposure while in
the Confederate service in North Carolina
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 29th, 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 John A. Taylor day of January 1900. 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 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.



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 1833; 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 49th th Regiment of Georgia Volunteers, Thomas 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 28th, 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 John A. Taylor day of December 1900. 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,

Clinch 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.



George Cornelius
Ordinary Clinch County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch County.

I, John A. Taylor hereby authorize W. A. Wright of Culton, Co. Ga to receive and receipt for the pension paid hereon and request that he remit same to W. F. Howell by mail at Hamersville 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. F. Howell

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch County.

I, John A. Taylor hereby authorize T. A. Right of Hampton County Ga to receive and receipt for the pension paid hereon and request that he remit same to W. F. Howell by check or draft at Hamersville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 21 day of January 1903.

John A. Taylor [L. S.]

Executed in presence of

W. F. Howell

CODE SECTION 126

(FOR THOSE ALREADY ENROLLED.)

No. 2727

DISABLED

SOLDIER'S PENSION

1902.

Name John A. Taylor
County Clinch
Co. 49 Regiment 49

Disability

Amount, \$ 30.

3/24 1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Gen. W. Harrison State Printer, Atlanta.

no data

CODE SECTION 126

(FOR THOSE ALREADY ENROLLED.)

No. 2789

DISABLED

SOLDIER'S PENSION

1903.

Name John A. Taylor
County Clinch
Co. 49 Regiment 49

Disability

Amount, \$ 30.

3/24 1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Gen. W. Harrison State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

(Cline County.)

Personally appears John A. Taylor of Cline 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 Nov 1833; 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 42th Regiment of Georgia Volunteers, Thomas's Brigade; that whilst engaged in such military service in the State of North Carolina on the April day of 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 30th 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

Cline County, been allowed an invalid pension of 50 Dollars, for the year 1901.

Sworn to and subscribed before me, this the 18 day of Jan 1902. Post-office Stockton

W. H. Howell Notary Public

STATE OF GEORGIA,

(Cline County.)

I, W. H. 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 Jan 1902.

W. H. Howell Ordinary Cline 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,

(Cline County.)

Personally appears John A. Taylor of Cline 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 Nov 1833; 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 42th Regiment of Georgia Volunteers, Thomas's Brigade; that whilst engaged in such military service in the State of North Carolina on the April day of 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 30th 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, 1903. I have heretofore, under said law, as a resident of

Cline County, been allowed an invalid pension of 50 Dollars, for the year 1902.

Sworn to and subscribed before me, this the 18 day of Jan 1903. Post-office Stockton

W. H. Howell Notary Public

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,

(Cline County.)

I, W. H. 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.

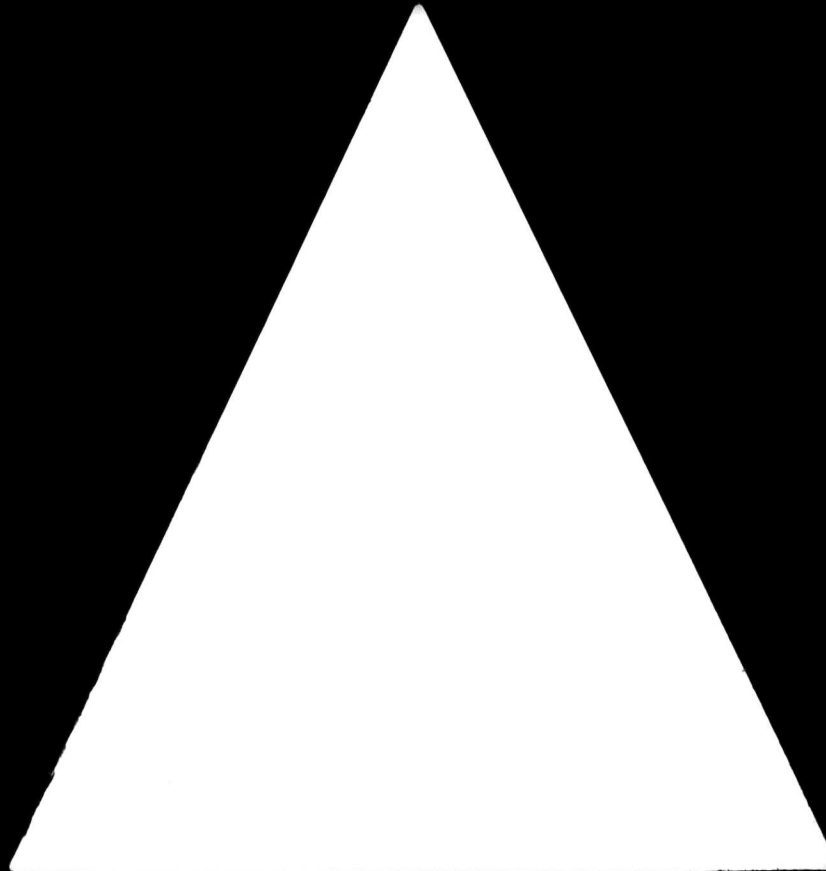
Given under my official signature and seal, this 20 day of Jan 1903.

W. H. Howell Ordinary Cline County.

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.



Thomas J. M.
blinch G.
No. *2972*

INDIGENT PENSION
1898.

Name *J. M. Thomas*
County *blinch*

Approved *5/4* 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
ran

2/15/1898

POWER OF ATTORNEY.

STATE OF GEORGIA,
blinch COUNTY.

I, *J. M. Thomas* hereby authorize
Send a receipt sent from Atlanta Ga
to receive and receipt for the pension allowed and request that he remit same to
in blinch County 1/11th day of July 1898.
Thomas J. M.

Witness my hand and seal this *11th* day of *July* 1898.
Executed in presence of
W. B. Hunt } *My Attorney* [L.S.]
George Kennedy }
blinch

POWER OF ATTORNEY.

STATE OF GEORGIA, }

Clinch COUNTY. }

I, J. M. Thomas hereby authorize

Wm. A. Wright of Atlanta Ga

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

at Thomasville, Ga

Witness my hand and seal this 14th day of Feb 1898.

Executed in presence of W. B. North } J. M. Thomas [L.S.]

George Cornelius ordinary

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 16th, 1894, hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (give State, County and post office.)
J. M. Thomas, Thomasville, 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 Co. B. 1st Bat. 2d sharpshooters
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 "infirmary and poverty" or third "blindness and poverty"?
Age & poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight?
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 the plantation from when able to work. & the balance was aided by my son
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 laborer when able to work. Paid in previous about 25.00
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. They 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.

George Cornelius Ordinary.
Clinch County.

J. M. Thomas Applicant.
mark

Every Question MUST be Answered

No. 2972

INDIGENT PENSION

1898.

Name J. M. Thomas

County Clinch

Approved 5/9 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

nam

QUESTIONS FOR WITNESS.

STATE OF GEORGIA.

Ware County.

M. 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 16th, 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?
M. R. Thomas, Mayor, 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 & don't 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 laborer 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?
Don't know exactly, by very little, not on his own
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 16th, 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 } M. R. Thomas
the 7 day of Feb, 1898. } mark Witness.
Marion Lato Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA.

Clinch County.

Personally came before me W. J. Stapleton M.D. and L. B. Matton 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 & partly also a kidney trouble contracted while in the army & gives him trouble & agony until at times rendering him unable to perform 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. }
George Cornelius Ordinary.

W. J. Stapleton, M.D.
L. B. Matton, M.D.

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 14th 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 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 1896 5 Dollars of property, and in 1897 5 Dollars of property.

In my opinion the foregoing claim is no 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 of Atlanta Ga.
 to receive and receipt for the pension allowed, and request that he remit same to
Ordinary at Honolulu
 by mail

Witness my hand and seal this 29 day of January 1899.

Executed in presence of

W. R. Funder } J. M. Thomas (L. S.)
George Bonnet

CODE SEC. 1234.

(For These Already Enrolled.)

No. 1968

INDIGENT

SOLDIER'S PENSION,

1899.

Name J. M. Thomas
 County Clinch

WARRANT ISSUED

1899

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

W. R. Funder

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 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
 by Express

Witness my hand and seal, this 30 day of January 1900.

Executed in presence of

George Bonnet
Ordinary

CODE SEC. 1234.

(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,

Blanch County.

Personally appears J. M. Thomas of Blanch 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 February 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 Georgia) during the war between the States, and served for the term of four years in Company B, of 1st Battalion George Washington Sharp's Regiment of Georgia Volunteers; 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 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 Blanch county been allowed a pension for the year 1898

Sworn to and subscribed before me, this, the 2nd day of February 1899. J. M. Thomas Mark George Cornelius Ordinary.

State of Georgia,

Blanch 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 February 1899.



George Cornelius Ordinary Blanch County.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Blanch County.

Personally appears J. M. Thomas of Blanch 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 Georgia) during the war between the States, and served for the term of 3 years in Company of the Regiment of Shades Capt. Hartwell's; that his physical condition is as follows: poverty and infirmity

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 1900. I have heretofore as a resident of Blanch county been allowed a pension for the year 1899

Sworn to and subscribed before me, this, the 8th day of January 1900. J. M. Thomas Mark George Cornelius Ordinary.

State of Georgia,

Blanch 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.



George Cornelius Ordinary Blanch County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA.

Clinch County.

I, J. M. Thomas hereby authorize Wm Wright
Conly gen of Atlanta Ga
 to receive and receipt for the pension allowed and request that he remit same to
J. M. Thomas in care of Wm Wright at Homerille Ga
 by Wm Wright

Witness my hand and seal, this 17th day of Dec 1900
J. M. Thomas [L. S.]
Mar 2

Executed in presence of

George W. Lindsey

Howard M. Clinch

(For Those Already Enrolled.)

No. 114

INDIGENT

SOLDIER'S PENSION.
 1901.

Name J. M. Thomas
 County Clinch

WARRANT ISSUED

1901.

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

Wright

Geo. W. Lindsey, State Printer, Atlanta

12/19/01

no data

POWER OF ATTORNEY.

STATE OF GEORGIA.

Clinch County.

I, W. A. Wright hereby authorize W. A. Wright
Wright of Atlanta Ga
 to receive and receipt for the pension allowed and request that he remit same to
W. A. Wright at Homerille Ga
 by Wm Wright

Witness my hand and seal, this 8 day of Dec 1902
J. M. Thomas [L. S.]
Wm Wright

Executed in presence of

Clinch Co
Thomas, J. M.

(FOR THOSE ALREADY ENROLLED.)

No. 5134

INDIGENT

SOLDIER'S PENSION.
 1902.

Name J. M. Thomas
 County Clinch

WARRANT ISSUED

1902.

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

Wright

Geo. W. Lindsey, State Printer, Atlanta

no data

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 Georgia) during the war between the States, and served for the term of 8 years in Company B of 1st Regiment of Georgia Vol; 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

George L. Corneilus

Ordinary.

STATE OF GEORGIA,

Clinch County.

I, George L. Corneilus 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

George L. Corneilus

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 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 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 Regiment of Georgia Inf; that his physical condition is as follows: Old age and 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 1902. I have heretofore as a resident of Clinch county been allowed a pension for the year 1901. Not old other Geo

Sworn to and subscribed before me, this the 8 day of Jan 1902

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

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,

Blinn County.

I, J. M. Thomas hereby authorizes W. B. Wright

of Paulsboro, N. J.

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

W. B. Howell at Homeville, Ga.

by mail

Witness my hand and seal, this 15 day of January, 1903.

Executed in presence of

W. B. Howell

J. M. Thomas
not

Thomas J. Thomas
reported by Andrew
1901-1902
CODE SECTION 151
(FOR THOSE ALREADY ENROLLED.)

No.

INDIGENT

SOLDIER'S PENSION
1903.

Name

Thomas

County

Blinn

Co.

Regiment

WARRANT ISSUED

3/24 1903.

JOHN W. LINDSEY,

Commissioner of Prisons.

WARRANT HANDED TO

M

Geo. HARRIS, warden, Prison, Atlanta.

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 1896; that he is 27 years old and by occupation house 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 _____ of First Artillery Regt. Georgia; that his physical condition is as follows: he is old and infirm and unable to work infirmity 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 16th, 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. } J. M. Thomas
W. F. Howell Ordinary. mark

STATE OF GEORGIA,

Clinch County.

I, W. F. 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.



W. F. 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. Nov. 8, 1902

To J. M. Thomas
Chick 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 Subsequent Pension Roll of Chick 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 - Do. That you were a deserter from the Confederate army - no man should be on the Pension Roll who incurred as a Soldier, in battle, the charge of desertion or who was not fairly paid for his part in the struggle - must clearly & fully remove this charge from your name.
J. W. Lindsey
Comm of Pension

Homerille Ga Nov 8 1902

We the Committee appointed by the Grand Jury of the October Term of Court of Chick County Georgia 1902 to purge the Pension list, beg to make the following report.

We find that J. M. Henderson 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 Subsequent Soldiers was a deserter for a considerable time during the War.

R. M. H. Williams
W. H. Shinn
J. B. Tomlinson
Lyman Smith
T. J. Strange
Committee

Georgia Chick 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.

J. M. Register

Chick S. C. C.

I certify that our Clerk of the Ordinary Court for Chick County and C. M. Patterson was duly transferred from Putnam to Chick County and now resides at ... out of the Committee ...

now resides at 20-21 in 1st Street and 3rd St
out of the community by the 1st of Jan 1903

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 Disputed Pension Rolls of
Calaveras County over former Pension be
paid to him -
4/29-1903

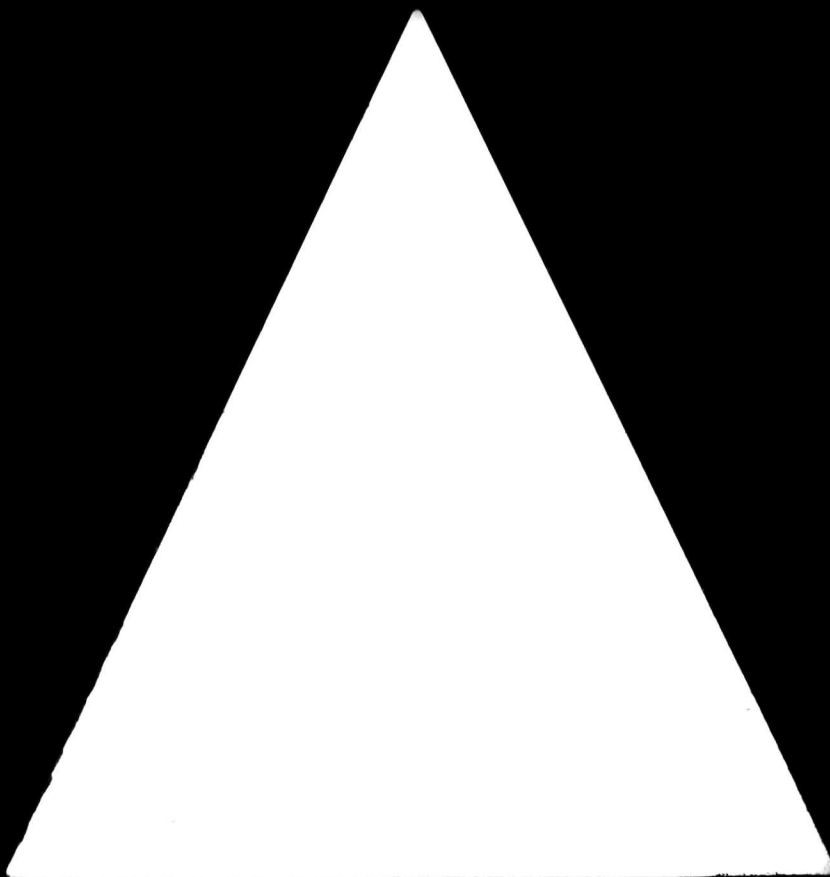
W. H. Lindsey
Clerk of District

Henry 1/1/03

William

Calaveras Co

1903



POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }
which

I, William Madison Thomas, hereby authorize
you as my Agent for of Atlanta Ga

to receive and receipt for the pension allowed and request that he remit same to
Thomas at New Orleans La by Express William M

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

Executed in presence of

P. H. Keady }
George Bernick }
C. Murray }
Wm M Thomas
notary

INDIGENT PENSION
1895.

Name: W. M. Thomas

County: Lincoln

Ground: C. P.

July 1st 1895
RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

att.

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clintch

County.

I, *William Henderson Thomas* hereby authorize

me or Wright Compt Gen of Atlanta Ga
to receive and receipt for the pension allowed and request that he remit same to *William M Thomas*
at *Homeraville Ga* by *Express*

Witness my hand and seal this *4th* day of *May* 1895.

Executed in presence of

P L Gracely *Wm M Thomas*
George Gracely *mark*
C. J. Gracely

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Clintch

County.

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, Clintch, Sumter Co., Ga.*
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? *I was born here. In State all my life.*
3. When and where were you born? *In Dalton, Ga. Dec. 18, 1872.*
4. Did you volunteer in the Confederate Army or in the Georgia Militia? *No.*
5. When and where did you enlist? *In 1862, in 1862.*
6. In what company and regiment did you enlist? *1st Regt. Ga. Cavalry, 1st Div. of Cavalry, 1st Div. of Cavalry, 1st Div. of Cavalry.*
7. How long did you remain in that company and regiment? *About two years.*
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 transferred.*
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 did disband when the war ended.*
11. What is your present occupation? *Farming, but do not do any thing much.*
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 \$100, dollars a year, contribute nothing.*
15. What is your present physical condition and how long have you been in such condition? *Am old and feeble, one eye out and can't see my eye, rest of the eye, have been made to do any thing by use of support for about two years.*
16. Upon which of the following grounds do you base your application for pension, viz.: first, "age and poverty," second "infirmary and poverty" or third "blindness and poverty"? *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 anything much. 2nd. Don't know. 3rd. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 4th. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 5th. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 6th. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 7th. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 8th. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 9th. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 10th. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 11th. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 12th. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 13th. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 14th. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 15th. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 16th. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 17th. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 18th. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 19th. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 20th. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 21st. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 22nd. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 23rd. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 24th. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 25th. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 26th. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 27th. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 28th. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 29th. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it. 30th. I lost my eye from a fall from a horse, a cold, rheumatism, left eye and lost it.*
18. What property, effects or income do you possess? *Nothing in the world one can own and call worth 12¢ and one has can worth 12¢.*
19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same? *Don't know. I don't know any more than I do now.*
20. In what County did you reside during those years and what property did you then return for taxation? *Resided in Clintch, Ga. Returned no property for taxation.*
21. How were you supported during the years 1893 and 1894? *By my son in law R. C. Gracely who resides 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 same.*
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, three children living, aged from about 22 years to about 40 years of age. All farming on rented land, each two jobs and their place and all farming. All very limited financially.*

OK *William M. Thomas*
No. 36 *Clintch Co.*

INDIGENT PENSION

1895.

Name *Wm M Thomas*

County *Clintch*

Ground *Exp*

July 1st

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDLED TO

atty.

Chas. W. Anderson, State Printer, Atlanta.

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.

George Landon Ordinary

of Clinch County.

William Madison Thomas Applicant.

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 *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?
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 don't 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?
How long he served was in service, I know as 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 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 don't 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. Matton 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 Madison 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 eye 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. Matton M.D.
Attest the Ordinary

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Clinch County.

I, *George Landon* Ordinary in and for said County, hereby certify that the applicant, *William Madison 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.* and *L. C. Matton M.D.* and *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 digest 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 Landon 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, or help you God."

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clint County.

I, William Thomas hereby authorize Wm. A. Wright
Capt. Gen of Atlanta Ga
 to receive and receipt for the pension paid hereon and request that he remit same to
Ordinary by Mail
 at Hampden Ga

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

Executed in presence of

W. K. Funder
George Carmichael
Ordinary

William Thomas
mark

Thomas, Wm
Clint Co

ACT OF 13 DEC. 1894.
 (For These Already Enrolled.)

No. 224

INDIGENT
 Soldier's Pension.
 1897.

Name William Thomas
 County Clint

Aug 9 1897.

RICHARD JOHNSON,
 Commissioner of Pensions.

WARRANT HANDLED TO
Atty

No data

POWER OF ATTORNEY.

State of Georgia,

Clint County.

I, Wm Thomas hereby authorize Wm. A. Wright
Capt. Gen of Atlanta Ga
 to receive and receipt for the pension paid hereon and request that he remit same to
Wm. Thomas by Mail in care of
 at Hampden Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 3rd
 day of January 1898.

Executed in presence of

L. P. Smith
George Carmichael
Ordinary

Wm Thomas
mark [L. S.]

Thomas, Wm
Clint Co
 (For These Already Enrolled.)

No. 1020

INDIGENT
 SOLDIER'S PENSION,
 1898.

Name Wm Thomas
 County Clint

WARRANT ISSUED

1/14 1898.

RICHARD JOHNSON,
 Commissioner of Pensions.

WARRANT HANDLED TO
na

No data

Capt. Newburn's (or Newburns) Company Co. 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 continuously ever since the *1st* day of *January* 1824; that he is *71* years old and by occupation a *farmer*; that he enlisted in the military service of the Confederate States (or of the State of _____) 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 _____ 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 Thomas*
George Cornelius Ordinary.

STATE OF GEORGIA,

Clinch 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.



George Cornelius
Ordinary *Clinch* County.

NOTE.—The blank spaces must be filled.

Capt. Newburn's (or Newburns) Co. Co. Militia

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Clinch County.

Personally appears *Wm 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 *74* years old and by occupation a *farmer*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served for the term of *four years* in Company _____, of _____th Regiment of *Co. 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 _____ 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 _____ day of *January* 1898. *Wm Thomas*
George Cornelius Ordinary.

State of Georgia,

Clinch County.

I, *George Cornelius* Ordinary of said County, do certify that I am well acquainted with *Wm 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* 1898.



George Cornelius
Ordinary *Clinch* County.

NOTE.—The blank spaces must be filled.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Chick County. }
I, Wm M Thomas, hereby authorize
Wm A Wright com of Atlanta ga
to receive and receipt for the pension allowed, and request that he remit same to
Osborne at Homerville ga
by mail

Witness my hand and seal this 22 day of January 1899.

Executed in presence of
Wm M Thomas (L. S.)
George Bonner
Osborne

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

No. 1969

INDIGENT

SOLDIER'S PENSION,

1899.

Name Wm M Thomas
County Chick

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,

Chick County. }
I, Wm M Thomas, hereby authorize
Wm A Wright com of Atlanta ga
to receive and receipt for the pension allowed, and request that he remit same to
Wm M Thomas at Homerville ga
by Express

Witness my hand and seal, this 15 day of January 1900.

Executed in presence of
Wm M Thomas (L. S.)
Mark

CODE SEC. 1284.
(For Those Already Enrolled.)
No. 2024

INDIGENT
SOLDIER'S PENSION,
1900.

Name Wm M Thomas
County Chick

WARRANT ISSUED
January 21 1900

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
W A W
Geo. W. Harrison, State Printer, Atlanta.
No data

Capt. Newberry Co. 1st Militia.
(Newberry)

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Clint County.

Personally appears Wm M Thomas of Clint 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 January 1861; that he is 76 years old and by occupation a farmer; that he ~~enlisted~~ served 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 of the 1st Regiment of Georgia Volunteers; that his physical condition is as follows: Old Age, Infirmary & Poverty

that his property consists of the following items

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 Clint county been allowed a pension for the year 1895

Sworn to and subscribed before me, this, the

2nd day of January 1899.

George Bonnell Ordinary.

State of Georgia,

Clint County.

I, George Bonnell 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 2nd day of January 1899.

AMT
YOUR
SEAL
HERE.

George Bonnell
Ordinary Clint County.

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

Capt Newberry (Newberry) Co 1st Militia.

Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Clint County.

Personally appears Wm M Thomas of Clint 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 1861; that he is 76 years old and by occupation a farmer; that he ~~enlisted~~ served 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 of the 1st Regiment of Georgia Volunteers; that his physical condition is as follows: Old Age, Infirmary & Poverty
Accompanied with Debility

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 1900. I have heretofore as a resident of Clint county been allowed a pension for the year 1899

Sworn to and subscribed before me, this, the

1st day of January 1900.

George Bonnell Ordinary.

State of Georgia,

Clint County.

I, George Bonnell 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 1st

day of January 1900.

AMT
YOUR
SEAL
HERE.

George Bonnell
Ordinary Clint County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch County.

I, Wm Thomas hereby authorize Wm Knight
cont ga of Attanta ga
 to receive and receipt for the pension allowed and request that he remit same to
Wm Thomas at Honolulu ga
 by express

Witness my hand and seal, this 10 day of December 1901.

Wm Thomas [L. S.]
more

Executed in presence of

George Bonadine
attorney

Clinch 13
Thomas W. M.

CODE SECTION 1284
 (For Those Already Enrolled.)

No. 105
To Lowndes 1903
INDIGENT
SOLDIER'S PENSION.
1901.

Name Wm Thomas
 County Clinch

WARRANT ISSUED
Jan 24 1901.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDLED TO
W Knight
 Geo. W. Harrison, State Printer, Atlanta
12/1/01

no data

Capt Newburns Co Pa Militia

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Clinch

County.

Personally appears

Wm Thamm

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 *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 *George T. T. T.* of *22nd* Regiment; that his physical condition is as follows:

Is old and feeble and unable to work at anything 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* 1901.

George Cornelius

Ordinary.

Wm Thamm
Mark

STATE OF GEORGIA,

Clinch

County.

I, *George Cornelius* Ordinary of said County, do certify that I am well acquainted with *Wm Thamm* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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* 1901.



George Cornelius

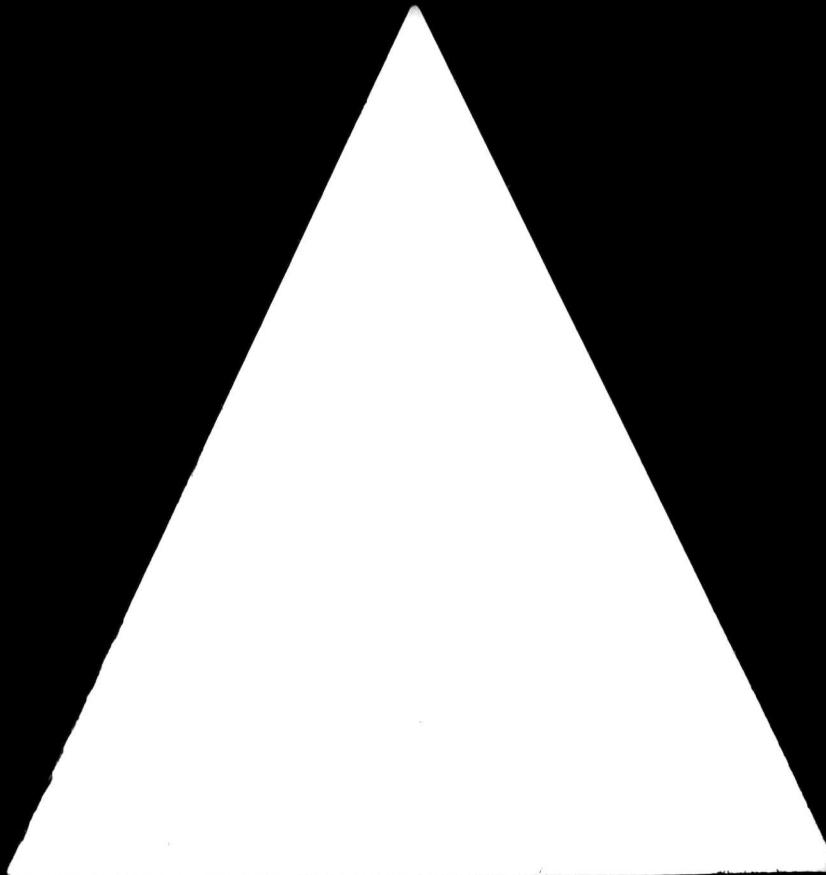
Ordinary

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,

Black County, }

KNOW ALL MEN BY THESE PRESENTS, That I, W. A. Thompson

of Black County, Georgia,

do hereby certify that W. A. Thompson my true and lawful attorney in fact, for

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

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

day of July 1895, W. A. Thompson [L. S.]

Executed in presence of us

W. A. Thompson

W. A. Thompson

DIRECTIONS.

Send money to me as follows, by W. A. Thompson

to W. A. Thompson

P.O.

Black County, Georgia.

W. A. Thompson

Thompson, W. A.
Black Co.
(For Those Already Enrolled.)

No. 3231

SOLDIER'S PENSION.
1895.

22 June 1896

Name W. A. Thompson

County Black

Disability gunshot through

Amount, \$ 50

3/2 1895.

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

W. A.

Geo. W. Harrison, State Printer, Atlanta.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,

Chick County.

KNOW ALL MEN BY THESE PRESENTS, That I,

W. A. Thompson

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 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.

W. A. Thompson [L. S.]

Executed in presence of us

W. K. Register
George Cornelius Ordinary

DIRECTIONS.

Send money to me as follows, by

Express to *D. W. P. O.*

County, Georgia.

W. A. Thompson

P. O.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Chick County.

I, *W. A. Thompson*

hereby authorize *W. A. Wright*

Compt. Genl

of *Fulton County Atlanta Ga*

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

W. 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.

W. A. Thompson [L. S.]

Executed in presence of

Minnie. Caroline
George Cornelius
Ordinary

you will recognize that
I am in Coffee County
for 1897

From June 1894
Thompson, W. A.
Chick Co.
(For These Already Enrolled.)

No. *3231*

SOLDIER'S PENSION.

1895.

Name *W. A. Thompson*

County *Chick*

Disability *gunshot wound*

Amount, \$ *50*

32

1895.

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDLED TO

W. A.

Chick Co. State of Georgia.

W. A.

Offer 1897
Thompson, W. A.
Chick Co.
(For These Already Enrolled.)

No. *1837*

INVALID

SOLDIER'S PENSION.

1898.

Name *W. A. Thompson*

County *Chick Ga*

Disability *gunshot wound*

Amount, \$ *50*

2/15

1898.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDLED TO

W. A.

Chick Co. State of Georgia.

W. A.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Clinch County.

Personally appears Sgt 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 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 Sgt in Company E, of 26th Regiment of Georgia Volunteers, Gordon's Brigade; that whilst engaged in such military service at the battle of Sader creek in the State of Virginia, on the 9th day of Oct 1864, he was wounded as follows:

gun shot wound Ball striking middle of left shoulder penetrating left lung Ball lodging near heart which causes hemorrhage of lungs constantly which disable him from being able work for a living. You will recognize that I am the identical man that I was the amount in Pierce County 1884

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 Feb 1895.

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 Feb 1895.

George Cornelius

Ordinary Clinch County.



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Clinch County.

Personally appears Sgt W. 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 Sergeant in Company E, of 26th Regiment of Georgia Volunteers, Gordon'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 Raymond and Howard also wounding the lungs and from said injury the applicant is disabled from manual labor by reason of adhesions of said lungs and hemorrhage from his lungs.

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, 1895. I have heretofore under said law as a resident of Clinch county been allowed an invalid pension of fifty Dollars, for the year 1894.

Sworn to and subscribed before me, this, the 22nd day of Jan 1895.

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 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 22nd day of Jan 1895.

George Cornelius
Ordinary Clinch County.



POWER OF ATTORNEY.

STATE OF GEORGIA,

Clintch 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 Homerille by Mail
 at Homerille 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

James Smith
George Cornelius
Ordinary

CODE SECTION 126

(For Those Already Enrolled.)

Do 9.02 1900
to Ben

INVALID

SOLDIER'S PENSION.

1899.

Name Wm A. Thompson
 County Clintch Ga
 Disability Wounded
 Amount, \$ 50.00 July
January 9th 1899

RICHARD JOHNSON,
 Commissioner of Pensions.

WARRANT HANDED TO

Wm

Geo. W. Harrison, State Printer, Atlanta

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clintch County.

I, Wm A. Thompson hereby authorize Wm A Wright
Comptroller Genl of Franklin County, Atlanta
 to receive and receipt for the pension paid hereon and request that he remit same to
Wm A Thompson by Ordinary Clintch County
 at Homerille 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. J. Howell

you will see our pay book of 1902
I am in Coffee County Ga
and now wish to draw in Clintch County
please favor me in the matter
Wm A Thompson

CODE SECTION 126

(FOR THOSE ALREADY ENROLLED.)

No. 2793
from Coffee 1902

DISABLED

SOLDIER'S PENSION

1903.

Name Wm A Thompson
 County Clintch
 Co. 49 Regiment
 Disability
 Amount, \$ 50
2/24 1903.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO

W

Geo. W. Harrison, State Printer, Atlanta

no path

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 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 Sergeant in Company E, of 26th Regiment of Georgia Volunteers, Gordon'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:

Was 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 manual labor by reason of adhesions of said pleura and hemorrhage 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 Eighty Dollars, for the year 1898.

Sworn to and subscribed before me, this, the 9th day of January 1899. POST OFFICE Tomlinson Ga

George Bondures 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 Bondures 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 9th

day of January 1899.

Ordinary.

George Bondures
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 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 Sergeant in Company E, of 26th Regiment of Georgia Volunteers, Gordon's Brigade; that whilst engaged in such military service in the State of Virginia, on the 19 day of October 1864, he was wounded, injured or diseased as follows:

Received 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 manual labor by reason of adhesions of pleura and hemorrhage from his lung causing him not able to do any work for a living and has no money for 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 Clinch County, been allowed an invalid pension of Eighty Dollars, for the year 1902.

Sworn to and subscribed before me, this the 1st day of June 1903. POST OFFICE Tomlinson 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 1st

day of June 1903.

Ordinary W. T. Howell
Clinch County.



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, Wm A Thompson hereby authorize
W A Wright of Fulton County
to receive and receipt for the pension paid hereon, and request that he remit same to
me by check or draft
at Milltown Ga
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 23
day of Jan 1904.

Wm Thompson [L. S.]

Executed in the presence of

H T Howell Esq

Thompson, William A.
Clinch Co.

(FOR THOSE ALREADY ENROLLED.)

No. 2622

DISABLED
SOLDIER'S PENSION
1904.

Name Wm A Thompson
County Clinch
Co. 1
Disability 100
Amount, \$ 20.00
FEB 24 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Clinch

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 of Atlanta Ga
to receive and receipt for the pension paid hereon, and request that he remit same to
me by check or draft
at Hamersville Ga
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 4
day of Jan 1905.

Wm A Thompson [L. S.]

Executed in the presence of

J. T. Dams
Ordinary

Thompson, Wm A.
Clinch County

(FOR THOSE ALREADY ENROLLED.)

No. 2624

DISABLED
SOLDIER'S PENSION
1905.

Name Wm A Thompson
County Clinch
Co. 1
Disability 100
Amount, \$ 20.00
MAR 1 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

7

Geo. W. Harrison, State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County.

Personally appears Wm 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 18 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 Sergeant in Company C, of 24 th Regiment of Georgia Volunteers Gordon'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 hit in the back over the region of left lung penetrating said lung an saw adhesion and dislocated arm and rendered him disabled 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 8 00 Dollars, for the year 1903.

Sworn to and subscribed before me, this the 25 day of Jan 1904. 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, J T Howell 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.

J 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, 1894.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clinch County.

Personally appears Wm 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 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 Sergeant in Company B, of 24 th Regiment of Georgia Volunteers Gordon's Brigade; that whilst engaged in such military service in the State of Georgia, on the 19 day of October 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 Gram said injury. the Applicant is disabled from manual labor by reason of adhesion of said pleura and because 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 5 00 Dollars, for the year 1904.

Sworn to and subscribed before me, this the 4 day of Jan 1905. 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, J T Dume 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 4 day of Jan 1905.

J T Dume Ordinary Clinch County.

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

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
same ordinary by mail
at Kennesville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 1st
day of Jan 1906.

W. A. Thompson [L. S.]

Executed in the presence of

C. T. Dume

Cons Section 1290.

(FOR THOSE ALREADY ENROLLED.)

No. 283

DISABLED SOLDIER'S PENSION 1906.

Name W. A. Thompson
County Clinch
Co. C Regiment 26
Disability 100%
Amount, \$ 15.00 JAN 26 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

The Pensioner's Name and Address, Co., Co., W. H. Thompson, Ga.

my date

Thompson, W. A.
Clinch Co.

Cons Section 1290.

(FOR THOSE ALREADY ENROLLED.)

No. 1580

DISABLED SOLDIER'S PENSION 1907.

Name W. A. Thompson
County Clinch
Co. E Regiment 26
Disability 100%
Amount, \$ 15.00

1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

The Pensioner's Name and Address, Co., Co., W. H. Thompson, Ga.

my 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
same ordinary by mail
at Kennesville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 1st
day of Jan 1907.

W. A. Thompson [L. S.]

Executed in presence of

C. T. Dume

3-50-15.00
2-100-25.00
1-15-1.50
1-5-5.00
75
\$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 Private in Company C, of 26th Regiment of Ga Volunteers Condon's Brigade; that whilst engaged in such military service in the State of Va, on the 17 day of Oct 1864, he was wounded, injured or diseased as follows:

Receiving a blow over the region of left lung resulting said lung becoming and forward also resulting the Pleura and from said injury the Applicant is disabled from manual labor by reason of adhesion of Pleura and hemorrhages from his lung. He is without means and not able to work for 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 Eight Dollars, for the year 1905.

Sworn to and subscribed before me, this

2nd day of Dec 1906.

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. Dume 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. Dume
Ordinary Clinch County.



NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1st, 1908.

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 Private in Company C, of 26th Regiment of Ga Volunteers Condon's Brigade; that whilst engaged in such military service in the State of Va, on the 17 day of Oct 1864, he was wounded, injured or diseased as follows:

Being wounded above the region of left lung resulting the lung becoming and forward also resulting the Pleura and from said injury the Applicant is disabled from manual labor by reason of adhesion of Pleura and hemorrhages 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 Eight Dollars, for the year 1906.

Sworn to and subscribed before me, this the

1 day of Jan 1907.

W. A. Thompson
J. T. Dume 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. Dume 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. Dume
Ordinary Clinch County.



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

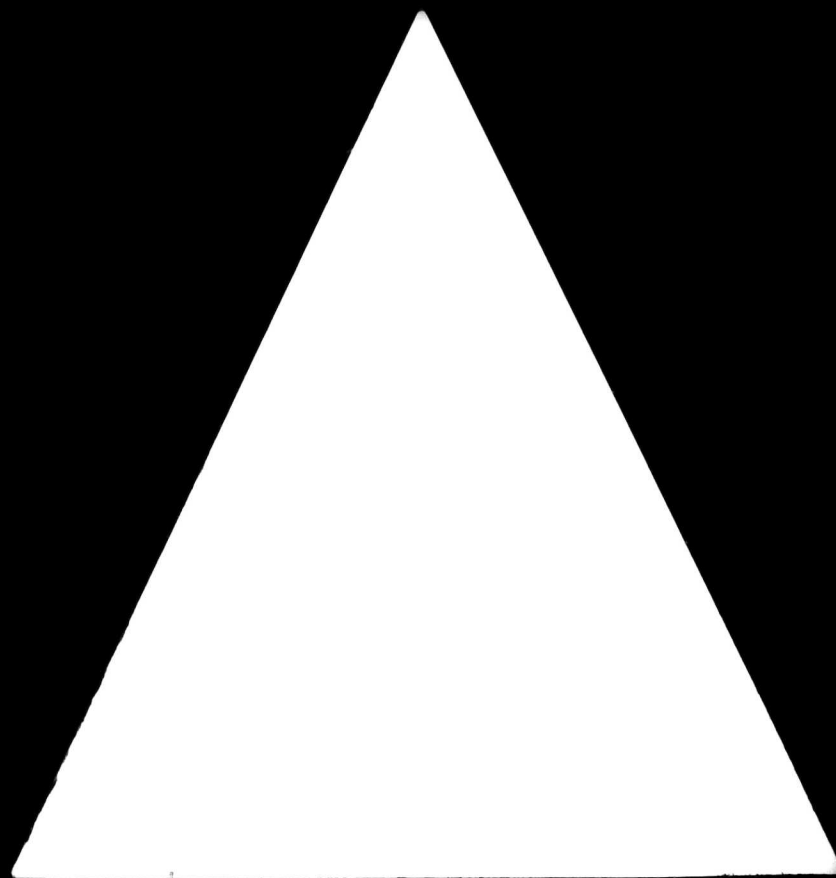
Ordinary Clinch County.

Homerille, Ga., February 1875

Executive department
Atlanta Ga
This man W A Thompson
applicant for Union claims
to have come from Pierce
County Ga. and that he
died there in 1864

Respectfully &c

George Sanderson
Ordinary



POWER OF ATTORNEY.
STATE OF GEORGIA.

Form No. 5.

Clinch
County.

Know all Men by these Presents, That I,

of

County, in said State, do hereby appoint

of *Attomlos 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 *11th* day of *April* 1891

Executed in the presence of us:

Leahy Elyth
George Brandon

DITTO.

If allowed, send amount by

me at *Wilmington*

and oblige,

William H. Wright



Wilmington
Clinch County
1891.

No. 1197

Widows' Pension

PAID TO

Mrs. Leahy Elyth

OF *Clinch*

COUNTY.

\$100.00.

Warrant Issued

1891

AND HANDED TO

Geo. W. Harrison, State Printer Atlanta.

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA,

Cherokee County,

Know all Men by these Presents, That I,

Delilah Timmerman

of *Cherokee*

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 Timmerman [L.S.]

Executed in the presence of us:

Christy Gibbs
George Cornelius

DIRECTORS.

If allowed, send amount by

Express

me at

Cherokee

and oblige,

Delilah Timmerman



Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA.

County of *Cherokee*

In person came before me, the undersigned Ordinary

in and for the County of *Cherokee*

Mrs. *Delilah Timmerman*, who being sworn according to law, says under oath that she is the widow of *John Timmerman*, who was a soldier in the service of the Confederate States, and served as a member of Company *24* 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 *February* 1864. That while in the Army, he was on the *Captives* list at *Chattanooga* 1864. (See Note No. 1)

and died in the *Prison* *Prison* in the *Custody* of the *Federal* Authorities in *1864*, and consequently has not been heard from since the *11th* of *April* 1864.

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 *12th* 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.

George Cornelius

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.

Widow's Pension

PAID TO—

Delilah Timmerman

Cherokee County

\$100.00.

Warrant Issued

AND HANDED TO

1891

Cherokee County
1891.

No. 1197

Affidavit for Three Witnesses.

Form No. 2.

STATE OF GEORGIA,

County of Clint } In person came before me, the undersigned Ordinary
Garrison, George Livest in and for said County, witnesses G. L. H.

and Minnie 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 Timmon of the County of Clint

State of Georgia, is the widow of John Timmon 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 (as the Confederate 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 Chickamauga and died in prison
1864, and consequently has not been heard
from since the war

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

Sworn to and subscribed before me, this, the
16th day of April 1891.

George Cornelius Ordinary.
G. L. H. Garrison
G. A. Livest
Minnie & Moore

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

Form No. 3.

STATE OF GEORGIA,

County of Clint } I, George Cornelius Ordinary
 in and for said County of Clint

State of Georgia, hereby certify that I am acquainted with Mrs. Delilah Timmon
 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.

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

Form No. 2.

STATE OF GEORGIA, County of Clint

I, George Lomax Ordinary in and for said County of Clint State of Georgia, hereby certify that I am acquainted with Mrs. Delila Zimmerman 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 Zimmerman 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.
George Lomax Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Clint County.

KNOW ALL MEN BY THESE PRESENTS, That I, Delila Zimmerman of Clint

County in said State, do hereby appoint William A. Wright 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 Zimmerman [L. S.]

Executed in the presence of us:

George Lomax Ordinary
George Lomax Ordinary

DIRECTIONS.

Send amount by Express to

me at Delila Zimmerman, and oblige
Delila Zimmerman

Geo. W. Harrison, State Printer.

WARRANT ISSUED
11
1895

WIDOW'S PENSION,
 for year ending February 15th, 1895.

PAID TO
Delila Zimmerman
 widow of John Zimmerman
Clint County.

WIDOW'S PENSION,
 for year ending February 15th, 1895.

WIDOW'S PENSION,
 for year ending February 15th, 1895.

No. 3254

1895.

FOR THOSE HEREIN PAID

Delila Zimmerman
Clint Co.

WARRANT ISSUED
11
1895

WIDOW'S PENSION,
 for year ending February 15th, 1895.

PAID TO
Delila Zimmerman
 widow of John Zimmerman
Clint County.

WIDOW'S PENSION,
 for year ending February 15th, 1895.

No. 758

1894.

FOR THOSE HEREIN PAID

Delila Zimmerman
Clint Co.

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

Form No. 2.

STATE OF GEORGIA, County of Clint

I, George Lomax Ordinary in and for said County of Clint State of Georgia, hereby certify that I am acquainted with Mrs. Delila Zimmerman 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 Zimmerman deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1893.

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

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Clint County.

KNOW ALL MEN BY THESE PRESENTS, That I, Delila Zimmerman of Clint

County in said State, do hereby appoint William A. Wright 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 Zimmerman [L. S.]

Executed in the presence of us:

George Lomax Ordinary
George Lomax Ordinary

DIRECTIONS.

Send amount by Express to

me at Delila Zimmerman, and oblige
Delila Zimmerman

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 the last 40 years That she is the Widow ofJohn Timmerman

who was a Soldier in Company

of the

29th

Regiment of

GeorgiaVolunteers, that he enlisted in said Regiment on or about the month of December1862 and served in the Army up to April 1864 That he lost hislife 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 Combs Ordinary.

Post-office

Superior ga

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

1862 That she is the Widow ofJohn Timmerman

who was a Soldier in Company

of the

29th

Regiment of

GeorgiaVolunteers, that he enlisted in said Regiment on or about the month of December1862 and served in the Army up to April 1865 That he lost hislife 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 while in the army 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 Combs Ordinary.

Post-office

Superior ga

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

Form No. 2.

STATE OF GEORGIA, County of Clint
I, George Cornelius Ordinary in and for said County of
Clint 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
21 day of January 1893.

{SEAL}

Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Clint County.

KNOW ALL MEN BY THESE PRESENTS, That I,

Delila Timmerman of Clint County, in said State, do hereby appoint
William A. Wright 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 affi-
davit; 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 January 1893.

Delila Timmerman [I.S.]

Executed in the presence of us:

DIRECTIONS.

Send amount by check to
me at Decatur Ga and oblige
Delila Timmerman

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

Form No. 2.

STATE OF GEORGIA, County of Clint
I, George Cornelius Ordinary in and for said County of
Clint 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 11 day of January 1893.

{SEAL}

Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Clint County.

I, Delila Timmerman hereby authorize Wm A Wright to
receive and receipt for the pension paid hereon and request
that he remit same to me at Homer ville Ga.

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

Delila Timmerman [I.S.]

Executed in the presence of

Sallie Horrocks
George Cornelius
Ordinary

Timmerman, Delila

Clint County

FOR THOSE HERETOFORE PAID

1896.

No. 3471

WIDOW'S PENSION,

for year ending February 15th, 1896.

PAID TO

Delila Timmerman

OF

Clint County,

widow of John Timmerman

WARRANT ISSUED

2/11 1896.

AND HANDED TO

W

Geo. W. Harrison, State Printer.

Widow's Pension

for year ending February 15th, 1893.

PAID TO

Delila Timmerman

OF

Clint County,

Warrant Issued

2/11 1893

AND HANDED TO

W

Geo. W. Harrison, State Printer, Atlanta.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Blitch

Personally comes Mrs.

Delila Timmerman

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

Blitch

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

continuously ever since for forty years 1847 That she is the Widow ofJohn Timmerman

who was a Soldier in Company

of the 24th Regiment ofGeorgia

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

December1862, 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 ^{expelled} in summer and died
in prison April 6th 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 Bonnell Ordinary.

Post-office

Under ga

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Blanch

Personally Comes Mrs.

Delila Timmerman

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

Blanch

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

continuously ever since January 1847 That she is the Widow ofJohn Timmerman

who was a Soldier in Company

of the 24th Regiment ofGeorgia

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

December1862 and served in the Army up to April 1865 That he lost hislife on the _____ day of April 1865 (State herefull particulars of the husband's death, when, where and from what cause.) (and thatwhile with his command was taken
sick with pneumonia and died
in the hospital from pneumonia
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, 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 Blanch County for the year ending February 15th, 1890, and now apply for the pension provided by law for the year ending February 15th, 1890.

Sworn to and subscribed before me, this

11th day of Jan 1890.George Bonnell Ordinary.Post-office Under ga

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

Form No. 2.

STATE OF GEORGIA, County of Clutch
I, George Cornelius Ordinary in and for said County of
Clutch 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 Jacob Timmerman
deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1896.

In Witness Whereof, I have hereto set my hand and affixed the seal of my office, this
the 7th day of January 1897.

George Cornelius Ordinary.

Form No. 2.

POWER OF ATTORNEY.

STATE OF GEORGIA, Clutch County.
I, Delila Timmerman hereby authorize Wm. A. Wright of
Atlanta Ga to receive and receipt for the pension paid hereon and request
that he remit same to me at Harrisburg Ga
in care of Ordinary
In Witness Whereof, I have hereto set my hand and seal, this
day of January 1897.

Executed in the presence of

Martha Cornelius
George Cornelius Ordinary

POWER OF ATTORNEY.

State of Georgia, Clutch County.
I, Delila Timmerman hereby authorize Wm. A. Wright of
Atlanta Ga to receive and receipt for the pension paid hereon and request
that he remit same to me at Harrisburg Ga
in care of Ordinary
In Witness Whereof, I have hereto set my hand and seal, this
day of January 1898.

Executed in the presence of

George Cornelius Ordinary

Simmerman Delila
Clutch County
For Those Heretofore Paid.
1898.
NO. 2684
WIDOW'S PENSION,
For year ending February 15th, 1898.
PAID TO
Delila Timmerman
OF
Clutch County,
Widow of Jacob Timmerman
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT ISSUED
2/2
AND HANDED TO
Wm
1898.
GEO. W. HARRISON, STATE PRINTER, ATLANTA

Simmerman Delila
Clutch County
FOR THOSE HERETOFORE PAID.
1897.
NO. 1255
WIDOW'S PENSION,
For year ending February 15th, 1897.
PAID TO
Delila Timmerman
OF
Clutch County,
Widow of Jacob Timmerman
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT ISSUED
2/1
AND HANDED TO
Wm
1897.
GEO. W. HARRISON, STATE PRINTER, ATLANTA

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 ofJohn Timmerman who was a Soldier in Company29th of the Georgia Regiment ofVolunteers, that enlisted in said regiment on or about the month of December1862 and served in the Army up to Nov 1865. That he lost hislife on the Nov day of Nov 1865. (State herefull particulars of the husband's death, when, where and from what cause.) Said Soldierhusband was taken sick whilewith his command and sentto a military Hospital inand died some time in1865

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 Cornelia Ordinary.

Post-office

Delila Timmerman

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 1847. That she is the Widow ofJohn Timmerman who was a Soldier in Company29th of the Georgia Regiment of GeorgiaVolunteers, that he enlisted in said regiment on or about the month of December1862 and served in the Army up to April 1865. That he lost hislife on the April day of April 1865. (State here

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

Said Soldier Husband was capturedby the Enemy about the timeof a certain battle duringthe war between the Statesin 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

7th day of January 1898.George Cornelia Ordinary.Post-Office Clinch

State of Georgia,

Clinch County.I George Cornelia

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 shehas continuously resided in this State since the 1847 day of 1847.Given under my official signature and seal this 7th day of January 1898.George CorneliaOrdinary of Clinch County.Official
Seal.

POWER OF ATTORNEY.

State of Georgia,

Clinch County.

I, Delila Zimmerman 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

Ordinary at Homer ville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 6th

day of January 1899.

Delila Zimmerman [L. S.]
mark

Executed in presence of

Helio R. Cornelia
George Cornelia Ord

Zimmerman Delila
Clinch County
For Those Hereofore Paid.

1899.

NO. 2582

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAID TO
Mrs. Delila Zimmerman

OF
Clinch County

Widow of John Zimmerman

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

1899.
AND HANDED TO

W. A. D.
GEO. W. HARRISON, STATE PRINTER, ATLANTA

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch County.

I, Delila Zimmerman 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 Zimmerman in care of mark at Homer ville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 4th

day of January 1900.

Delila Zimmerman [L. S.]
mark

Executed in presence of

George Cornelia
Ordinary
S. A. Siddons

Zimmerman Delila
Clinch County
To Those Hereofore Paid.

1900.

NO. 947

WIDOW'S PENSION,

For year ending February 15th, 1900.

PAID TO
Mrs. Delila Zimmerman

OF
Clinch County

Widow of John Zimmerman

JNO. W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1900.

AND HANDED TO
Wright

GEO. W. HARRISON, STATE PRINTER, ATLANTA

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Chiruch

Personally Comes Mrs.

Delila Simonson

who, being sworn, says on oath, that she is a bona fide resident of said county of Chiruch State of Georgia, and that she has resided in said State continuously ever since January 1st 1868 That she is the Widow of John Simonson who was a soldier in Company 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 1848

I have been allowed a pension as a resident of Chiruch 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.

Delila Simonson
Post-Office Defont Ga

State of Georgia,

County, ChiruchI George Cornelius Ordinary of said County, certify that I am well acquainted

with Mrs. Delila Simonson 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 1868

Given under my official signature and seal this the 6th day of January 1899.

Official
Seal.

George Cornelius
Ordinary of Chiruch County.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Chiruch

Personally Comes Mrs.

Delila Simonson

who, being sworn, says on oath, that she is a bona fide resident of said county of Chiruch State of Georgia, and that she has resided in said State continuously ever since July 1848 That she is the Widow of John Simonson who was a soldier in Company 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 1848

I have been allowed a pension as a resident of Chiruch 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 4th day of January 1900.
George Cornelius Ordinary.

Delila Simonson
Post-Office Defont Ga

State of Georgia,

County, ChiruchI George Cornelius Ordinary of said County, certify that I am well acquainted

with Mrs. Delila Simonson 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 4th day of July 1848

Given under my official signature and seal, this the 4th day of January 1900.

Official
Seal.

George Cornelius
Ordinary of Chiruch County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch County.

I, Delila Zimmerman hereby authorize
Wm. A. Wright of Atlanta Ga

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

Delila Zimmerman Homewood Ga

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

Executed in presence of

George Lindsay
Ordinary

Delila Zimmerman [L. S.]
1902

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch County.

I, Delila Zimmerman, hereby authorize
W. F. Wright of Fulton Co Ga

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

W. F. Howell at Homewood Ga

In Witness Whereof, I have hereunto set my hand and seal, this 7

day of January 1902.

Executed in presence of

W. F. Howell

Delila Zimmerman [L. S.]
1902

To Those Heretofore Paid.

1901.

No. 43.

WIDOW'S PENSION,

For year ending February 15th, 1901.

PAID TO

Mrs. Delila Zimmerman

OF

Clinch County.

Widow of John Zimmerman

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

Jan 14 1901,

AND HANDED TO

Wright

Geo. W. Harrison [L. S.]

4/1901

To Those Heretofore Paid

1902.

No. 2793.

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. Delila Zimmerman

OF

Clinch County,

Widow of

Co. Regiment

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

24 1902

AND HANDED TO

W

Geo. W. Harrison [L. S.]

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,

County of Chick

Personally Comes Mrs.

Delila Timman

who, being sworn, says on oath, that she is a bona fide resident of said County of Chick State of Georgia, and that she has resided in said State continuously ever since 1860. That she is the Widow of John Timman who was a soldier in Company B of the 29th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of Dec 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 Chick 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. George Counseling Ordinary. Post Office Deport ga

State of Georgia,

Chick County.

Ordinary of said County, certify that I am well acquainted

with Mrs. Delila Timman 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 1860 day of June 1901.

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

Official Seal.

George Counseling Ordinary of Chick County.

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,

County of Chick

PERSONALLY COMES MRS.

Delila Timman

who, being sworn, says on oath, that she is a bona fide resident of said County of Chick State of Georgia, and that she has resided in said State continuously ever since that date of 47. That she is the Widow of John Timman who was a soldier in Company B of the 29th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of Dec 1862, and served in the Army up to the last 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 the service of his country and I have no idea with

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 Chick 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. Delila + Timman Ordinary. Post Office Deport

State of Georgia,

Chick County.

Ordinary of said County, certify that I am well acquainted with Mrs. Delila Timman, 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 1847 day of — 1847.

Given under my official signature and seal, this the 7 day of January 1902.

Official Seal.

W. J. Howell Ordinary of Chick 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 Zimmerman hereby authorize
W. A. Wright of Thullon, Ga.

to receive and receipt for the pension paid heron, and request that he remit same to
W. Z. Howell at Homerlyville, Ga.

In Witness Whereof, I have hereunto set my hand and seal, this 11
day of January 1903.

Executed in presence of
W. Z. Howell

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch COUNTY.

I, Delila Zimmerman hereby authorize
W. A. Wright of Thullon, Ga.

to receive and receipt for the pension paid heron, and request that he remit same to
W. Z. Howell at Homerlyville, Ga.

In Witness Whereof, I have hereunto set my hand and seal, this
day of January 1904.

Executed in presence of
W. Z. Howell

Zimmerman Delila
Clinch County
To Those Heretofore Paid

1903.

No. 2629

WIDOW'S PENSION,
For year ending Dec. 31, 1903.

PAID TO
Mrs. Delila Zimmerman
OF
Clinch County,
Widow of John Zimmerman
Co. A Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
2629 1903.

AND HANDLED TO
W

Zimmerman Delila
Clinch County
TO THOSE HERETOFORE PAID.

1904.

No. 2398

WIDOW'S PENSION
FOR
YEAR ENDING DECEMBER 31, 1904.

PAID TO
Mrs. Delila Zimmerman
OF
Clinch County,
Widow of John
Co. A Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
FEB 24 1904.

AND HANDLED TO
W. Z. Howell

Geo. W. Harrison, State Printer, Atlanta.

ALLOWED HERETOFORE ALLOWED PENSIONS

ALLOWED HERETOFORE ALLOWED PENSIONS

For Widows Heretofore Allowed Pensions.

Form No. 1.

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 B 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. J. Howell, Ordinary.

Post-Office Delila

State of Georgia,

Clinch County.

I, W. J. 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 January 1903.

Official Seal.

Ordinary of Clinch County.

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

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 1.

STATE OF GEORGIA,

County of 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 B 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, 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 January 1904. W. J. Howell, Ordinary.

Post Office Delila

State of Georgia,

Clinch County.

I, W. J. 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 7 day of January 1904.

Official Seal.

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 Clinton County.

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

{ Seal. }

Ordinary of Clinton County.

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

1911
Tomlinson, Martha

Chick, County

Widow's Pension

UNDER ACT 1910.

County Chick

Name Martha Tomlinson

Widow of Marion Tomlinson

Age 50

E. J. Lindsey

J. W. LINDSEY,
Commissioner of Pensions.

Chas. F. Byrd, State Printer.

11/8/11 11/8-1911

© 2006 The Authors
Journal compilation © 2006 Blackwell Publishing Ltd

Apr 14/2
Jemima, Martha
Charles County

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

STATE OF GEORGIA,

Cherokee 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, Chickamauga Co. Ga.
2. How long and since when have you known Maria Connelley applicant? Since all his life.
3. How long and since when has she contiguously resided in this State? (Give date.) Since all his life.
4. When and to whom was she married? to Harris Connelley how do you know? by my own knowledge
5. How long and since when did you know Harris Connelley her husband? All my life.
6. When and where did Harris Connelley the husband of Applicant die? In Cherokee County, Ga. in May 1899.
7. Where the Applicant and her husband living together as husband and wife at the date of his death? yes.
8. If not, how long did they live apart before his death? -
- Were they divorced? no.
9. When, where and in what Company and Regiment did Harris Connelley enlist? yes 1862 4th Regt. Heavy Artillery in Company 4 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 Fort Sumter and how came you there? was captured April 6th 1865.
14. Was the husband of applicant personally present at surrender? nothing seen. If not where was he? he got sick and got furloughed before the surrender. when, where and for what cause did he leave Command? (Give date.) got sick and left before the surrender. By whose authority did he leave his Command? by order of Officer in Command. and how long was he granted leave? not over 2 days. How do you know all this? By seeing him in prison camp, staying with him and I know he performed the service. of unit a few days before the surrender.
15. For what cause, if you know of your own knowledge was he prevented from returning to his Command? was sick.
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 then was not seen. I found him on my sister's house. He then and my sister, Mary, testify.

Sworn to and subscribed before me this the 1st day of Nov 1911 J. T. Dams Ordinary,
of Cherokee County:

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Cherokee County,

Personally before me comes Maria Connelley who on oath says that they are freeholders of said County and that they know Maria Connelley 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 of cows and one mule.

Personal property	\$157.25
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:

<u>1/2 section in 66</u> Acres of land worth	\$60.00
<u>1 mule</u> Horses and Mules	\$20.00
<u>12 head</u> Cows	\$80.00
Other property	\$
Income and earnings	\$
Total Value of all property and effects	\$160.00

Sworn and subscribed before me this the 1st day of Nov 1911 J. T. Dams Ordinary,
of Cherokee County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cherokee County,

I, J. T. Dams Ordinary of said County do certify that, I know Maria Connelley 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 Maria Connelley 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 Maria Connelley Returned for Tax is for 1908 \$ nothing for 1910 \$ nothing
Sworn under my hand and official seal of office this 6th day of Nov 1911

SEAL. J. T. Dams Ordinary,
of Cherokee County

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

day of

1917

J. T. Damm

Ordinary,

Cliveden

of 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 witnesses 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. I. Maguire,

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 1906; 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. I. Maguire Ordinary,
CLINCH County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "I am an ordinary under the law and you will now answer me to each of the questions asked you and the evidence you give shall be taken as true unless you can prove the contrary."
2. Only witnesses who married prior to January 1st, 1891, are entitled.
3. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by him.
4. Affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by him.
5. Affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by him.

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County CLINCH
Name Mary E. Tomlinson
Widow of Amos E. Tomlinson
Company K
Regiment 29 Ga Inf.
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-10-1919

Ordinary's Certificate

STATE OF GEORGIA,

CLINCH. COUNTY.

I, W. V. Misgrove, 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. Misgrove 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.

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,
Bapt Printing Co. State Printer, Atlanta.

10-10-1919

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 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. Samuel 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 in 1st 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 Pension Roll in Echols County.

Sworn to and subscribed before me this the

10th day of Oct., 1919.

W. V. Misgrove Ordinary,
of CLINCH County.

(SEAL)

Mary E. Tomlinson
Mark

Questions for Witness as to Service of Husband and Marriage
STATE OF GEORGIA.

CLING. 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? Samule 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, near Stockton, 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? no
9. When, where and in what Company and Regiment did Samule Tomlinson, enlist? Nov. 1861, at Marien, Ga. Co. K. 29th. Ga. Regiment.
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? nearly 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

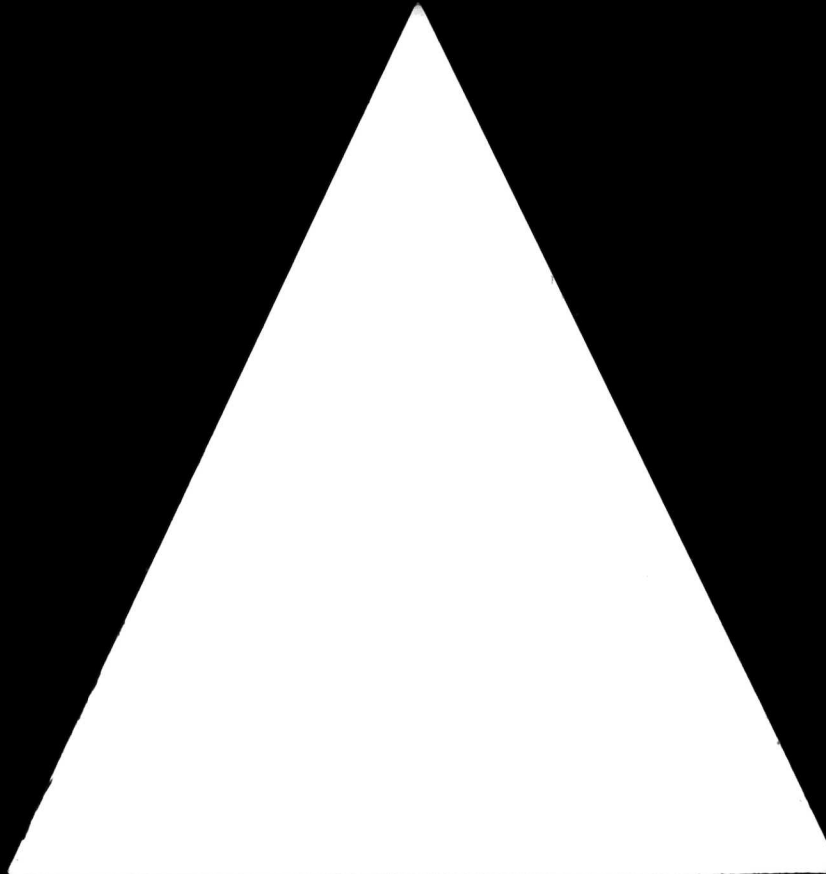
10th day of Oct. 1892.

M. J. Morgan Ordinary

of Cling. County.

(SEAL)

.....Ordinary
ofCounty.
(SEAL)



Samuelson, 1833
1133

No. 774 *Moses, Tomlinson*
Clinch Co

APPLICATION FOR

1/2 Arm

FOR CONFEDERATE SOLDIER.

Moses Tomlinson

County *Clinch*

Limb *Arm above elbow*

Amount *\$60*

Date of Warrant *July 10th 1860*

Page

1880

STATE OF GEORGIA.

Beluch County.

Personally appeared before me.....*Mason Tomlinson*.....of
the county of.....*Beluch*....., 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.....*Prusabara*.....
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.....
.....day of.....*June*.....1880.....
W. H. P. L. P. J. P.

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.

APPLICATION FOR

No. 774

Mason Tomlinson
Beluch Co

FOR CONFEDERATE SERVICE.

Mason Tomlinson

County

Beluch

Limb

Arm above Elbow

Amount

\$60

Date of Warrant

June 10/80

Page

180

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. GORTCHUR,
Secretary House Representatives.
WM. A. HARRIS,
Secretary Senate.
Approved, September 10th, 1879.

A. O. BACON,
Speaker House Representatives.
RUFUS E. LEWIS,
President Senate.
ALFRED H. CHAMBERLAIN, Governor.

STATE OF GEORGIA,

Colwich County.

Personally came, *John E. Norton* *W. B. & Lewis*
Reed J. M. Howells
who, being duly sworn, depose and say they are acquainted with *Thomas Tomlinson*
and know that he lost a *leg* in the military service during the late war;
that said *Thomas Tomlinson* 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*
5th day of *January*, 1880. *John E. Norton*
C. A. Smith Clerk S.C. *W. B. & Lewis*

STATE OF GEORGIA,

Colwich County.

of said I, *Locksmith* *Clerk of the* *Ordinary of* *Superior Court*
county, do certify that I am well acquainted with *Thomas Tomlinson*
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 *John E. Norton*
W. B. & Lewis and *J. M. Howells*
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.

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 *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 *24*th Regiment of *Georgia* Volunteers *Wilson*'s Brigade; that whilst engaged in such military service, at the battle of *Frankfort* in the State of *Georgia*, on the *31st* day of *August* 1864, he was wounded as follows: *On the arm and that the same was 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 *29th* day of *May* 1889, *Moses Tomlinson*
J. R. Allen
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 _____ 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:

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*
M. H. H.
SECRETARY EXECUTIVE DEPARTMENT.
No additional data.
W A W

STATE OF GEORGIA,

Clinch County.

PERSONALLY came

citizens of

being duly sworn, say that they are acquainted with

county, in said State,

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

are well satisfied that all the statements in his affidavit are true.

Sworn to and subscribed before me, this

2nd day of May 1887

L. R. Allen, J. P.

*Moses Tomlinson
William Touchton
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 1887

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,

do certify that I am well acquainted with

applicant in the foregoing affidavit, and am well satisfied that the statements made by him

in his said affidavit are true, and I know he is the individual he represents himself to be,

and that he resides in this county. 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

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 signa-

tures 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,

of

county, in said State, do hereby appoint

of *Atlanta Ga.* my true and lawful attorney in fact, for

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

to from the State of Georgia by reason of the injury received as aforesaid in the military ser-

vice 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 April

1887

Moses Tomlinson (L. S.)

Executed in the presence of us:

*Jas. A. Mathis
J. R. Allen, J. P.*

*Express to
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

State of Arm

Applicant Moses Tomlinson

County Clinch

Amount \$107.25

Date of Warrant Feb 21st

Entered on Record.

Jul 22 1890

M. N. H.

Secretary Department.

No additional data

M. A. Wright

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 No. 1, 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: His arm and the arm 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 22nd day of January 1890 } Moses Tomlinson
J. R. Allen S.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,
Chick County.

PERSONALLY CAME Moses Loulison
John A. Taylor and W. W. Allen
citizens of Chick county in said State,
who, being duly sworn, say that they are acquainted with Moses Loulison
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 Chick county, and we are well satisfied that all the state-
ments in his affidavit are true.

Sworn to and subscribed before me, this
29th day of January, 1880
J. R. Allen, J. P.

Moses Loulison
John A. Taylor
W. W. Allen

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,
Chick County.

I, George Cornelius Ordinary of said county,
do certify that I am well acquainted with Moses Loulison the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him in 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, 1880

George Cornelius
Ordinary Chick County.

When you sign this please
return to me
POWER OF ATTORNEY. M. J.

STATE OF GEORGIA,
Chick County.

Know all men by these presents, That I Moses Loulison
of Chick 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 Confed-
erate 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, 1880 Moses Loulison [L.S.]

Executed in the presence of us:

Chas. E. Roseman
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 *W. H. Harrison* 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* 189*1*.

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

Given under my official signature and seal, this *1st* day of *April* 189*2*.

George Cornelius
Ordinary *Clinch* County.

Tomlinson, Moses
1891
1890.
Tomlinson, Moses
Clinch Co.

No. *97*
APPLICATION FOR ALLOWANCE
FOR YEARS *1890* TO *1891*

Loss of Arm
Applicant, *Moses Tomlinson*
County, *Clinch*

Amount, *100*

Date of warrant, *Feb 24*

Entered on record

Feb 4 1891

W. H. Harrison

Notary Public

WARRANT HANDED TO

to all rights

Tomlinson, Moses
Clinch Co.
Feb 24 1891

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 31, 1891.

Name *Moses Tomlinson*
County *Clinch*

Disability *Loss of Arm*

Amount, \$ *100*

Entered on record *Apr 1* 1892.

W. H. HARRISON,

No date
Secretary of Veterans Department.

AGENT,
W. H. Harrison

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Clint County. }
PERSONALLY appears *Moses Lomlinson* of *Clint* 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* 1867; 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 *22nd* Regiment of *Georgia* Volunteers *Jackson*'s Brigade; that whilst engaged in such military service, at the battle of *Apalachicola* in the State of *Georgia*, on the *3rd* day of *August*, 1867, he was wounded as follows: *One aim 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 *1st* day of *January*, 1891, at *Clint* County, Georgia.
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,

Clint County. }
KNOW ALL MEN BY THESE PRESENTS, That I, *Moses Lomlinson* of *Clint* 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, at *Clint* County, Georgia. [L. S.]

Executed in the presence of us: *W. W. Griffin*, *C. H. Anderson*, *T. P.*
DIRECTION.
Send money to me as follows, by *Give me credit money* *your bank State for to take* P. O.
Clint County, Georgia.
Moses Lomlinson

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Clint County. }
PERSONALLY appears *Moses Lomlinson* of *Clint* 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*, 1867; 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 *29th* Regiment of *Georgia* Volunteers *Jackson*'s Brigade; that whilst engaged in such military service at the battle of *Apalachicola* in the State of *Georgia*, on the *thirty-first* day of *August*, 1867, he was wounded as follows: *One aim 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 *1st* day of *April*, 1892, at *Clint* County, Georgia.
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,

Clint County. }
Know all Men by these Presents, That I, *Moses Lomlinson* of *Clint* 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 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 *April* day of *April*, 1892, at *Clint* County, Georgia. [L. S.]

Executed in the presence of us: *J. E. Jackson*, *B. G. Galt*, *DIRECTION.*
Send money to me as follows, by *Pay money in R. W. Hardman* *to* *Shannon* P. O.
Clint County, Georgia.
Moses Lomlinson

STATE OF GEORGIA,

I, George Cornelius Ordinary of said county,

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

Given under my official signature and seal, this 13^E day of March 1893.

George Cornelius
Ordinary. Clich County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Know all Men by these Presents, That I, Clich COUNTY,

of Clich 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.

Executed in the presence of us

John B. Bepko
George Cornelius Chairman

DIRECTIONS.

Send money to me as follows, by Place the amount to my credit on acc. with the state P. O.
County, Georgia.

Hamilton, M.
Clich Co.
No. 557

SOLDIER'S PENSION.

1892 3

FOR THE YEAR ENDING OCTOBER 31, 1892.

Name Wm. Harrison

County Clich

Disability Loss of arm

Amount, \$ 100

Entered on record

1892.

BHS

W. H. HARRISON,

Secretary of Executive Department

AGENT.

W. A. Wright

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

W. A. Wright

Hamilton, M.
Clich Co.
(For Those Already Enrolled.)

No. 557

Soldier's Pension.

1894.

Name W. Harrison

County Clich

Disability Loss of arm

Amount, \$ 100

1894.

W. H. HARRISON,

Secretary Executive Department.

WARRANT HANDLED TO

W. A. Wright

Geo. W. Harrison, State Printer, Atlanta.

Heretofore Allowed Pensions.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

PERSONALLY appears

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* 18*64*; 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 *Jackson's* Brigade; that whilst engaged in such military service at the battle of *Jonesboro* in the State of *Georgia*, on the *29th* day of *August* 1864, he was wounded as follows:

My left arm from the shoulder to 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* 1894.

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

County, in said State, do hereby appoint *W. A. Wright* 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* 1894.

Executed in the presence of us: *J. E. Jackson* *J. S. Mathis*

DIRECTION.

Send money to me as follows, by *draft* after balance on *my* *draft* 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* 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 *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 *29th* day of *August* 1864, he was wounded as follows:

My 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 1894.

Sworn to and subscribed before me, this, the *13th* day of *March* 1894.

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.



George Cornelius Ordinary *Clinch* County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch County.

KNOW ALL MEN BY THESE PRESENTS, That I,

M. Tomlinson

County, State of Georgia, do hereby appoint

of *W. A. Wright*
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
 day of _____ 1895.

Executed in presence of us

M. Tomlinson

George Corneley ordinary

DIRECTIONS.

Send money to me as follows, by *When collected please to my credit - on my bank book for year to 1894*

P. O.

County, Georgia.

M. Tomlinson

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. H. Hardman 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 Corneley ordinary

Tomlinson M.
Clinch Co.

(For These Already Enrolled.)

No. *2854*

SOLDIER'S PENSION.

1895.

Name *M. Tomlinson*

County *Clinch*

Disability *Loss of Arm*

Amount, \$ *120.00*

3/15

1895.

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT FOR PENSION TO

Atty

On W. H. Harrison, State Printer, Atlanta.

No data

Tomlinson M.
Clinch Co.

(For These 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

Atty

On W. H. Harrison, State Printer, Atlanta.

No data

STATE OF GEORGIA

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Clint County.

Personally appears M. Lomblin of Chish

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 June, 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,
Clint County.

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

Given under my official signature and seal, this
day of February, 1895.



Ordinary County.

STATE OF GEORGIA,
Clutch County.

Personally appears M. Tomlinson of Clinch

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, 1890. I have heretofore as a resident of Clark county been allowed a pension of one hundred dollars, for the year 1889.

Sworn to and subscribed before me, this, the

day of February 1896.

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

STATE OF GEORGIA,
Cherokee County.

I, George Cornelius Ordinary of said County,

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

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



Ordinary blunk County

NAME OF VILLOKINEA

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 February, 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 day of February, 1895.



Ordinary Clinch County.

Clinch county been allowed a pension of one hundred dollars, for the year 1894.

Sworn to and subscribed before me, this, the

4th day of February, 1896.

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 day of February, 1896.



Ordinary Clinch County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch County,

I, M. Tomlinson hereby authorize William A Wright - confidential - 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 in Clinch County.

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

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 Chester at Stevenson Ga.

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

Executed in presence of

B G Mathis
D P Tomlinson

POWER OF ATTORNEY.

STATE OF GEORGIA,

Chick 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 my credit on a bank by State as the collector at Chick 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 Tomlinson
John May

POWER OF ATTORNEY.

STATE OF GEORGIA,

Chick 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. Mettlin
O. L. Tomlinson

Tomlinson M.
Chick Co.
ACT OF M. OCT. 1892.
(For These Already Enrolled.)
No. 1490
INVALID
SOLDIER'S PENSION.
1897.

Name M. Tomlinson
County Chick
Disability Left arm off
Amount, \$ 100
2/4 1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

W. A. M.

BY W. HARRISON, STATE PRINTER, AT WTA.

No later

Tomlinson, M.
Chick Co.
ACT OF M. OCT. 1892.
(For These Already Enrolled.)
No. 3
INVALID
SOLDIER'S PENSION.
1898.

Name M. Tomlinson
County Chick
Disability Left arm
Amount, \$ 100 w
1/6 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

W. A. M.

BY W. HARRISON, STATE PRINTER, AT WTA.

No later

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 Georgia) during the war between the States, and served as a Private in Company H, of 24th 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 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. POST OFFICE Stratton 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 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.



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 Georgia) during the war between the States, and served as a Private in Company H, of 24th 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 9th day of January 1898. POST OFFICE Stratton 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 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 1898.



George Cornelius
 Ordinary Clinch County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Chick 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 Chick by Chick at Homer ville 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

Gray Cornelius
Ordinary

Tomlinson M
Chick County

CODE SECTION 126

(For Those Already Enrolled.)

No. 408

INVALID

SOLDIER'S PENSION.

1899.

Name M. Tomlinson
County Chick
Disability Loss of arm
Amount, \$ 100.00
2/15 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

Wright

Geo. W. Harrison, STATE PRINTER, ATLANTA

No date

POWER OF ATTORNEY.

STATE OF GEORGIA,

Chick 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 Chick at Homer ville 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
Chick Co

(For Those Already Enrolled.)

No. 3032

INVALID

SOLDIER'S PENSION.

1900.

Name M. Tomlinson
County Chick
Disability Open amputation
Amount, \$ 100
Warrant issued Jan 13 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,

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 20th, 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 *M. Tomlinson* *16th* day of *January* 1899. POST OFFICE *Stoughton 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 Bonnell* 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. *George Bonnell* 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 *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 20th, 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 *M. Tomlinson* *13th* day of *January* 1900. POST OFFICE *Stoughton Ga*

George Bonnell 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 Bonnell* 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. *George Bonnell* 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 Donnellville

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. J. Howell Ordinary

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 Clinch Co by

at Donnellville IN WITNESS WHEREOF, I have hereunto set my hand and seal this 21st day of January 1901.

M. Tomlinson [L. S.]

Executed in presence of

W. J. Howell Ordinary

Tomlinson, M. (Moses)
Clinch Co

CODE SECTION 170
(For Those Already Enrolled.)

No. 3410

DISABLED

SOLDIER'S PENSION.
1901.

Name M. Tomlinson
County Clinch
Disability
Amount, \$ 1.50
3/19 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

M

Geo. W. Harrison, State Printer, Atlanta.

No data

Tomlinson, M. (Moses)
Clinch County

CODE SECTION 170
(For Those Already Enrolled.)

No. 2926

DISABLED

SOLDIER'S PENSION.
1901.

W-29 1901
Name M. Tomlinson
County Clinch

Disability
Amount, \$ 2.14
1.50 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Dr

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 Georgia) during the war between the States, and served as a Private in Company H, of 29th Regiment of Georgia Volunteers, Packman'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: lost his right arm which was amputated above elbow

He is now married to a lady and has two children and one son since his death.

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, } Postoffice Stockton Ga.
W J Howell Clergyman.

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 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.



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 Georgia) during the war between the States, and served as a Private in Company H, of 29th Regiment of Georgia Volunteers, Packman'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: lost his right arm which was amputated 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 1900.

Sworn to and subscribed before me, this the 21st day of January 1901, } Postoffice Stockton
W J Howell Clergyman.

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 1901.

W J Howell
 Ordinary of 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
by me
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. Howell

CODE SECTION 1903

(FOR THOSE ALREADY ENROLLED.)

No. 2741

DISABLED

**SOLDIER'S PENSION
1903.**

Name M. Tomlinson
County Clinch
Co. 29 Regiment
Disability loss arm
Amount, \$ 100

1903

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

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

no date

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 Douglasville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 29th
day of February 1904.

[L. S.]

Executed in the presence of

W. J. Howell

CODE SECTION 1904

(FOR THOSE ALREADY ENROLLED.)

No. 2625

DISABLED

**SOLDIER'S PENSION
1904.**

Name M. Tomlinson
County Clinch
Co. 29 Regiment
Disability loss arm
Amount, \$ 100.00

1904

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

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

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Clutch County.

Personally appears M. Tomlinson of Clutch 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 Georgia) during the war between the States, and served as a Private in Company H, of 29th Regiment of Georgia Volunteers, Talbot'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 Clutch 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 Clutch

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,

Clutch 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 29 day of Jan 1903.

Ordinary Clutch County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Clutch County.

Personally appears M. Tomlinson of Clutch 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 Georgia) during the war between the States, and served as a Private in Company H, of 29th Regiment of Georgia Volunteers, Talbot'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 Clutch 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. J. Howell Ord. Post-office Clutch

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,

Clutch 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 First day of February 1904.

Ordinary Clutch County.

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, Wm. J. Lindsey hereby authorize

William H. Wright of Atlanta

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

Colony, Clinch County by

at Tomberville La

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 23rd

day of January 1905.

Wm. J. Lindsey [L. S.]

Executed in the presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch COUNTY.

I, Wm. J. Lindsey hereby authorize

William H. Wright of Atlanta

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

Colony, Clinch County by

at Tomberville La

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

day of January 1906.

Wm. J. Lindsey [L. S.]

Executed in the presence of

Colony

Lindsey, Wm. J.
Clinch County
Cons. Section 1260
(FOR THOSE ALREADY ENROLLED.)

No. 2560

DISABLED
SOLDIER'S PENSION
1905.

Name Wm. J. Lindsey
County Clinch
Co. Regiment
Disability 100
Amount, \$ 100

MAR 1 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
W
Total Pension Paid and Paid in Advance, \$
GEO. W. LINDSEY, Treasurer, 1000 1/2 1/2 1/2 1/2

no date

Lindsey, Wm. J.
Clinch County
Cons. Section 1260
(FOR THOSE ALREADY ENROLLED.)

No. 2563

DISABLED
SOLDIER'S PENSION
1906.

Name Wm. J. Lindsey
County Clinch
Co. Regiment
Disability 100
Amount, \$ 100

JAN 26 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Wm. J. Lindsey
Total Pension Paid and Paid in Advance, \$
GEO. W. LINDSEY, Treasurer, 1000 1/2 1/2 1/2 1/2

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 Georgia) 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 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 Stratton

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, M. J. Dams 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.



Ordinary. Clinch County.

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

NOTE.—All vouchers and affidavits must bear date after January 1st, 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 Georgia) 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 28th, 1906. I have, heretofore, under said law, as a resident of Clinch County, been allowed an invalid pension of one hundred Dollars, for the year 1905.

Sworn to and subscribed before me, this the 23rd day of January 1906. } M. Tomlinson
J. T. Dams }
 Ordinary } Post-Office Stratton

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, M. J. Dams 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 23rd day of January 1906.



Ordinary. Clinch County.

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

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

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
St. James ordinary by mail
at Warrenton Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of Jan 1907. M. Tomlinson [L. S.]

Executed in presence of

W. A. Wright

One Section 150.
(FOR THOSE ALREADY ENROLLED)

No. 1579.

DISABLED SOLDIER'S PENSION 1907.

Name Moses Tomlinson
County Clinch
Co. 1st Regiment 29th
Disability Lost Left arm
Amount, \$ 11.75

1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Gen. W. H. HANCOCK, STATE PRINTER, ATLANTA.

no date

Audited May 23 1889.

Wm Wright
COMPTROLLER-GENERAL

Clinch
Maimed Soldiers.
Voucher No. 2228
Amount, \$ 100
Paid to Moses Tomlinson
For Loss of an
arm
May 18 1889.

Included in Warrant No.
issued to Treasurer.
W. H. Hancock 1889.

WARRANT CLERK.

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

Haw

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Clutch County.

Personally appears Moses Tomlinson of Clutch 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 186; 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 88, of 29th Regiment of Georgia Volunteers Lawson's Brigade; that whilst engaged in such military service in the State of Georgia, on the 21st day of August 1864, he was wounded, injured or diseased as follows: the ball of right arm at shoulder to any
3rd Co. 1st Regt. was amputated above the
elbow.

Deponent makes application for the pension to which he is entitled for the year ending October 24th, 1907. I have heretofore, under said law, as a resident of Clutch County, been allowed an invalid pension of One Hundred Dollars, for the year 1906.

Sworn to and subscribed before me, this the 1st day of Jan 1907.

M. Tomlinson
Postoffice Hamden 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,

Clutch 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 12th day of Jan 1907.

J. T. Dame
Ordinary, Clutch County.

AMS
JUN 1897

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

No. 2728

STATE OF GEORGIA.

EXECUTIVE DEPARTMENT.

Atlanta, Ga May 18 1889.

Mr Moses Tomlinson of the County
of Clutch 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 & 00/100 Dollars
for such disability, the same being the allowance due for the year ending October 24, 1889

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

By the Governor

W. H. Harrison

CLERK EXECUTIVE DEPARTMENT.

R. Gordon
GOVERNOR.

100

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

One Hundred & 00/100 Dollars,
per above voucher, this 18 of May 1889.

Moses Tomlinson
W. A. Wright

Audited

Feb 24 1890

Wm B Wright
COMPTROLLER GENERAL

Glinch

Maimed Soldiers.

Voucher No. 1722

Amount \$ 100.

Paid to Moses Tomlinson

For Loss of arm

Feb 22 1890

Included in warrant No.

issued to Treasurer.

Credit
Tax ack. 18
WARRANT CLERK.

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

W. A. Wright

Audited

Feb. 6 1891.

Wm B Wright
COMPTROLLER GENERAL

Tomlinson, Moses
Credit
of lost State for tax
Glinch
1891.

Maimed Soldiers.

Voucher No. 99

Amount \$ 100

Paid to Moses Tomlinson
for Loss of arm

Feb 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 *Cluick* 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.

By the Governor,

W. H. Harrison

CLERK EXECUTIVE DEPARTMENT.

\$ 100⁰⁰

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

One Hundred and 00/100 Dollars,
per above voucher, this *22* of *Feb* 1890

Moses Tomlinson

W. H. Harrison

1891.

No. 97

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga. Feb. 5 1891.

Mr. *Moses Tomlinson* of the County
of *Cluick* 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.

By the Governor,

W. H. Harrison

SECY EXECUTIVE DEPARTMENT.

\$ 100⁰⁰

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

One Hundred and 00/100 Dollars,
per above voucher, this *5* of *Feb* 1891.

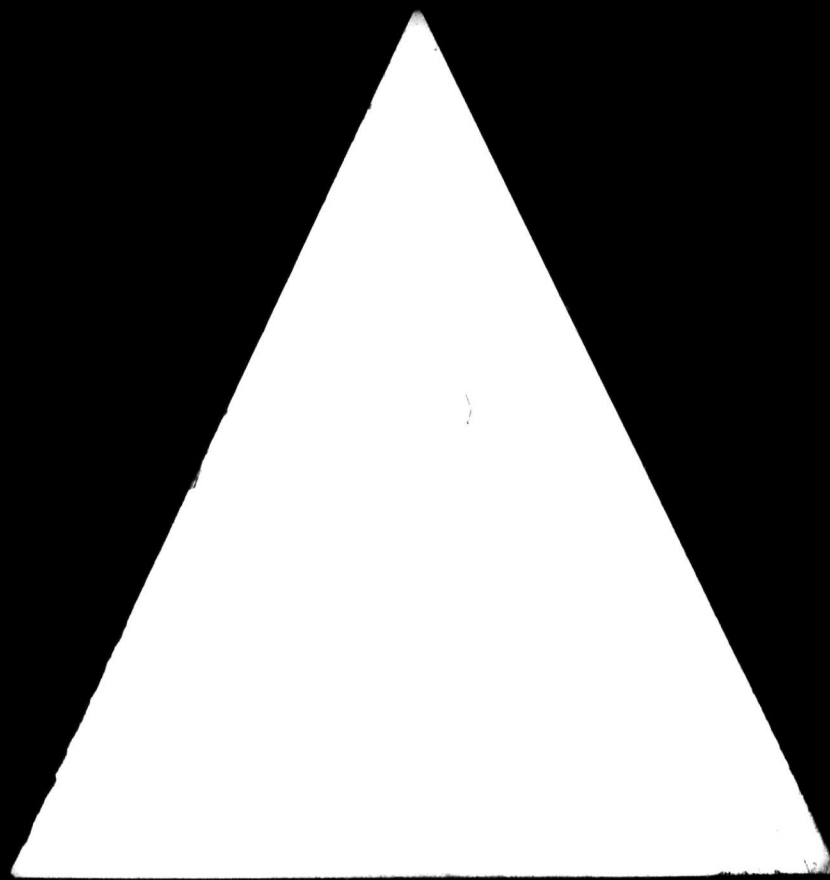
M. Tomlinson

W. H. Harrison

Clinch Co Ga March 28th 1893

To Mr W H Harrison my Dear Brother

And friends in earnest Jesus our Lord it is again that I
best myself to write you a few lines to ask you to
act as my attorney to draw my money from me and
send it to me at Stockton Ga as I have moved from
Coffey Co to Clinch I can state to you the case of my
money I had to make the move because I could not get
my land up there and I left there to get my share
more better I had a small place on the B & W Railroad and
they killed up my stock so bad that I could not have
any stock only what I could keep in said place and I owned
about 50 acres of land up there so I think that I am
still entitled to my money as I am yet in the
State of Ga so as I think that I give you my reason
I will close - By saying to you to write to me
to answer your letter to J. G. Sauls Stockton Ga in care
of Mr R S Higgins so as I will no when to go to the
address of J. G. Sauls so I still remain yours as ever
J. G. Sauls



POWER OF ATTORNEY.

STATE OF GEORGIA.

Clinch County. }

I, Thomas Clinch hereby authorize

W. A. Wright & Company of Atlanta Ga

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

Clinch at Atlanta Ga by Express (cash)

in care of ordinary Depot 1897.

Witness my hand and seal this

8th day of

1897.

W. A. Wright }
Thomas Clinch }
 Clerk of the Court }
 over

Pension Office Apr 1897
 The payee's name as not
 appear to have been given
Rich. G. Jones
Commissioner of Pension

Tomlinson Thomas
Clinch Co.
 No. 3027

INDIGENT PENSION

1897. / 89

Name Thomas Tomlinson

County Clinch

Approved 2/10 1897.

E. J. 159

WARRANT HANDED TO

M. A. W.

Geo. W. HARRISON, STATE SHERIFF, ATLANTA.

7/10/97

4/9/97

POWER OF ATTORNEY.

STATE OF GEORGIA,

Chick County.

I, Thomas Tomlinson hereby authorize

J. C. Wright Capt. Genl. Atlanta Ga
to receive and receipt for the pension allowed and request that he remit same to Thomas

Tomlinson at Hamersville Ga by Express (C.O.)

in care of Ordinary
Witness my hand and seal this 8th day of April 1897.

Executed in presence of

W. H. Legator } Thomas Tomlinson
Chick County Clerk

Pension app'd 2/10/1897
The physicians as not
affirmative but some
think of future
of Com. & Pension

Tomlinson Thomas
Chick Co.

No. 3027

INDIGENT PENSION

1897-1899

Thomas Tomlinson

Chick

Approved 2/10 1897.

2/10/97

WARRANT HAIRED TO

M. H. W.

4/10/97

Questions for Applicant.

STATE OF GEORGIA,

Chick County.

Thomas Tomlinson of said State and County, desiring to avail himself of the Pension Act approved December 16th, 1894, hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (give State, County and post office)
Thomas Tomlinson, District Church Co. Ga
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State?
Chick County, Ga. January 1894
3. When and where were you born?
in June 1827. Near Danbury Ga
4. When and where and in what company and regiment did you enlist or serve C.O. 57. 1894
Enlist in March 1894. "A. E. Day"
5. How long did you remain in such company and regiment?
8 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?
Discharged up 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 a long and honorable.
11. Upon which of the following grounds do you base your application for pension, viz.: first "age and poverty," second "infirmary and poverty" or third "blindness and poverty"?
Infirmary and poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight?
I infirmity and a poverty
"The nature of infirmity is total eye
and deaf"
13. What property, effects or income do you possess and its gross value?
None
14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any, did you make of same?
I had no property
15. In what County did you reside during those years and what property did you then return for taxation?
I resided in Chick County and had 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
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.

Sworn to and subscribed before me this the 10th day of April 1897.
George Tomlinson Ordinary.
Thomas Tomlinson Applicant.
of Chick County.

Every Question MUST be Answered.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA.

Chinich County.

SM 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? SM Register
Homeville in Chinich 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
Support Church Co Ga about forty years
4. Do you know of his having served in the Confederate army of the Georgia Militia? How do you know this? yes he served with him
in the Confederate war
5. When, where and in what company and regiment did he enlist? 4th Reg of March
1862 at Homeville Ga in Co "H" 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 summer
except while wounded at Homeville on furlow
8. What property, effects or income has the applicant? (Give your means of knowledge.) can't say positively but I don't 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? Can't say positively but I have not
heard of disposing of any
10. What is the applicant's occupation and physical condition? no occupation
now "Has a firmus" very old and feeble and
has what I suppose to be Abdominal trouble
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 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 feeble
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 8th day of April 1897. SM Register
George Cornelius Ordinary. Witness.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA.

Chinich County.

Personally and before me J. M. Caswell and J. B. 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 feeble and is
unable to support himself.
He was once 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

8th day of April 1897.

George Cornelius Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Chinich 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: SM 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 Chinich 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 Chinich 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 space are insufficient.

and has some abdominal trouble. I suppose
it to be dyspepsia, 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 22 day of April 1897.

George Cornelius Ordinary.

SM Register

Witness.

Witness my hand and seal of office, this 22 day of April 1897.

George Cornelius Ordinary
of Clunck 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.



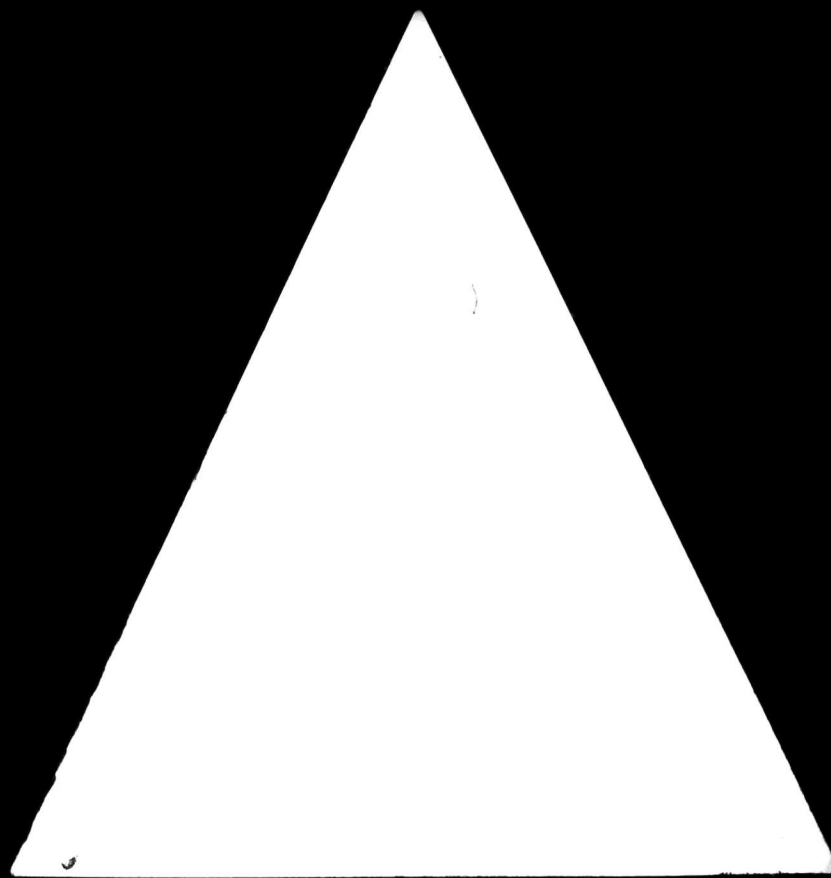
GEO. CORNELIUS, ORDINARY.

CLINOH. COUNTY.

Homerville, Ga. July 9th 1897

Richard Johnson Commissioner of Pensions
In regard to pension claims of Thomas
Johnson. I will state that the
pensions were sworn. but was
neglected by my self signing affidavits
respectfully &c

George Cornelius
Ordinary
Clunck Ga



Louchter, Charles
Clinch Co.

OK No. *1411*

**Confederate
Soldier's Application.**

✓ UNDER ACT 1910.

County *Clinch*

Name *Charles H. Tinsley*

Company *H. 4th Co. 1st Regt.*

Regiment

Approved

J. W. LINDSEY,

Commissioner of Pensions

CHAR. F. BYRD, State Printer, Raleigh.

9/2-11

STATE OF GEORGIA

County of Cherokee
 I, Charles C. Church of said State and County, hereby apply for the pension provided by Act of 1916 to Confederate Soldiers, and submit the sworn statement, with his affidavit 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). Charles C. Church, Cherokee County, Georgia
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? No
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service). Jan 1862, 2nd Co. 4th Regt. Cavalry, 1st Div. 1st Army
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge). April 1865
6. When and where was your Company and Regiment surrendered or discharged from the Service? At Sherman, Ga. 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. At Fort
9. Where was your Command when you left it? At Fort
10. When did you leave the Command? When discharged at Sherman
11. For what cause did you leave? Discharged
12. By whose authority did you leave? By the Commanding Officer
13. For how long was your leave granted? In what way? Not
14. Why did you not return to your Command after leave expired? Not
15. In what way were you prevented? Not
16. What effort did you make to return? Not
17. Were you captured during the war? No
18. If so, when, and where? In what prison were you held and when were you released? No
19. 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. 1905? (Make list by items and value). Land worth \$100,000, house, furniture, etc. \$10,000, stock, etc. \$5,000, etc.
20. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov. 1905. To whom and for what price? Land sold to the Government for \$100,000
21. 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). Land worth \$100,000, house, furniture, etc. \$10,000, stock, etc. \$5,000, etc.
22. What annual or monthly income or earnings of yourself and wife and the source derived have you? None
23. Are you drawing a pension of any amount from this State or the United States? No
24. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? Not

Subscribed and sworn to before me, this 1st day of April 1916.
John C. Church County Clerk

Soldier's Application

UNDER ACT 1916

Confederate

001 Jan 1911

Lowell Church
 Church Co.

County Cherokee

Name Charles C. Church

Company 2nd Co. 4th Regt. Cavalry

Regiment

Approved

J. W. LINDSEY,
 Commissioner of Pensions

CHAS. F. BYRD, State Printer, Atlanta.

9/20/16

QUESTIONS FOR WITNESS AS TO SERVICE

STATE OF GEORGIA.

Cherokee County.

William T. Howell of said State and County is hereby presented as a witness in support of the application of Charles T. Howell for the reason 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
Cherokee County, Georgia

2. How long and since when have you known Charles T. Howell the applicant?
I have known him since 1903

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 Cherokee County, Georgia near Dalton, Ga
He has been there since 1903. He is living in a small house

4. When, where and in what Company and Regiment did Charles T. Howell enlist during war from 1861 to 1865? (Give date and place)
He enlisted in the 1st Georgia Infantry, Co. A, at Dalton, Ga, in 1861

5. How did you obtain your information of this Service? By hearing him from
his own 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 of April 1865

7. When and where was his Command surrendered or discharged (give date and place)
April 1865, at Dalton, Ga

8. Were you personally present at the Surrender? Yes

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

12. When did he leave his Command? He left his Command in 1865 Where was his Command when he left it? At Dalton, Ga for what cause did he leave? Discharged

By whose authority did he leave? His own Command and how long was he granted leave? None How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) By the fact that he was discharged from the service and was granted leave to return to his home

13. In what way was he prevented from returning to his Command? He was not at
How do you know? By hearing him from

14. What effort did he make to return to his Command and how do you know? None

15. Was applicant captured as a prisoner? No If so, when and where? None

In what prison was he held? None and when released? None

Sworn to and subscribed before me, this the 2nd day of October 1910

J. T. Davis Ordinary

Cherokee County.

STATE OF GEORGIA.

Cherokee County.

William T. Howell of said State and County is hereby presented as a witness in support of the application of Charles T. Howell for the reason 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 property, if any, has been sold or given away by the applicant or his wife since 8 Nov 1908? (State if fully by name) 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 is the party to applicant? None

5. What disposition was made of the proceeds of the sale? None

6. Was the disposition of this property made in good faith and full value? Yes

Sworn to and subscribed before me, this the 2nd day of October 1910

J. T. Davis Ordinary

Cherokee County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Cherokee County.

I, J. T. Davis Ordinary of said County, certify that I know the applicant Charles T. Howell for Pension is 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 Charles T. Howell and William T. Howell who are freeholders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavits and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Receipts of Cherokee County show that Charles T. Howell and wife value for tax in 1906, \$ 12.00 for 1908, \$ 12.00 for 1910, \$ 12.00

Sworn under my hand and official seal of office this 2nd day of October 1910

J. T. Davis Ordinary

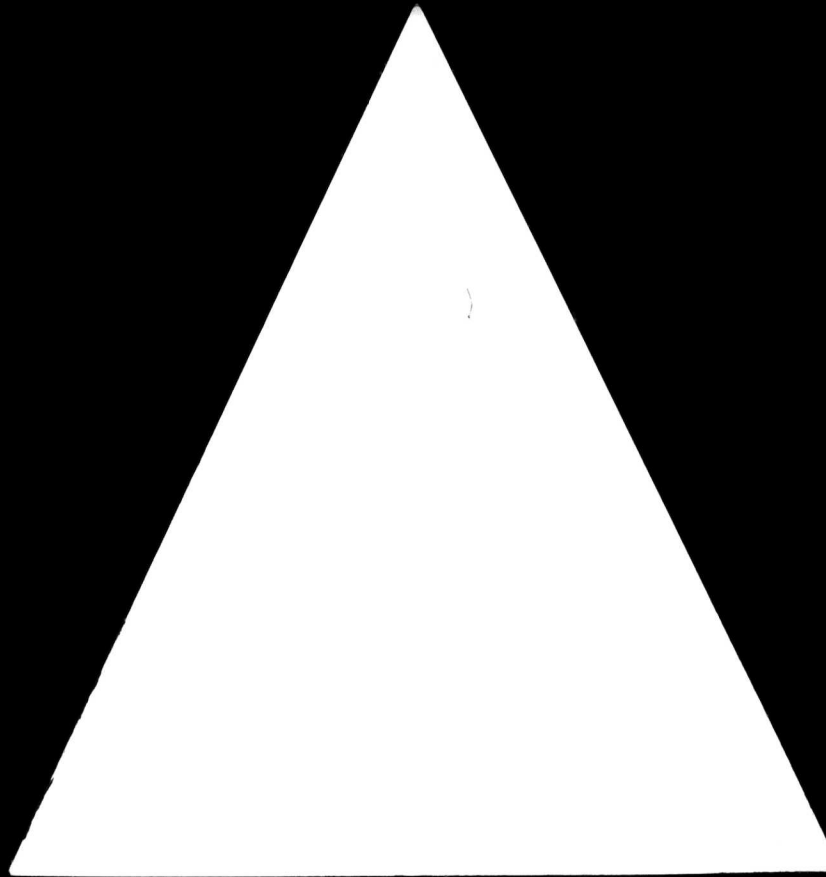
Cherokee County.

NOTED: In any case where the Ordinary shall refuse to issue an affidavit to the following facts, he shall be liable for the costs of the application and the costs of the witnesses and the costs of the Ordinary's certificate.

day of March 1912
J. T. Dams Ordinary
Chin County

10755

By the Court, the following is the order of the Court in the case of J. T. Dams vs. Chin County, the Court has ordered that the same be recorded in the public records of this County.



Tranvel, R. H.
Clinch Co.

No. 1907

INDIGENT PENSION.

(1907) 1907

Name R. H. Tranvel

County Clinch

Co. Clinch Light Battery, Regt.

Approved 1907

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

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

8/24/15 9/15/06

POWER OF ATTORNEY.

STATE OF GEORGIA,
Clinch County,

R. H. Tranvel
W. A. Wright

do hereby and accept for the purposes allowed and require that he send same to
Ordinary at Thomson & Co. mail.

Witness my hand and seal, this 16th day of April, 1907.

Attest:
J. W. Lindsey
Ordinary

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch COUNTY.

I, R. St. Trammell 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 the will of mail

Witness my hand and seal, this 26th day of April 1905.
R. St. Trammell [L. S.]
man

Executed in presence of
J. T. Dams
Ordinary

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Clinch COUNTY.

R. St. Trammell of said State and County, desiring to avail himself of the Pension Act (Section 1264, Code), hereby submits his proofs, and after being duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside? (Give State County and post-office).
R. St. Trammell State of Georgia Clinch Co. Abbeville Ga
2. How long and since when have you been a resident of this State?
Have been in this State 48 years
3. When and where were you born?
at South Carolina May 9th 1846
4. When and where and in what company and regiment did you enlist, or serve?
Clinch Co. 1st Regt. 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. Moultrie 13th day January 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. Moultrie 13th January 1864
9. How much can you earn (gross) per annum by your own exertions or labor?
Nothing nearly 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 cannot not do but very little work not enough to earn my support & not done anything in the last 20 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 in Georgia
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, 1900 and 1902? What pay did you receive in each year?
I was not employed & claim 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 & no more old children one 18 yrs old one 14 yrs old one 12 yrs old 11 yrs 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.
J. T. Dams Ordinary,
of Clinch County.
R. St. Trammell Applicant.

Every Question MUST Be Answered.

Pension office 9/29/05

not an aged man, it is not sufficient for him to state infirmity, but they must as a result of their condition say, in what way his infirmity has so impaired his earning capacity that he cannot earn the support at his time of life or calling and must be provided.

J. T. Lindsey
Com. of Pensions.

Trammell, R. St.
Clinch Co.
Oct 1902

INDIGENT PENSION.

1905 1907

Name R. St. Trammell
County Clinch
On the 1st day of May 1905
Approved 190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

9/27/06

QUESTIONS FOR WITNESS.

STATE OF GEORGIA.

Clinch COUNTY.

Henry Minitt & Thos. P. Ornel of said State and County, having been presented as a witness in support of the application of R. H. Trammell 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? Henry Minitt and Thos. P. Ornel of Clinch County, Ga.
2. Are you acquainted with R. H. Trammell 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, in town on State 14 years.
4. When, where and in what company and regiment did he enlist, and how do you know? Clinch Light Battery, artillery.
5. Were you a member of the same company and regiment? Yes.
6. How long did he perform regular military duty? about 9 months.
7. When and where was his command surrendered? He was captured at Fort McAllister 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? Captured 13 Dec 64. For what cause? Made Prisoner.

When did he leave his command? Captured 13 Dec 64. By what authority he left? By being with him. How do you know all of this?

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 don't know that he has.
14. What is the applicant's occupation and physical condition? Farmer - in weak condition.
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 left home.
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 80 general health.
19. Who compose family? What property have they? Children's age and their earning capacity? His wife 50 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 23rd day of January 1904. Henry Minitt Thos. P. Ornel Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA.

Clinch COUNTY.

Personally seen before me Drs L. R. Thompson and A. H. Calhoun, both known to me as reputable physicians of said County, who being severally sworn, say on oath that they have examined carefully R. H. Trammell applicant for pension under Section 1254, Code, and after

such personal examination say that his general physical condition is as follows: Very fine, big, large, enlarged + tender chronic indigestion and constipated bowels. This chronic constipation 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.

Sworn to and subscribed before me, this, the 26th day of Apr 1904. J. T. D. Ornel Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Clinch COUNTY.

I, J. T. D. Ornel Ordinary, in and for said County, hereby certify that the applicant R. H. Trammell resides in said County, and has been a bona fide resident of this State since the day of 1864 and that the witnesses, viz: Henry Minitt and Thos. P. Ornel are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digest of Clinch County shows that applicant returned for taxation in his name in 1896 nothing Dollars of property, and in 1898 nothing Dollars of property, in 1900 nothing Dollars of property, in 1901 nothing Dollars of property, in 1902 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 1904. J. T. D. Ornel Ordinary.

NOTE: 1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God." 2. In every case the Ordinary must certify in the declaration of the witness, and so in the declaration of the proof as above set out.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clutch COUNTY.

I, B. H. Dravell, hereby authorize
A. A. Wright of Atlanta Ga

to receive and receipt for the pension allowed, and request that he remit same to
J. T. Dume Ordinary at Kennesaw Ga

by mail

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

B. H. Dravell [L. S.]

Executed in presence of

J. T. Dume

Dravell, B. H.

Clutch Ga

Case No. 1260
(FOR THOSE ALREADY ENROLLED)

No. 4655

INDIGENT SOLDIER'S PENSION 1907.

Name B. H. Dravell
County Clutch
Co. Light Battery ar
Regiment

WARRANT ISSUED
1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

John W. Lindsey, Commissioner of Pensions.

update

RECEIVED THE INDEMNITY OFFICE

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Clinch County.

Personally appears P. H. Trawell 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 1877; 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 one year in Company Almon Light Battery, of 1st 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 Clinch County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 12 day of Jan 1907. P. H. Trawell
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 P. H. Trawell the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

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

J. T. Adams
Ordinary Clinch County.



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

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 J. T. Dams

of said County, who, after being sworn, on oath says that he knew R. E. 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. Dams

CERTIFICATE OF ORDINARY

GEORGIA, Clinch County.

I, Kate C. Pafford, Ordinary of said County, do certify that I personally know J. T. Dams, 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. E. 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, \$ 360.00 (\$ 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.

Hameriville Ga 9/13/06
Hon Jno. W. Lindsey
Commissioner of Pension
My Dear Sir,
Atlanta Ga

I herewith return to you application of R. E. Trowell. As H. R. Higgin & A. H. Calhoun have amended this 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. Dams
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 18, 1904)

GEORGIA, Clinch County.

Personally before me, the Ordinary of said County, comes J. T. Dams

of said County, who, after being sworn, on oath says that he knew R. H. Trammell 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. Peffer, Ordinary
Clinch County

(Seal of Ordinary)

CERTIFICATE OF ORDINARY

GEORGIA, Clinch County.

I, Kate C. Peffer, Ordinary of said County, do certify that I personally know J. T. Dams, 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. Trammell 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. Peffer 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, at the case may be) of _____ who died without leaving 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 instructed.
- 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 recorded, to the Pension Department.

Namersville Ga 7/13/06
Hon Jas. W. Lindsey
Commissioner of Pension
Atlanta Ga
My Dear Sir:

I herewith return to you application of R. H. Trammell. Dr. H. R. Higgin & A. H. Calhoun have amended their original or added to the Certificate. As to Trammell'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. Ed Certificate attached.

Yours very truly
J. T. Dams
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 18, 1904)

GEORGIA, Clinch County.
Personally before me, the Ordinary of said County, comes J. T. Dams
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, 1906,
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. Peffer, Ordinary
Clinch County
(Seal of Ordinary)

CERTIFICATE OF ORDINARY

GEORGIA, Clinch County.
I, Kate C. Peffer, Ordinary of said County, do certify
that I personally know J. T. Dams, 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 1902, 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, 1906.
(Seal of Ordinary) Kate C. Peffer, 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, at 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.

Hamerwill Ga 9/13/06
Hon Jno. W. Lindsay
Commissioner of Pension
My Dear Sir, Atlanta Ga

I, herewith return to
you Application of R. H. Trowell.
Do H. R. Higgin & A. H. Calpepper have
amended I their original or added to
the Certificate. And to Trowell's Application
He is in very feeble health and
had 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. Dams
Ordinary Clinch Co.

Mrs. Kate C. Pafford
Ordinary, Clinch County
Monterville, Ga.

Itemized Statement of funeral expense
of R.H. Trowell, deceased soldier pensioner.

I Casket ----- \$ 85⁰⁰
I Suit ----- 15⁰⁰
\$ 100⁰⁰

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.

Sworn to and subscribed before me this Feb. 15th. 1933.

Kate C. Pafford
Ordinary Clinch County, Ga.

J.T. Dame

I have this day received from Kate C. Pafford, Ordinary of Clinch County, Georgia, \$30.00 payment of 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
Monterville, Ga.

Feb. 25th. 1933.

Hon. S.M. Myers,
Commissioner 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)

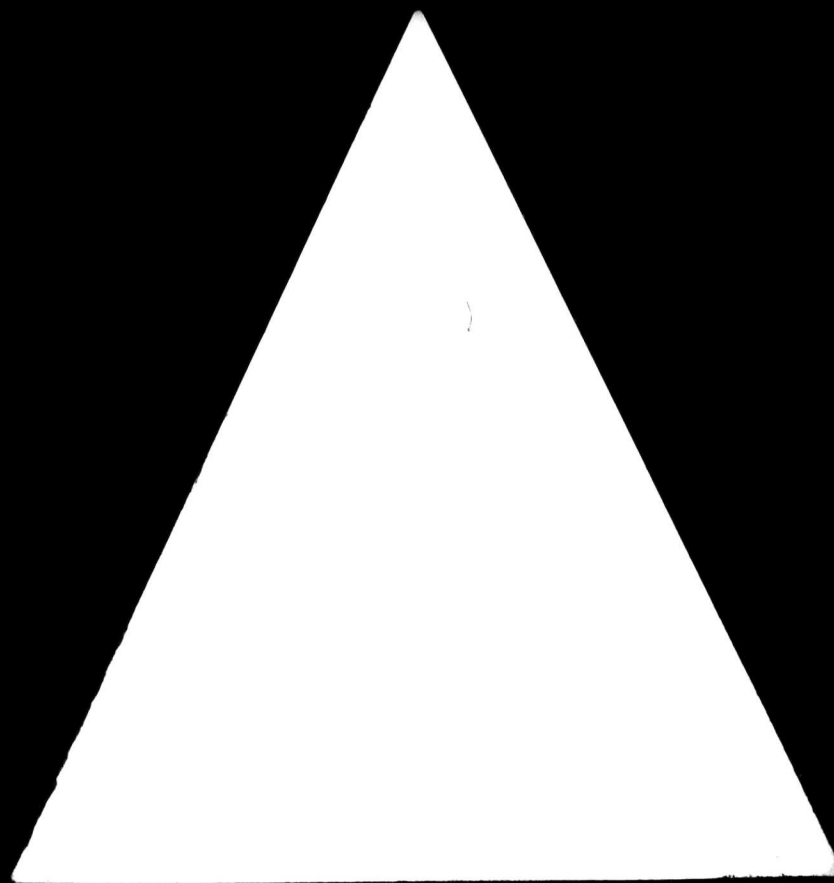
Kate C. Pafford, Ordinary

(Ordinary will please complete and return immediately to A. L. Hanson, 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, 1934.

J.T. Dame



Chas. C.
G. H. Jan 1910

INDIGENT PENSION

✓ 1909

Name *Freeman W. Wain*

County *Clatsop*

Co. *I* *2nd Ba* Regt.

Approved 1909

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Astoria, Or.



922-11

STATE OF OREGON

POWER OF ATTORNEY.

Chas. C. County

W. A. Hest *Freeman W. Wain*

Chas. C. *W. A. Hest*

W. A. Hest *Freeman W. Wain*

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cherokee COUNTY.

I, Freeman S. Warner hereby authorize

W. A. Wright of attention to

to receive and receipt for the pension allowed and request that he remit same to J. T. Damm

at Normanton by mail

Witness my hand and seal, this 2nd day of May 1907

Freeman S. Warner [L. S.]

Executed in presence of

J. T. Damm

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA.

Cherokee COUNTY.

I, Freeman S. Warner of said State and County, desiring to avail himself of the Pension Act (Section 1342, Code), hereby certifies his present and after being duly sworn and subject to the following questions:

What is your name and rank? Freeman S. Warner, Private, 1st Regt. Cavalry

2. How long and since when have you been a resident of this State? born in Georgia and have resided here since 1857

3. When and where were you born? Warren Co. Ga. July 12th 1827

4. When and where and in what company and regiment did you enlist or serve? April 15th 1864 Co. B. 1st Regt. Cavalry, 1st South Georgia Cavalry.

5. How long did you remain in such company and regiment? November 1st 1864 to April 1st 1865 was in captivity in New Richmond, South of the line.

6. When and where was your company and regiment surrendered and discharged? I do not know. When my Company and regiment were disbanded I was discharged at New Richmond April 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? I was detached & discharged at New Richmond April 1865.

9. How much was your salary (gross) per annum by your own employment or labor? nothing

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

11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? infirmary and poverty.

12. If upon the first ground, state how long you have been in such condition that you could not earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind and when and where you lost your sight. Could not earn support in my own family and suffering badly from rheumatism and other ailments of the system in my old age.

13. What property, real and personal, or income, do you possess, and its gross value? nothing

14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904, 1905, 1906, 1907, and what disposition, if any, by sale or gift, have you made of same? I had none.

15. In what County did you reside during those years, and what property did you then return for taxation? Cherokee Co. Ga. and returned nothing for taxation.

16. How were you supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? by wife and myself I could not 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? no - a few chickens & eggs.

18. What was your employment during 1901, 1902, 1903, 1904, 1905, 1906 and 1907? What pay did you receive in each year? nothing to farm, no salary, no other labor.

19. Have you a family? If so, who composes such family? Give their means of support. Have they a home, land, 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? none.

21. Have you ever made an application for pension before? yes.

22. How many applications have you ever made and under what name? one, under name of J. T. Damm.

Given to and subscribed before me this 2nd day of May 1907.

Freeman S. Warner Applicant.

Every question must be answered

Warren Freeman & Church Co.
C.H. Co. 1910
INDIGENT PENSION.
1907
Warren Freeman & Church Co.
C.H. Co. 1910
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO
1907

QUESTIONS FOR WITNESS.

STATE OF GEORGIA.

Cherokee COUNTY.

J. R. Davidson 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 the following questions, depose and answers as follows:

1. What is your name and where do you reside? J. R. Davidson Cherokee 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 Cherokee Co. Ga. he has been in this State all his life.
4. When, where and in what company and regiment did he enlist, and how do you know? April 1st 1864 at Cherokee Wayne Co. Ga. Co. 3rd Regt. 1st Div. 1st Army Corps
5. Were you a member of the same company and regiment? Yes
6. How long did he perform regular military duty? Until June 4, 1865
7. When and where was his command surrendered? At Bennett's Church in 3d Tennessee in April 1865.
8. Were you present when it surrendered? I was
9. Was applicant present? He was
10. If he was not present, where was he? He was in the hospital at the time.
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 possess 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? Applying to form his physical condition and not able to work by his support.
15. Is the applicant unable to support himself by labor of any sort; if so, why? He is unable to support himself by his own body, supported and not able to work.
16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? By what with his land 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 disabled and not able to work.
19. Who compose family? What property have they? Children's ages and their earning capacity? himself with his 2 children
20. What interest have you in the recovery of a pension by this applicant? None
Sworn to and subscribed before me, this 1st day of May 1907.
J. R. Davidson Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA.

Cherokee COUNTY.

A. H. Culp and J. R. Davidson both sworn to be respectable physicians of said County, who, being separately sworn, say on oath that they have examined carefully Freeman L. Walker applicant for pension under Section 1254, Code, and after such personal examination say that the present physical condition is as follows:

He is unable to work by his own body, supported and not able to work.
and that we have no interest in said pension being allowed.
Sworn to and subscribed before me, this 1st day of May 1907.
J. R. Davidson Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Cherokee COUNTY.

I, J. T. Brown 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 his life 1864 and that the witnesses, viz: J. R. Davidson A. H. Culp are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digest of Cherokee County shows that applicant returned no 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 True made in good faith.
Witness my hand and seal of office, this 1st day of May 1907.
J. T. Brown Ordinary.

Cherokee County.
I, before any questions are answered, the Ordinary shall answer questions and the witnesses in the following words: "You shall take solemn oath to each of the questions asked of you and the witnesses you shall give will be the whole truth, so help you God." If applicant refuses to be examined, it shall operate as a confession.
If the Ordinary does not certify in the certificate of the witness, and so in the certificate of the great seal of the State.

Sworn to and subscribed before me, this the

8 day of May 1907

Ordinary

J R Dickerson

1997, 1998, 1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 2676, 2677, 2678, 26

Before any questions are answered, the Officer will make decisions and the witnesses in the following order: 1. The Officer will ask if the defendant asked for help, and the answers you state give will be the basis for the decision.

2. The defendant will be asked if there was any force.

3. The Officer will ask the defendant if the defendant is the owner of the weapon, and so in the possession of the weapon at the time of the crime.

Weathering, John L.
OK for 1905
Lincoln County

No. *112*

**INDIGENT PENSION.
1903.**

Name *Hubert J. L.*

County *Lincoln*

Co. *D. 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

ORDINARY OF LINCOLN COUNTY

Wm. S. Howell

Subscribed in the presence of

John S. Matthews [L.S.]

Witness my hand and seal, this

26th day of *August* 1903.

to receive and accept for the pension allowed and request that he remit same to *W. S. Howell*

STATE OF GEORGIA,
Lincoln County.

POWER OF ATTORNEY

John S. Matthews [L.S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clint COUNTY.

I, John S. Westberry hereby authorize
W. A. Wright of Clint County,

to receive and receipt for the pension allowed and request that he remit same to W. A. Wright
at Honolulu by mail

Witness my hand and seal, this 26 day of August 1903

Executed in the presence of

W. A. Wright

John S. Westberry [L.S.]

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Clint COUNTY.

John S. Westberry of said State and County, desiring
to avail himself of the Pension Act (Section 1864, Code), hereby submits his proof, and after being duly sworn
true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (give State, County and post-office)
John S. Westberry of Clint County, Georgia
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 South County in 1838
4. When and where and in what company and regiment did you enlist or serve? in Company B
1st Georgia Infantry at Fort Mifflin Pa in 1861
was transferred to Co. "D" 1st Georgia
5. How long did you remain in such company and regiment? until April 1862 was transferred to Co. "D" 1st Georgia
in the 12 Georgia Regiment and served there until
6. When and where was your company and regiment surrendered and discharged? at
Retired by disability
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? was ordered out on May 1862
at the Battle of Thermopylae Pa
9. How much can you earn (gross) per annum by your own exertions or labor? about \$25 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, "infirmary and poverty," or third, "blindness and poverty"? all are true
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 been for
3 years 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 that
years mention a house
15. In what County did you reside during those years, and what property did you then return for taxation?
in 1894 and I was in South County the Ballenger in Clint
16. How were you supported during the years 1899, 1900, 1901 and 1902? by what I could do
17. How much did your supports cost for each of those years, and what portion did you contribute thereto by
your own labor or income? supported out of my own labor
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 pension and all small 2 girls were given which
helped 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 claim? none

Sworn to and subscribed before me this the

11 day of October 1903

W. A. Wright Ordinary,

of Clint County.

John S. Westberry Applicant

Every Question MUST be Answered

INDIGENT PENSION.

1903.

John S. Westberry
Clint County
and 12th Ga Regt.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

8/27/04

Westberry John S.
in 1890s
Clint County

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Lowndes COUNTY.

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. Hardce Clinton 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 12th Regt. C.S. 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 How do you know all of this?

he & I were in same Company from 1st year & he was captured May 6, 1864 at Antietam

11. What property, effects or income does the applicant? (Give your means of knowledge.)

none

12. What property, effects or income did the applicant possess in 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same?

none

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?

none

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?

none

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?

none

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

none

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

none

Sworn to and subscribed before me, this the

26 day of Oct, 1903.

W.D. Hardce Ordinary.

A.M. Smith Witness.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Clinch COUNTY.

Personally came before me J.A. Moon M.D. and W.G. 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

John S. Westberry, 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 "Bernia Inguat" - General Debility

& Blindness

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

Sworn to and subscribed before me, this the

26 day of October, 1903.

W.D. Howell Ordinary.

J.A. Moon M.D.

W.G. Stapleton M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Clinch COUNTY.

I, W.D. 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 witness, viz: W.D. Howell

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

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

I further certify that the tax digest of 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 no made in good faith.

Witness my hand and seal of office, this 26 day of Oct, 1903.

W.D. 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. Westberry hereby authorize
W. A. Wright of Atlanta Ga
 to receive and receipt for the pension allowed, and request that he remit same to
Ordway at Hamerville Ga
 by _____

WITNESS my hand and seal, this 16th day of Jan 1905.

J. L. Westberry [L. S.]

Executed in the presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch COUNTY.

I, J. L. Westberry 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. Drake Ordway at Hamerville Ga
 by mail

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

J. L. Westberry [L. S.]

Executed in the presence of

J. T. Drake

CODE SECTION 1254.
 (FOR THOSE ALREADY ENROLLED.)

No. 6334

INDIGENT
 SOLDIER'S PENSION
 1905.

Name J. L. Westberry
 County Clinch
 Co. _____

WARRANT ISSUED
 MAR 1 7 1905.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO
W

Geo. W. HARRISON, BARBER, FOR STATE PRINTER, ATLANTA.

no data

CODE SECTION 1254.
 (FOR THOSE ALREADY ENROLLED.)

No. 1874

INDIGENT
 SOLDIER'S PENSION
 1906.

Name J. L. Westberry
 County Clinch
 Co. 5th Regt 12th Ca

WARRANT ISSUED
 JAN 26 1906.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO
W. A. W.

The Pensioner's Property with this warrant is to be held by the State of Georgia.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Clinch County.

Personally appears J. S. Westbury 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 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 2 years in Company C, of 8th Regiment of Florida ~~not Regt.~~; that his physical condition is as follows: In firmly poverty and age

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 pension

Sworn to and subscribed before me, this the 14 day of Jan 1905.
J. T. Dame Ordinary. J. S. Westbury

STATE OF GEORGIA,

Clinch County.

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

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

J. T. Dame Ordinary Clinch County.



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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Clinch County.

Personally appears J. S. Westbury 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 A, of 24th Regiment of Fla; that his physical condition is as follows: In firmly 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 1905. I have heretofore, as a resident of Clinch County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the 7 day of Jan 1905.
J. T. Dame Ordinary. J. S. Westbury

State of Georgia,

Clinch County.

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

Given under my official signature and seal, this 22 day of Jan 1905.

J. T. Dame Ordinary Clinch County.



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



D. M. SMITH, ORDINARY.

Lowndes County.

Valdosta, Ga.

190

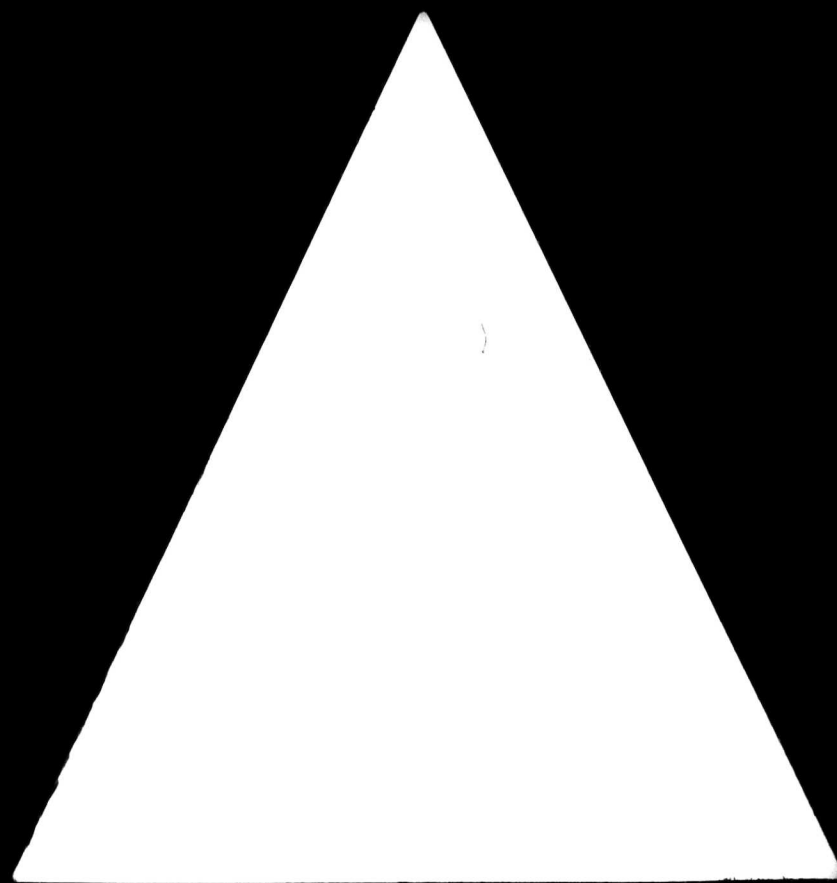
State of Georgia, Lowndes County.

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 intitled to credit and belief, and he is a man of trustworthy character,

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
oaths, *W. B. N. C. News*
who on oath says
that he is personally
acquainted with John
S. Weatherly and knows
him to be old and
infirm and, unable
to own a living
by his own exertions
or labor. He has no
property out of which
he can earn a
subsistence.
W. B. N. C. News
Subscribed
before me this 25-1903
R. S. Dickerson
Clerk, Ct. 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 }

County }

(SEAL)

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and witnesses to the following words: "I give under oath that the statements made by me and the witnesses are true to the best of my knowledge and belief, and I am not making any statement for the purpose of obtaining a pension for any person who is not entitled to the same." 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 said Ordinary.

W. C. Lindsey
Clinch

X No. *10.11. Jan 1920*

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1919

County *Cherokee*

Name *J. T. Blitcher*

Company *1st*

Regiment *1st Regt*

Approved _____

No record in R.D.

J. W. LINDSEY,
Commissioner of Pensions.

Burd Printing Co. State Printers, Atlanta.

7/2-1917

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.

Confederate
Soldier's Application
Under Act 1910 - As Amended by Act of 1919

No. 10,164 Jan 1920

County Cherokee

Name J. T. Whilden

Company 5th

Regiment 1st

Approved _____

No record in R.R.

J. W. LINDSEY,

Commissioner of Pensions.

Burd Printing Co., State Prison, Atlanta.

7/12-1919

Application for Soldier's Pension Under Act 1910

Amended by Act 1919

Questions For Applicants to Answer

STATE OF GEORGIA,

COUNTY.

I, 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, Stanton Ga, Cherokee County
2. How long and since when have you been a continuous resident citizen of this State?
About 6.5 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. 5th Reserves
5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge)
File Augur 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.
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.
Account of being sick in S.C.
- a. Where was your command when you left it?
S.C.
- b. When did you leave the command?
April Mch 1865
- c. For what cause did you leave?
Sickness
- 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?
Ex. de of Sherman's Army
- g. In what way were you prevented?
Sherman's Army
- h. What effort did you make to return?
I reported to an officer at home to be returned
- i. Were you captured during the war?
Yes. See last answer
- 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

Ordinary

of _____ County.

(SEAL)

Questions for Witness as to Service

STATE OF GEORGIA

Waynes COUNTY

W. S. Fender of said State and County is hereby presented as a witness in support of the application of J. T. Whidden 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
Waynes County
2. How long and since when have you known J. T. Whidden 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? He lives in the State of Georgia
He lives in the State of Georgia
4. When, where and in what Company and Regiment did J. T. Whidden enlist during war from 1861 to 1865? (Give date and place.) Spring of 1864, Blount Co. Ga. 5th Co. Reserve
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.) 2nd 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. sent out off from the Command by part of Sherman 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. at of business
12. When did he leave his command? May 1865 Where was his command when he left it? S.C. at of business For what cause did he leave? Business
- By whose authority did he leave? By his own authority and how long was he granted leave? By his own authority 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 Army How do you know? Was there
14. What effort did he make to return to his command and how do you know? OK
15. Was applicant captured as a prisoner? OK If so, when and where? OK In what prison was he held? OK and when released OK

Sworn to and subscribed before me, this the 14th day of Sept 1919 } W. S. Fender
J. T. Whidden Ordinary
of Waynes County.

(SEAL)

GEORGIA LEWDES COUNTY,

I, T. N. Helcombe, Ordinary of said County do hereby certify that I knew W. T. Fender, the witness swearing to the service of J. T. Thildon, that he is a resident of Lewndes County, Ga. and was duly sworn before me, and that his affidavit is entitled to full faith and credit.

Sworn under my hand and seal of Office
this Sept. 9th, 1919.

T. N. Helcombe

Ordinary, Lewndes 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:

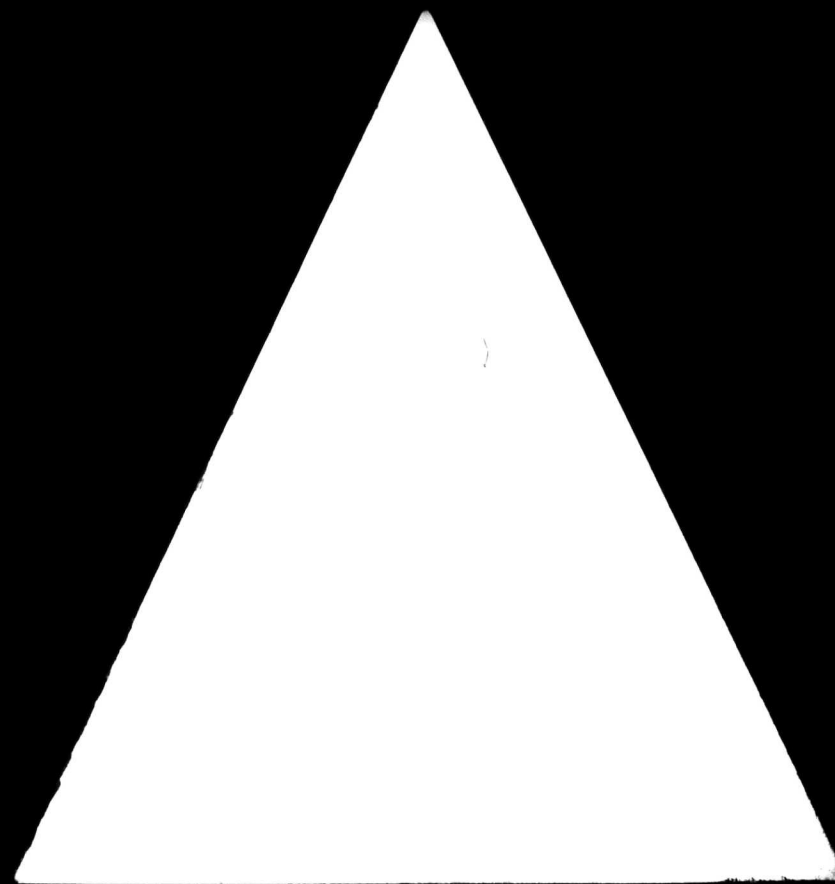
WHEN AND WHERE SURRENDERED? Command surrendered April, 1865, North Carolina. (I think).

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



RECEIVED & TRANSMITTED TO THE DEPT. OF THE INTERIOR
POWER OF ATTORNEY.

STATE OF GEORGIA,

County of Clay

W. A. Wright of the County of Clay

do hereby certify that the within and foregoing is a true and correct copy of the original as the same appears in my possession.

Witness my hand and seal, this 2nd day of July 1906 at Atlanta, Ga.

W. A. Wright [Signature]

Notarially attested in presence of

J. P. Brown

and

(Witness)

Clinch Co.
July 1906

ACT DEC. 24, 1901.

No. _____

WIDOW'S PENSION,

1906

Mrs. Annies H. Whitley

County of Clay

Widow of Benny

Warrant issued 1906

and handed to _____

J. W. LINDSEY,
 Commissioner of Pensions.

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

3/4 - 1906

POWER OF ATTORNEY.

STATE OF GEORGIA,

Clinch COUNTY.

I, Rueella Whitley hereby authorize

W. A. Lindsey of Atlanta Ga

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

Ordinary at Apowersville by mail

Witness my hand and seal, this 2nd day of July 1906

Rueella Whitley [SEAL]

Executed in presence of

J. T. Damm

Whitley, Rueella
W. A. Lindsey
ACT DEC. 18, 1901

No. _____
WIDOW'S PENSION,

1906
Mrs. Rueella Whitley
County of Clinch Co
Widow of Berry
Warrant issued K 26 Ga 1906
and handed to _____

J. W. LINDSEY,
Commissioner of Pensions.
Gen. W. Gordon, State Printer, Atlanta, Ga.
2/6 - 1906

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

Personally came Mrs. Rueella Whitley

COUNTY OF Clinch 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 1888, 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 R

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 contin-

uously resided in the State of Georgia since the 4 day of April 1888

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 July 1906

Mrs. Rueella Whitley

J. T. Damm

Ordinary of Clinch County

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

AFFIDAVIT FOR THREE WITNESSES.

STATE OF GEORGIA, } Personally came J. J. Davis
COUNTY OF Hardwick } Mary A. Davis and
H. A. Wilson, known to me to be reputable and truthful person, who says
on oath that from his own personal knowledge Mrs. Rebecca Whitley
who made the foregoing affidavit, is the widow of Rory Whitley
who died in Nov County and State of Georgia on the
day of October 1905, and that she has not since married; that she became his
widow on the day of 18, 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

Sworn to and subscribed before me, this 2nd day of July 1906

Ordinary Clutch County, Georgia.

PHYSICIANS' AFFIDAVIT.

STATE OF GEORGIA, } Personally came before me
COUNTY OF Coffee } W. J. Stapleton M.D.
and J. T. Hallen M.D., both of whom are known to me to be reputable
physicians, who say on oath that they personally know Rebecca Whitley

mentioned in the foregoing affidavit, that she is personally afflicted with some disease (not earning a support) with age & Disease relative to females
her age is 68 years & is the mother of 8 children
and is the only & faithful wife of Rory Whitley
Whitley Deceased whose death occurred Oct 24 1905
from an abscess of the lower Bowel

Sworn to and subscribed before me, this 25 day of December 1905

Ordinary of Clutch County.

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

STATE OF GEORGIA, } I, J. T. Davis Ordinary.
COUNTY OF Clutch } In and for said County of Clutch
State of Georgia, hereby certify that I am acquainted with Mrs. Rebecca 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 con-
tinuously since the day of October 1860, 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. A. 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 July 1906

{ 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.
Affidavits must be made in presence of the Ordinary.

Ordinary of Clinch County.

our 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.

William Harris
Guardian Deed from *Clinch Co.*
Missouri C. Everett
to
Eliza L. Mattox.
Town lot in Homerville, Ga.

State of Georgia, } Office of Clerk
Clinch County. } SS 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

Wm. Harris
Eliza L. Mattox
John H. Hill

Witness whereof, the said 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:

S. L. Drawdy.

S. W. Register.
Ck. S. C. C. C.

Missouri C. Everett.
Guardian for Harry Whittington.

By Levi O'Steen, her
Atty in fact.

*Georgia Clinch County
I, J. H. Ellis, Clerk of the Superior Court
of said County hereby Certify that I have
compared the foregoing one and one eighth
(1 1/8) page of typewritten matter with the
original record, and the same is a
true copy. Given under my hand and
seal of office at Homerville Ga this
30th day of Dec - 1916
J. H. Ellis
Clerk*

GEORGIA, CLINCH COUNTY.

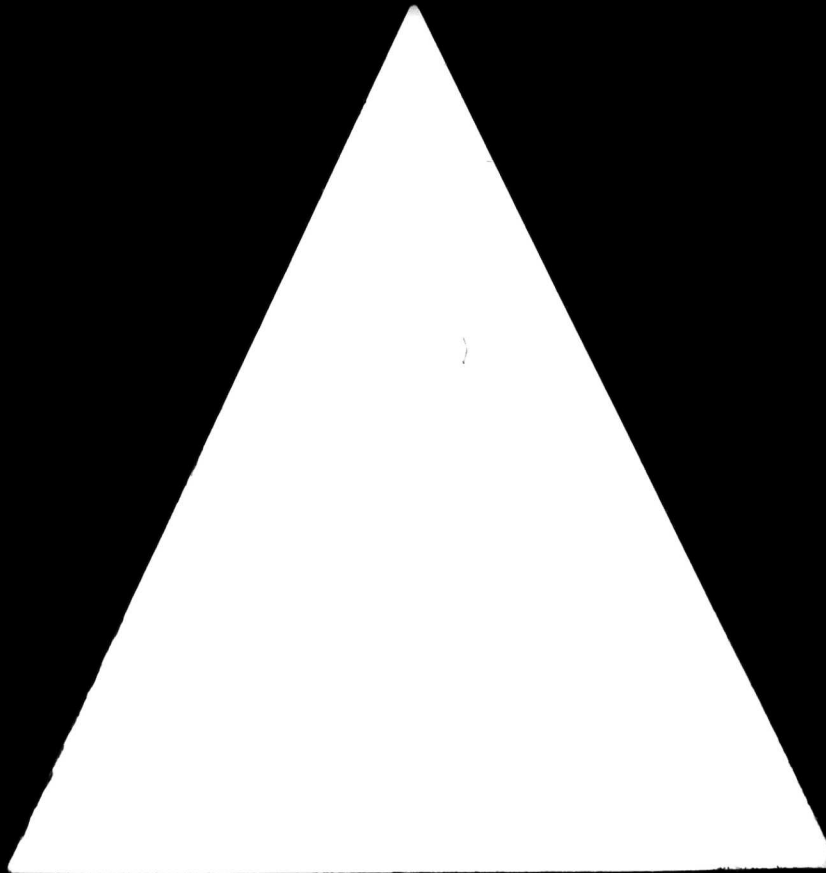
THIS INDENTURE made this ----day of April, 1900, between
Missouri C. Everett, guardian for Harry Whittington, minor heir of
Margarette Whittington late of said county, deceased, as party of
the first part and Mrs. Eliza L. Mattox of the county of Clinch
State of Georgia, as party of the second part.

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 adver-
tising 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 court-
house 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 *Church*
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 Maragr-
ette Whittington, late of said county, deceased.

ette whittington, late of said county, deceased.



March 7 1889.

Wm. A. M. Galt
COMPTROLLER-GENERAL.

William, James M.
Polish Co.

Maimed Soldiers.

Voucher No. 1162

Amount. \$ 100.

Paid to J. M. William

For Loss of arm

Met 6 1889.

Included in Warrant No.

issued to Treasurer.

1889.

WARRANT CLERK

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

Wm. A. M. Galt

No. 1162

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga. *Feb. 6* 1889.

Mr. *James M. Williams* of the County
of *Clay* 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 the receipt on this voucher and return same to
Executive Department for warrant.

By the Governor

GOVERNOR.

CLERK EXECUTIVE DEPARTMENT.

101.

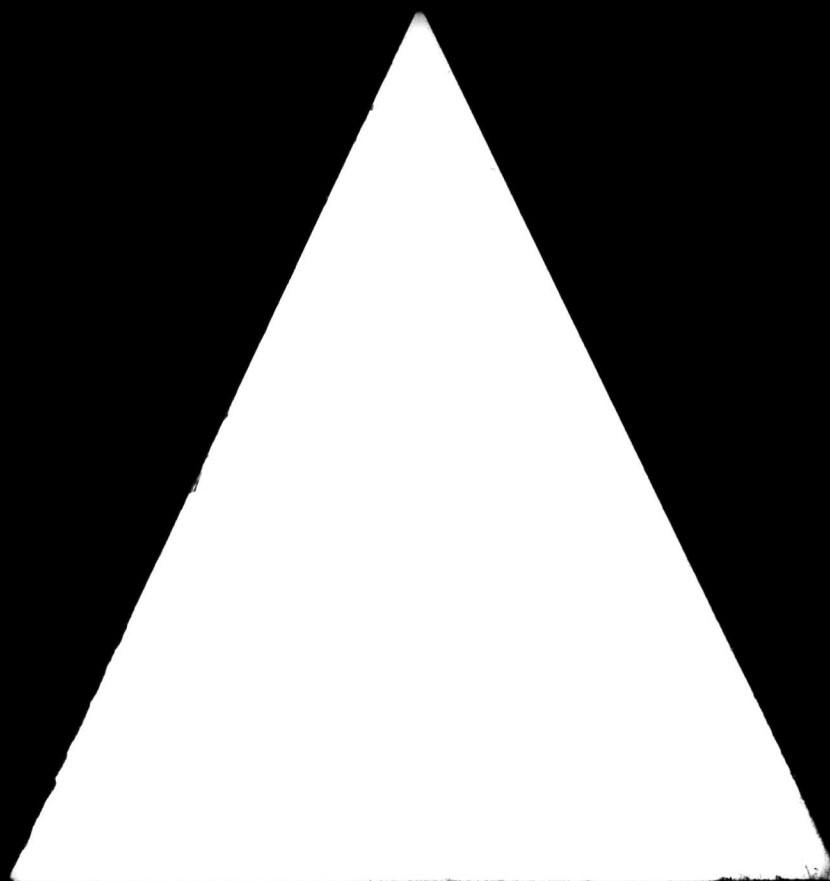
RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

One Hundred & 00 Dollars.

per above voucher, this

6 of *March* 1889.

James M. Williams
by W. H. Harrison



POWER OF ATTORNEY.

STATE OF GEORGIA.

Clinch
County.

Know all Men by these Presents, That I,

of

County, in said State, do hereby appoint *Nancy Williams* my true and lawful attorney in fact, for

me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia 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
2 day of *August* 189*1*

Executed in the presence of us:

[L.S.]

George Williams
at

WITNESSES.

If allowed, send amount by

to

me at *Harrison* *Georgia*, and oblige,
Nancy Williams*Williams Nancy*
Clinch County
*1891.*No. *3601*
24 18.60
1891
Widows' Pension

PAID TO

Nancy Williams
Clinch COUNTY.

\$100.00.

893
Warrant Issued

1891

AND HANDED TO

69 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, *Samuel Williams*

of

Clinch

County, in said State, do hereby appoint *Mrs. Mary Williams* my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia 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 *2nd* day of *August* 1891

Executed in the presence of us:

George Corbin

DIRECTIONS.

If allowed, send amount by me at *Memphis*

Exp. cost.

to



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. *Mary 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 *May* 1861, and was in the *Confederate* Army up to *July* 1861. That while in the Army, he was on the *21st* day of *July* 1861. (See Note No. 1)

She was married by a civil officer in the State of Georgia in Clinch County Georgia in Clinch County

Deponent, appeared before me at the time of her death, and she said that she was married to John Williams and was with and died by John Williams a soldier in Clinch County on the 20th day of July 1861. That John Williams was on duty to arrest and send soldiers back to their commands.

Shown to me and subscribed before me this the 4th day of August 1891.

George Corbin

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 *11th* day of *May* 1861, and that she has resided in Georgia continuously since the *11th* day of *May* 1861; 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. *Mary Williams*
George Corbin
Ordinary.

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

AND HANDED TO
1891

Warrant Issued

\$100.00

PAID TO
Mary Williams
for
Clinch
County.

Widow's Pension

210.3601
441.860

Williams Mary
Clinch County
1891.

Affidavit for Three Witnesses.

Form No. 2.

STATE OF GEORGIA,

County of Clinch

In person came before me, the undersigned Ordinary
in and for said County, witnesses D. H.

John H. Mather
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. Mary 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

fallen by a rebel named Nathan Shumard
in Clinch County on the 20th day of July
1864. He was on duty in said
County at the time of his death to arrest
rebels who were then back to their commands.

We further swear that Mrs. Mary 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

17 day of August, 1891.

George Cornelius
Ordinary.

John H. Mather
D. H. Johnson
John Knight

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

Form No. 3.

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. Mary 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
17 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.
Fancy 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
George 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.

REAL

George Cornelius Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, Clinch County.
 KNOW ALL MEN BY THESE PRESENTS, That I, Fancy Williams
 of Clinch

County, in said State, do hereby appoint William A. Wright my true and lawful attorney in fact, for

me and my heirs, 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.

Executed in the presence of us:

George Cornelius [L.S.]
J. B. King [L.S.]

DIRECTIONS.

Send amount by Express to
 me at Kennesaw Ga and oblige
Fancy Williams

Widow's Pension,

for year ending February 15th, 1893.

PAID TO—

Mrs. Fancy Williams

—OF—

Clinch COUNTY.

Warrant Issued

1893

AND RECEIVED

Geo. W. Harrison, State Printer, Atlanta.

6 19 59

1893.

No. 132

Williams, Fancy
 Clinch County
 FOR THOSE HERETOFORE PAID.

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

1865

That she is the Widow of

JohnWilliams

who was a Soldier in Company

G. B.

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 detached out of his command for the purpose of looking up deserters and other absconders from the Confederate army, and while engaged in said duty he was shot and killed by a deserter by the name of Nathan Blomquist on the 3rd 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

about

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, 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 Connelley Ordinary.

Post-office

Nancy Williams
Clinch