

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears

W. S. Dodgen of *Cobb*

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of *June* 1827; 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 *4th* Regiment of *Georgia* Volunteers, *Barrell*'s Brigade; that whilst engaged in such military service in the State of *Georgia*, on the day of *June* 1864, he was wounded, injured or diseased as follows:

By falling from platform Post office in Atlanta, said platform falling and crushing applicants right heel and ankle thereby rendering applicant incompetent to perform ordinary manual avocations of life

Deponent makes application for the pension to which he is entitled for year ending October 20th, 1901. I have heretofore under said law as a resident of

Cobb County been allowed an invalid pension of

\$25 Dollars, for the year 1900.

Sworn to and subscribed before me, this the

W. S. Dodgen 12th day of *January* 1901. Postoffice *make*

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,

Cobb County.

I, *John Astbury* Ordinary of said County, do certify that I am well acquainted with *W. S. Dodgen* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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.

Ordinary

Cobb County.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears

W. S. Dodgen 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 day of *June* 1827; 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 *4th* Regiment of *Georgia* Volunteers, *Barrell*'s Brigade; that whilst engaged in such military service in the State of *Georgia*, on the day of *June* 1864, he was wounded, injured or diseased as follows:

By falling from platform office in Atlanta said platform falling and crushing applicants right heel and ankle thereby rendering applicant incompetent to perform ordinary manual avocations of life

Deponent makes application for the pension to which he is entitled for the year ending October 20th, 1902. I have heretofore, under said law, as a resident of

Cobb County, been allowed an invalid pension of

\$25 Dollars, for the year 1901.

Sworn to and subscribed before me, this the

W. S. Dodgen 13th day of *Jan* 1902. Post-office *make*

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,

Cobb County.

I, *John Astbury* Ordinary of said County, do certify that I am well acquainted with *W. S. Dodgen* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 *Jan* 1902.

Ordinary

Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County. }

I, *W. S. Dodgen* hereby authorize _____

of _____

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

by _____

at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal this *13*

day of *June* 1903.

W. S. Dodgen [L. S.]

Executed in presence of

John A. Gray

(CODE SECTION 126)
(FOR THOSE ALREADY ENROLLED.)

No. *263*

DISABLED

SOLDIER'S PENSION

1903.

Name *W. S. Dodgen*

County *Cobb*

Co. *K* Regiment *4*

Disability *100*

Amount, \$ *25.00*

123 1903.

JOHN W. LINDSEY,

(Commissioner of Pensions)

WARRANT HANDLED TO

Dodgen

Geo. W. Harrison, State Printer, Atlanta

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County. }

I, *W. S. Dodgen* hereby authorize _____

of _____

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

by _____

at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *12*

day of *January* 1904.

W. S. Dodgen

[L. S.]

Executed in presence of

John A. Gray

(CODE SECTION 126)
(FOR THOSE ALREADY ENROLLED.)

No. *262*

DISABLED

SOLDIER'S PENSION

1904.

Name *W. S. Dodgen*

County *Cobb*

Co. *K* Regiment *4*

Disability *100*

Amount, \$ *25*

JAN 25 1904.

JOHN W. LINDSEY,

(Commissioner of Pensions)

WARRANT HANDLED TO

Gray

Geo. W. Harrison, State Printer, Atlanta

modals

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County.

Personally appears W. S. Dodgen of Cobb

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of June 18 27 ; 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 C , of 4 th Regiment of 1st Volunteers, Casswell 's Brigade; that whilst engaged in such military service in the State of Georgia , on the 18th day of June 18 64 , he was wounded, injured or diseased as follows:

By falling from platform of Fort Price in Atlanta and falling and crushing right heel and ankle thereby rendering applicant incapable of performing ordinary manual avocations of life

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 Cobb County, been allowed an invalid pension of \$20 Dollars, for the year 1902.

Sworn to and subscribed before me, this the 12th day of January 1903.

Post-office.

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

STATE OF GEORGIA,

County.

I, John Anthony Ordinary of said County, do certify that I am well acquainted with W. S. Dodgen the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1903.

Ordinary

County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County.

Personally appears W. S. Dodgen of Cobb

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 20th day of June 18 27 ; 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 C , of 4 th Regiment of 1st Volunteers, Casswell 's Brigade; that whilst engaged in such military service in the State of Georgia , on the 18th day of June 18 64 , he was wounded, injured or diseased as follows:

By falling from platform of Post Office in Atlanta said applicant falling and crushing right heel and ankle thereby rendering applicant incapable of performing ordinary manual avocations of life

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 Cobb County, been allowed an invalid pension of \$20 Dollars, for the year 1903.

Sworn to and subscribed before me, this the 12th day of January 1904.

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,

County.

I, John Anthony Ordinary of said County, do certify that I am well acquainted with W. S. Dodgen the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 January 1904.

Ordinary

County.

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

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Cobb COUNTY.

of said State and County, having been presented as a witness in support of the application of H. S. Dodgen 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? H. S. Dodgen
2. Are you acquainted with H. S. Dodgen, the applicant; if so, how long have you known him?
3. Where does he reside, and how long and since when has he been a resident of this State?
4. When, where and in what company and regiment did he enlist, and how do you know?
5. Were you a member of the same company and regiment?
6. How long did he perform regular military duty?
7. When and where was his command surrendered?
8. Were you present when it surrendered?
9. Was applicant present?
10. If he was not present, where was he?

When did he leave his command?

For what cause?

By what authority he left?

How do you know all of this?

11. What property, effects or income has the applicant? (Give your means of knowledge) None. living a beggar
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? He had a lot of land up to about 1890 but gave it up to pay debts
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? in
14. What is the applicant's occupation and physical condition? in occupation, physical condition, but can't even feed himself
15. Is the applicant unable to support himself by labor of any sort, if so, why? Yes. on acct of age, and physical condition
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? By his children
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: He is a cripple, very weak, cannot walk
19. Who composes family? What property have they? Children's age and their earning capacity? No. on but himself

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

Sworn to and subscribed before me, this the

Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Cobb COUNTY.

Personally came before me

both known to me as reputable physicians

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

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

He is Paralyzed. Very badly. has had his right arm
fractured at upper end and a consequent shortening
of about two inches. He is seventy seven years old
and account of this advanced age & poverty
he hopes to obtain a Pension

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

Sworn to and subscribed before me, this the

day of September 1904

Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cobb COUNTY.

I, John Hurley Ordinary, in and for said County, hereby certify that the applicant H. S. Dodgen resides in said County, and has been a bona fide resident of this State since the 1st day of January 1894 and that the witnesses, viz.: B. J. Hamby and R. H. Jolly

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 Cobb County show that applicant returned for taxation in his name in 1899 no Dollars of property, and in 1900 no Dollars of property, in 1901 no Dollars of property, in 1902 no Dollars of property.

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

Witness my hand and seal of office, this 22nd day of Sept. 1904
John Hurley Ordinary,
of Cobb 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,

Cobb COUNTY. }
 I, *W. S. Dodgen* hereby authorize
John A. Wray of _____
 to receive and receipt for the pension allowed, and request that he remit same to
 _____ at _____
 by _____

WITNESS my hand and seal, this *22* day of *Jan* 1906.

W. S. Dodgen [L. S.]
mark

Executed in the presence of

J. W. Sam

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY. }
 I, *W. S. Dodgen* hereby authorize
John A. Wray of _____
 to receive and receipt for the pension allowed, and request that he remit same to
 _____ at _____
 by _____

WITNESS my hand and seal, this *8* day of *Jan* 1907.

W. S. Dodgen [L. S.]
mark

Executed in presence of

J. W. Sam

Cosa Section 1254.
 (FOR THOSE ALREADY ENROLLED.)

No. *743*

INDIGENT SOLDIER'S PENSION 1906.

Name *W. S. Dodgen*
 County *Cobb*
 Co. *K 4th* Regiment *Sta.*
State Troops.

WARRANT ISSUED

1/22 1906.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO

Dodgen

See Pensions Section and Pensions of Gen. W. Lindsey, Sec.

no data

Cosa Section 1254.
 (FOR THOSE ALREADY ENROLLED.)

No. *685*

INDIGENT SOLDIER'S PENSION 1907.

Name *W. S. Dodgen*
 County *Cobb*
 Co. *K 4th* Regiment *Sta.*

WARRANT ISSUED

JAN 21 1907.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO

See Pensions Section and Pensions of Gen. W. Lindsey, Sec.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

I, W. S. Dodgen hereby authorize
John A. W. Wray of _____
to receive and receipt for the pension allowed, and request that he remit same to
_____ at _____
by _____

WITNESS my hand and seal, this 7 day of January 1906.

W. S. Dodgen [L. S.]
mark

Executed in the presence of

W. S. Dodgen

Code Section 12-4

(FOR THOSE ALREADY ENROLLED.)

No. 743

INDIGENT SOLDIER'S PENSION 1906.

Name W. S. Dodgen

County Cobb

Co. K. H. Th. Regiment Ga.

State Troops

WARRANT ISSUED

1/22 1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Wray

This Pensions Permit, and Pensions Card, are to be retained by the

new date

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

I, W. S. Dodgen hereby authorize
John A. W. Wray of _____
to receive and receipt for the pension allowed, and request that he remit same to
_____ at _____
by _____

WITNESS my hand and seal, this 8 day of January 1907.

W. S. Dodgen [L. S.]
mark

Executed in presence of

W. S. Dodgen

(FOR THOSE ALREADY ENROLLED)

No. 685

INDIGENT SOLDIER'S PENSION 1907.

Name W. S. Dodgen

County Cobb

Co. K. H. Th. Regiment

WARRANT ISSUED

JAN 21 1907.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

John W. Lindsey, State Printer, Atlanta.

new date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Cobb County.

Personally appears W.S. Dodgen 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 _____ 18____; that he is _____ years old and by occupation a _____, 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 _____ in Company H, of 4th Regiment of _____; that his physical condition is as follows: Infirmary & poverty

that his property consists of the following items:

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

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

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

John H. Hickey Ordinary.

W.S. Dodgen mark

State of Georgia,

Cobb County.

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

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

John H. Hickey Ordinary Cobb 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,

Cobb County.

Personally appears W.S. Dodgen 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 _____ 18____; that he is _____ years old and by occupation a _____, 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 _____ in Company H, of 4th Regiment of Gen. Cobb; that his physical condition is as follows: Infirmary & poverty

that his property consists of the following items:

of the value of _____ Dollars. I am now earning by my labor, _____ 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 Cobb County, been allowed a pension for the year 1906.

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

John H. Hickey Ordinary.

W.S. Dodgen mark

State of Georgia,

Cobb County.

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

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

John H. Hickey Ordinary Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, *W. S. Dodgen*

hereby authorize

John W. Lindsey

of

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

by

at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *13*

day of *May*

1905.

W. S. Dodgen

—[L. S.]

Executed in the presence of

Same

Dodgen, W. S.

(FOR THOSE ALREADY ENROLLED.)

DISABLED

SOLDIER'S PENSION

1905.

W. S. Dodgen

Name

County

Co. *20* Regiment

Disability

Amount, \$ *25*

JAN 23 1 1905

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

Clerk

The Pension Office, U. S. Department of War, Washington, D. C.

no date

Deponent says that after refreshing his memory he remembers his former Affiant and is fully conversant with the same Affiant.

*Georgia Gold County:
Humphrey Reid a resident of said County, who on oath says that he knows Wiley S. Dodgen that the said Dodgen was a member of Co. "K" of 4th Regt. of Col. Bigger's troops in the Confederate Service — that the said Dodgen was hurt and brought to the Camp — it was reported that he was hurt by the fall of a platform in Atlanta — that the said Dodgen was crippled in his ankle — that the said Dodgen on the account of this said hurt was sent home in a few days. I was 1st Lieut. in the same Company with W. S. Dodgen*

*From to and Humphrey Reid
subscribed before me this 28th day of June 1896.*

*Wm. Stone
Reson to before me on July 4th 1898.
Wm. Stone only.*

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb COUNTY.

Personally appears *W. S. Dodgen* of *Cobb*

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 *20* day of *June* 18*27*; 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 *Musician* in Company *H*, of *H*th Regiment of *Volunteers* *Conrad*'s Brigade; that whilst engaged in such military service in the State of *Georgia*, on the day of *June* 1864, he was wounded, injured or diseased as follows:

By falling from platform in Atlanta, crushing right heel and ankle

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 *Cobb* County, been allowed an invalid pension of *25* Dollars, for the year 1904.

Sworn to and subscribed before me, this the

13 day of *July*, 1905.

John Andrew

W. S. Dodgen
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,

Cobb COUNTY.

I, *John Andrew* Ordinary of said County, do certify that I am well acquainted with *W. S. Dodgen* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 *July*, 1905.

Ordinary

John Andrew
Cobb

County.

Note—Fill all blanks and of Company and Regiment.

Note—All vouchers and affidavits must bear date after January 1, 1906.

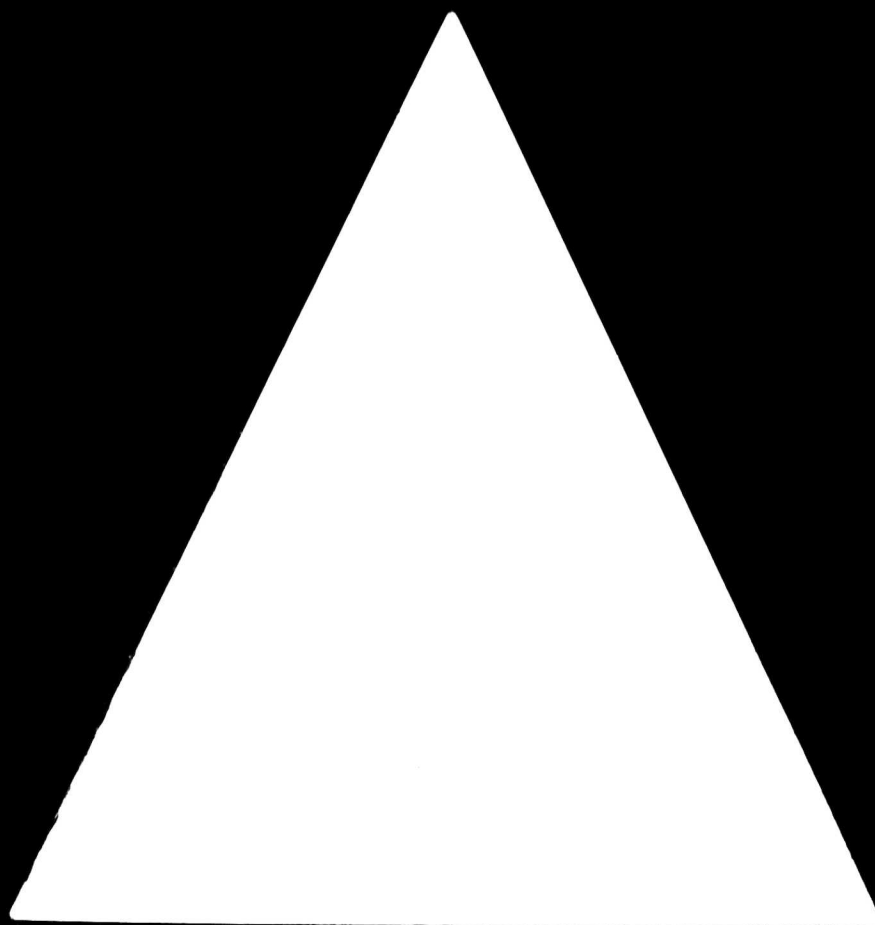
Georgia Cobb County
A. O. Tolleson appears
says he is acquainted
with *Wiley S. Dodgen* the
applicant for pension in this
application—that I was in
the Army of the Confederacy
was a member of the same
Company with said Dodgen.
—that the platform as mentioned
by said Dodgen in his affi-
davit fell as described and
that the said Dodgen fell
as he says—I saw the
whole affair and was present
when said Dodgen was injured
out from the wreck—He
seemed to be crippled in
his leg and ankle, was
a cripple during the remainder
of the war and has been
ever since up to the present
time, complaining of the wound
received as described from
the falling of the platform.
Said Dodgen appears to be
on account of said wound
to be incompetent to perform
the ordinary manual avocations
of life.

A. O. Tolleson
From the day subscribed
before me this Oct 6th 1896

From to and Subscribed
before me this Oct 6th 1896
J. M. Strain

Georgia Cobb County
H. Benson appears
George W. Robinson who
on oath says that
Wiley S. Dodgen, Humphrey
Reid and A. O. Folsom
Applicant and witnesses
in this Application for Ben-
son were Members of
Co. K, 4th Regt. 2nd
Brigade & 7th Division
of Georgia Volunteers.
State

From to and Subscribed
before me this 29th
day of Jan, 1898
J. M. Strain



*Dominick, J. R.
Cobb Co.*

No. On 1902

INDIGENT PENSION.

190 7

Name

County

Co.

Approved

190

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

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

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

1/21/08

STATE OF GEORGIA,

COUNTY.

POWER OF ATTORNEY.

I

being

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

Witness my hand and seal, this

day of

190

Executed in presence of

[L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

_____ of _____

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

at _____ by _____

Witness my hand and seal, this _____ day of _____ 1907.

Executed in presence of _____

[L. S.]

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

COUNTY.

I, J. P. Dominick of said State and County, desiring to avail myself of the Pension Act (Section 1204, Code), hereby submit his proof, and after being duly sworn true answers to the following questions, depose and answer as follows:

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

J. P. Dominick, 1111 1/2 1st St. S.W., Atlanta, Ga.

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

Since 1867.

3. When and where were you born?

At Columbus, Miss., May 3, 1840.

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

May 1862 - 1st Infantry, Cavalry, 1st Regt. Co. C. R. 1st Co. Cavalry

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

Until Surrender in April 1865.

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

At Richmond, Va. April 1865.

7. Were you present with your company and regiment when it was surrendered?

I was.

8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority?

Surrendered near Greensboro, N. C.

9. How much can you earn (gross) per annum by your own exertions or labor?

Amount nothing.

10. What has been your occupation since 1865?

Nothing.

11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty,"

second, "infirmary and poverty," or third, "blindness and poverty?"

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.

My infirmity began from a wound in the left shoulder in an engagement at Gettysburg, Va. during the Civil War. Since then I have been unable to do any work except what I can do at home.

13. What property, real and personal, or income, do you possess, and its gross value?

None.

14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift, have you made of same?

None except a little household and kitchen furniture and for first years run a store sold goods.

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

For first five years in Walker Co. since then in Cobb County.

16. How were you supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907?

By what little I could earn.

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 can not tell as I lived on what little I could make.

18. What was your employment during 1901, 1902, 1903, 1904, 1905, 1906 and 1907? 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 home, or other property? Their age and how employed?

None.

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

None.

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

No.

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

None.

Sworn to and subscribed before me this the _____ day of _____ 1907.

J. P. Dominick

Applicant.

Every question must be answered.

INDIGENT PENSION.

1907

Name

County

Regt.

Approved

1907

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

Notary Public for State of Georgia

Notary Public for State of Georgia

Notary Public for State of Georgia

Notary Public for State of Georgia

Notary Public for State of Georgia

4/21/07

Dominick, J. P.
Cobb Co.

No. 1907

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

at _____ by _____

Witness my hand and seal, this _____ day of _____ 1907

[L. 8.]

Executed in presence of _____

No. Dec 1907

INDIGENT PENSION.

1907

Name

County

Regt.

Approved

1907

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

County will write name of Applicant, Company and rank or grade in full and sign.

Witness my hand and seal, this _____ day of _____ 1907

Every question must be answered.

1. How long and since when have you been a resident of this State? At my life
2. When and where were you born? At Cooke County - Aug 3rd 1846
3. When and where and in what company and regiment did you enlist or serve? Aug 1862 - 1st Infantry Co. Cooke County - Co. G R 1st Co. Cooke
4. How long did you remain in such company and regiment? Until Surrender in April 1865
5. When and where was your company and regiment surrendered and discharged? At Vicksburg, Miss.
6. Were you present with your company and regiment when it was surrendered? I was
7. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? Surrendered near Vicksburg, Miss.
8. How much can you earn (gross) per annum by your own exertions or labor? Almost nothing
9. What has been your occupation since 1865? Nothing
10. 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
11. 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 infirmity began from a wound in the left shoulder in an engagement at Vicksburg, Miss. The wound was so severe that it caused the loss of the bone and the arm. I have since been unable to use the arm and have been suffering from the effects of the wound ever since.
12. What property, real and personal, or income, do you possess, and its gross value? None
13. What property, real or personal, did you possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift, have you made of same? None
14. In what County did you reside during those years, and what property did you then return for taxation? For first five years in Walker Co. since then in Cobb County
15. How were you supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? By what little I could earn
16. 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 can not tell as I lived on what little I could make
17. What was your employment during 1901, 1902, 1903, 1904, 1905, 1906 and 1907? What pay did you receive in each year? None
18. 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? None
19. Are you receiving any pension? If so, what amount and for what disability? None
20. Have you ever made an application for pension before? No
21. How many applications have you ever made and under what class? None

Sworn to and subscribed before me this the _____ day of _____ 1907

Ordinary

County

Applicant.

STATE OF GEORGIA,
Courts COUNTY.

as a witness in support of the application of J. B. Hasker of said State and County, having been presented 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? *My name is J. B. Washburn. I reside at Durin, Carroll County, Georgia.*
2. Are you acquainted with *J. P. Davidson*, the applicant; if so, how long have you known him? *I have known J. P. Davidson since 1855.*
3. Where does he reside, and how long and since when has he been a resident of this State? *He resides in Cobb County, Ga. Lived in this State since I know him.*
4. When, where and in what company and regiment did he enlist, and how do you know? *He enlisted in Spring of 1862, in Company _____, 1st Ga. Cav.*
5. Were you a member of the same company and regiment? *I was a member of said Co. & Regt.*
6. How long did he perform regular military duty? *For 5 years.*
7. When and where was his command surrendered? *April 26 - 1865, at Greensboro, N. C.*
8. Were you present when it surrendered? *I was present.*
9. Was applicant present? *He was present.*
10. If he was not present, where was he? *Was present.*
- When did he leave his command? *Immediately.* For what cause? _____
- By what authority he left? _____ How do you know all of this? _____

11. What property, assets or income has the applicant? (Give your exact knowledge.)

12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907 and what disposition, if any, did he make of same?
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom?
14. What is the applicant's occupation and physical condition?
15. Is the applicant unable to support himself by labor of any sort; if so, why?
16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907?
17. What portion of his support for these four years was derived from his own labor or income?

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

19. Who compose family? What property have they? Children's ages and their earning capacity?
I was present when he was married in St. Louis, Mo., by Miss Fox, at or near Newmarket, Mo., in 1864.
20. What interest have you in the recovery of a pension by this applicant? *None*
- Sworn to and subscribed before me, this the
30 day of *October*, 180*7* } *J. B. Walker*
 Witness.

L. Adams Ordinary
Georgia County, Tenn. I certify that J.B. Walker is a citizen of said
County & State.

STATE OF GEORGIA

Court County Cash Wm Kemp
For me and before me _____ and
Chas. H. Field both known to me as reputable physicians
of said County, who being severally sworn, say on oath that they have examined carefully _____

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

The first defendant has no doubt would
in night-black which would give him
friendly under. He has been should
black and since, fastest by a
which. He has been and results of
and that we have no interest in and position being owed.

Sworn to and subscribed before me, this the
25 day of June 1907

Ordinary

ORDINARY'S CERTIFICATE

STATE OF GEORGIA.

I, John J. [Signature] Ordinary, in and for said County, hereby certify
 that the applicant, R. Dominick resides in said County, and has
 been a bona fide resident of this State since the 1st day of January 1894
 and that the witnesses, viz.: Mrs. [Signature]
 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 West County shows that applicant returned for taxation in his name in 1901 _____ Dollars of property, and in 1902 _____ Dollars of property; in 1908 _____

		Dollars of property; in 1904
		Dollars of property; in 1905
		Dollars of property; in 1906
		Dollars of property; in 1907
		Dollars of property.

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

Witness my hand and seal of office, this 25th day of Nov. 1907.
John H. Curtis Ordinary.
 of Wash. County.

NOTE.

1. Before any questions are answered, the Ordinary shall swear applicants, and the witnesses in the following words: "You shall answer truly, and not 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.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

South COUNTY.

Samuel B. Love of said State and County, having been presented as a witness in support of the application of John R. Montgomery 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? Samuel B. Love, in Marietta, South County
2. Are you acquainted with John R. Montgomery, the applicant; if so, how long have you known him? I am. Have known him for ten years
3. Where does he reside, and how long and since when has he been a resident of this State? He has resided in Marietta Cobb Co Ga. He has not been long in Ga.
4. When, where and in what company and regiment did he enlist, and how do you know? I do not know
5. Were you a member of the same company and regiment? No
6. How long did he perform regular military duty? Do not know
7. When and where was his command surrendered? Do not know
8. Were you present when it surrendered? No
9. Was applicant present? Do not know
10. If he was not present, where was he? Do not know
- When did he leave his command? Do not know
- For what cause? Do not know
- By what authority he left? Do not know
- How do you know all of this? Do not know

11. What property, effects or income has the applicant? (Give your means of knowledge.) Has no property except household goods worth about \$100.00
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? I know nothing of his possessions except for the years 1906 and 1907 which his distribution is known to
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 in the last two years that I have known him
14. What is the applicant's occupation and physical condition? He operates a restaurant in a very small scale which yields but little in fact almost nothing in money. He is a weak, lame and feeble man. He is a laborer.
15. Is the applicant unable to support himself by labor of any sort, if so, why? As before stated he is so weakened with flesh that he can not work
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? I do not know. But for the past two years has existed upon what
17. What portion of his support for these four years was derived from his own labor or income? Little to have made in any way

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? As before stated. Cripple, lame, feeble, is diseased with him. He can not perform manual labor
19. Who composes family? What property have they? Children's age and their earning capacity? A wife. None

20. What interest have you in the recovery of a pension by this applicant? None
- Sworn to and subscribed before me, this the 25th day of Apr, 1902.
- John Hartley Ordinary.
- Samuel B. Love Witness.

*Domestic T. F. (paid)
 Paid in Advance
 No. 7
 Paid wid in
 1904
 Hann*

Application for Pension.

Due Deceased Soldier Under
 Act 1891.

By Mrs. Virgie Dominie
 Widow of J. R. Dominie
Augusta, Ga.
 of County Wade
 Co. Vol.
 Reg't 1
 1904

APPROVED AND PAID

1904
J. W. LINDSEY,
 Commissioner of Pensions.

GEORGIA, _____ County.

I hereby authorize and constitute _____ of said county, my
 lawful attorney to collect and receipt for me in my name the Pension due me for 190 _____, through my deceased husband
 _____, who was on _____ Pension
 Roll and paid from _____ for 190 _____

Witness my hand this _____ day of _____ 190 _____

Attested before me:

Domestic T. F.

No. _____
 190 _____

Application for Pension
 Due Deceased Soldier
 Under Act 1891.

BY
Mrs. Virgie Dominie
 Widow of J. R. Dominie
 of County Wade
 Co. _____ Reg't _____ Vol. _____

Approved and Paid
 1904
J. W. LINDSEY,
 Commissioner of Pensions.

GEORGIA, Wade County.

I, C. S. Turner, Ordinary of said county, do certify
 that I personally know Mrs. Virgie Dominie, the applicant, and that
 she is the lawful widow of J. R. Dominie, and was on
 the indigent Pension Roll of said Wade county, and was
 paid a Pension from _____ county for 1904, and at the time
 of his death on the 10th day of September, 1904, there was
 due to him and unpaid his Pension of 10th dollars from the State
 of Georgia, and I know Virgie Dominie, the within
 witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 22 day of April, 1904
C. S. Turner Ordinary.
Wade County.

Application for Pension Due Deceased Soldier

UNDER ACT APPROVED OCTOBER 9, 1891.

STATE OF GEORGIA, Wade County.

Personally before me comes Mrs. Virgie Dominic, of said county, after being duly sworn, on oath says that she is the widow of J. R. Dominic who was duly enrolled as a indigent Pensioner from the county of Hall and was paid a pension of Sixty Dollars from Hall county for 1904 and that the said J. R. Dominic died in Hall county on the 14th day of Jan, 1904, and at the time of his death a Pension of \$60.00 was due him from Hall county and unpaid for 1904. Applicant further swears that she married the said J. R. Dominic on the 10 day of Sept, 1903, in Walker county and State of Georgia, and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 2nd day of Feb, 1904.
C. S. Thomas Ordinary, } V. Dominick [L.S.]
Wade County.

AFFIDAVIT OF WITNESS.

GEORGIA, Wade County.

Personally before me comes Mrs. J. R. Kemp, who on oath says that he knew J. R. Dominic while in life and that he knows Applicant Mrs. Virgie Dominic the above applicant; that he knows that the said J. R. Dominic and Virgie Dominic were in due form of law married in the county of Walker in the State of Georgia on the 10th day of Sept, 1903, and that they resided together as husband and wife from date of marriage to the day of his death on the 14th day of Jan, 1904, and I now know that she is his dependent widow.

Sworn to and subscribed before me this 2nd day of Feb, 1904.
C. S. Thomas Ordinary, } Mrs. J. R. Kemp
Wade County.

NOTE 1st.—This form can be used by guardian or minor children where there is no widow.
 2d.—Ordinary must send in all cases certified copy of marriage license attached.

APPLICATION FOR PENSIONS DUE DECEASED SOLDIER.

UNDER ACT APPROVED OCTOBER 9, 1891.

STATE OF GEORGIA, Wade County.

Personally before me come Mrs. Virgie Dominic, of said county, after being duly sworn, on oath says that she is the widow of J. R. Dominic who was duly enrolled as a indigent Pensioner from the county of Walker and was paid a Pension of Sixty Dollars from Walker county for 1904, and that the said J. R. Dominic died in Hall county on the 14 day of January, 1904, and at the time of his death a Pension of \$60.00 was due him from Walker county and unpaid for 1904. Applicant further swears that she married the said J. R. Dominic on the 10th day of September, 1903, in Walker county and State of Georgia and resided with him from date of marriage to his death as his lawful wife, and is now his dependant widow, and she asks that the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 22 day of April, 1904.
C. S. Thomas Ordinary, } V. Dominick [L.S.]
Wade County.

AFFIDAVIT OF WITNESS.

GEORGIA, Wade County.

Personally before me come Mrs. J. R. Kemp, who on oath says that he knew J. R. Dominic while in life and that he knows his widow Mrs. Virgie Dominic the above applicant; that he knows that the said J. R. Dominic and Virgie Dominic were in due form of law married in the county of Walker in the State of Georgia on the 10th day of September, 1903, and that they resided together as husband and wife from date of marriage to the day of his death on the 14 day of January, 1904, and I now know that she is his dependant widow.

Sworn to and subscribed before me this 22 day of April, 1904.
C. S. Thomas Ordinary, } W. B. B. B. B. B. B.
Wade County.

NOTE 1st.—This form can be used by guardian or minor children where there is no widow.
 2d.—Ordinary must send in all cases certified copy of marriage license attached.

Waukena Ga. Jan'y 14th 1908.
Hon J. W. Lindsey

My dear Judge,

Enclosed I send
you the application of J. R. Rominick for pension.
~~I beseech for it~~ ^{Kindly} attention.

Of course I am aware
that applications filed since October 12th do
not stand in line for prompt consideration but
monstrous as the idea seems I would say if there
should be anything left over please bear Mr Rominick
in mind. His main physical trouble is obesity. He
is so fleshy that he can not stoop at all and
as Col Dale - one of his witnesses says - he looks
like a spool of No 8 thread. From this affec-
tion he is entirely unable to work at anything and
eke out a miserable existence from the meager
income from a little lunch counter.

Best wishes for a
happy New Year to you and Miss Anne.

Truly Yours friend -

The J. R. Rominick

Office of the Ordinary, Lafayette, Walker County, Georgia,

February 4th. 1914.

I E. Foster, Ordinary, and ex-officio Clerk of the Court of Ordinary of Walker County, Georgia, do hereby certify that the within copy Marriage licence and certificate of Marriage are true copies from the Records in my office,.

Given under my hand and seal of Office, This february 4th. 1914

E. Foster
Ordinary, Walker County, Georgia.

MARRIAGE LICENSE
OF

J. R. Demineck

AND

Virgie Camp.

Issued Sept 4th. 1903 116

and recorded on page 22

Book 3 of Marriage Licenses.

J. L. Rowland

Ordinary.

No. 937



TO ANY JUDGE, JUSTICE OF THE PEACE, OR MINISTER OF THE GOSPEL.

You are hereby authorized to join

J.R. Demineok

and Virgie Camp

*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 4th. *day of*
September 1903

J.L. Rewland

(L.S.)
Ordinary

STATE OF GEORGIA

~~CERTIFICATE~~

WALKER COUNTY

I Certify that

J.R. Demineok

and

Virgie Camp

were joined in Matrimony by me this 10th. *day of* September *nineteen Hundred*
and Three

Recorded

Oct

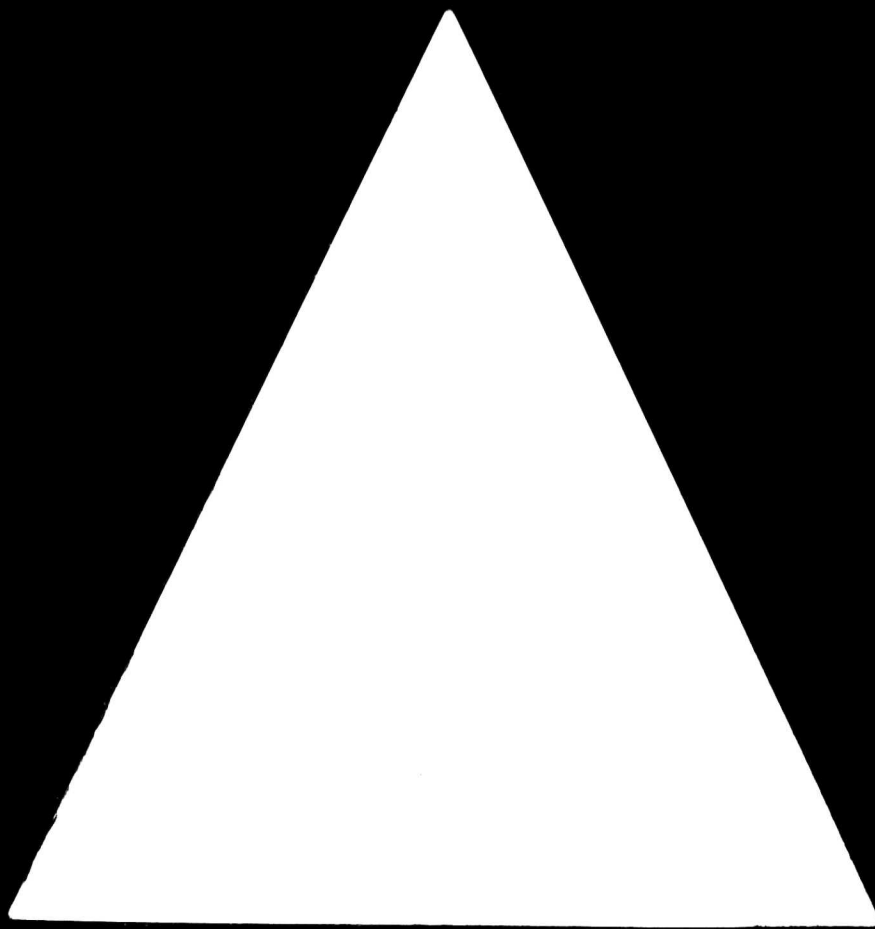
19 03.

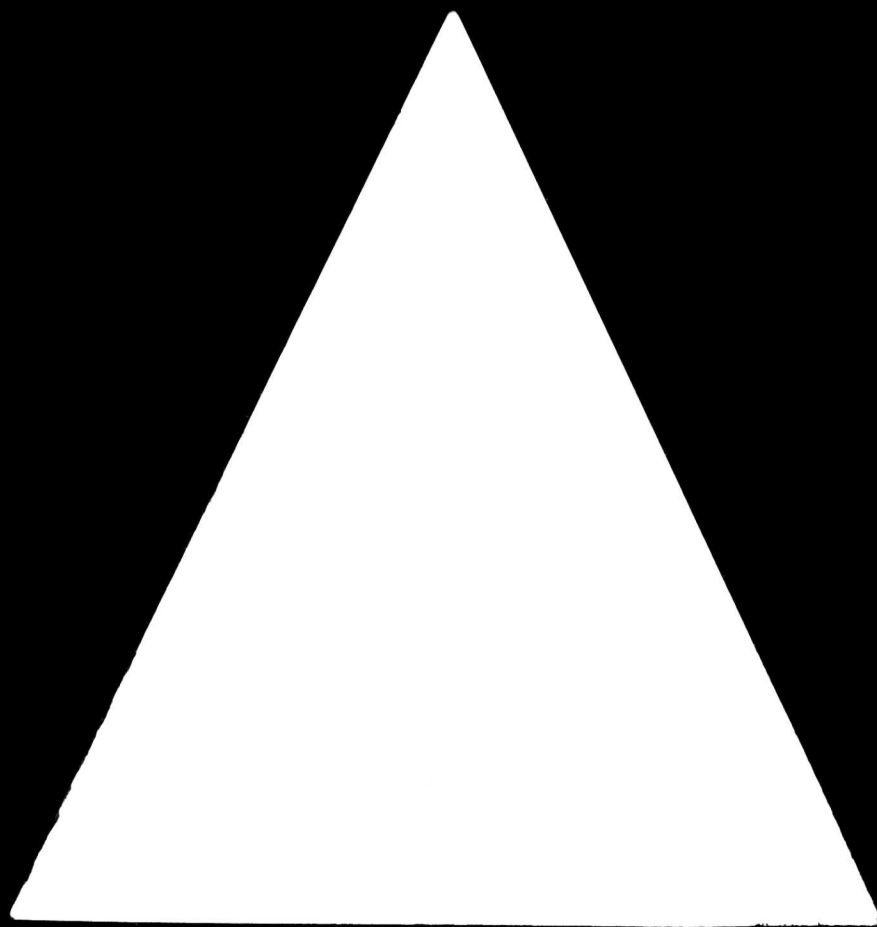
J.R. Pryer M.G.

J.L. Rewland

Ordinary

WALKER COUNTY, GEORGIA





Pension Office, Nov. 6, 1917.
Applicant must submit some testimony showing that she and her husband were living together as husband and wife, and so recognized in the community where they lived, before the 1st. day of January 1870. The witness submitted doesn't know. This is important and must be stated and proven.

J. W. Lindsey,
Commissioner of Pensions.

Donahoo, Cobb
1917
11/18

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.

H
County *Cobb*
Name *Donahoo*
Sarah J. Donahoo
Widow of *B. F. Donahoo*
Company *Marine Light Artillery*
Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. F. BYRD, State Printer, Atlanta.

113-1917

The community where they lived, before the 1st. day of January 1870. The witness submitted doesn't know. This is important and must be stated and proven.

J. W. Lindsey,
Commissioner of Pensions.

Widow's Application

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

County

Cobb

Name

Barb J Donahoe

Widow of

B F Donahoe

Company

Mass Light Artillery

Approved

J. W. LINDSEY,

Commissioner of Pensions

CHAS. F. BYRD, State Printer, Atlanta.

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

Cobb County.

Personally before me come *Barb J Donahoe* of said County, who, after being duly sworn, on oath says, that she is the widow of *B F Donahoe* to whom in the County of *Cobb* State of *Ga* she was married on the *2* day of *May* 18*74* and that she remained his wife, and resided with him to the date of his death in *May 25* 1917 and that she has not since his death remarried. At the time of his death he was a resident of *Cobb* County, in *Ga* said State of Georgia, and he was on the *Volunteer* Pension Roll of the State and paid a pension of *\$70.00* in *Cobb* County for 1917 per annum, on account of being a soldier in Company *Mass Light Artillery* Regiment. (Volunteers of State Militia.)

At the death of *B F Donahoe* 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. *3* \$

Horses and Mules. *None* \$

Hogs, Cows, etc. *None* \$

Total Cash value of all property \$

That she is now a bona fide resident citizen of said County of *Cobb* and she has so continuously resided since *72 years* day of *May* 1917

Sworn to and subscribed before me, this the *25* day of *Sept* 1917 *Barb J Donahoe*
J M Galt Ordinary,
of *Cobb* County.

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

STATE OF GEORGIA,

Cobb County.

Personally before me come *J M Morris* 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 *Barb J Donahoe* who made the foregoing affidavit, is the lawful widow of *B F Donahoe* who died in *Cobb* County in said State of *Ga* on *25* day of *May* 1917 and that she has not since remarried. That she became the wife of *B F Donahoe* on the *2* day of *May* 1874 and that she and he had resided together as man and wife continuously since *May 25* 1917 and that the *B F Donahoe* was the same man who was on the pension roll of said State from *Cobb* County when he died.

Sworn to and subscribed before me, this the *20* day of *Sept* 1917 *J M Morris*
J M Galt Ordinary,
of *Cobb* County.

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,

County.

Personally before me comes who after being sworn on oath says, that they are freeholders of said County, and that they know of said County and knew her and husband at his death on the day of 1911 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 1911

Ordinary,

of County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County.

..... Ordinary of said County, do certify, that, I know Mrs. *Samuel J. Smith* the applicant for this pension and that she is the person who represents herself to be, and that she is a bona fide continuing resident of said County and was on the *for 20 years to my knowledge*

That I also know *John M. Smith* 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 *Cobb* County shows that returned property to the amount of *\$0* for 1908 *\$0* for 1909 *\$0* for 1910 *\$0*

Sworn under my hand and official seal of office this *Oct 7* day of *Oct* 1911

(SEAL.)

Ordinary.

County.

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

J. M. Gamm, Ord. Cobb County, Certif.,
that all Marriage records previous to
1868: were destroyed by Sherman's Army
J. M. Gamm
Ord. Cobb Co.

J. M. Gann
Ordinary Cobb Co.
Ga

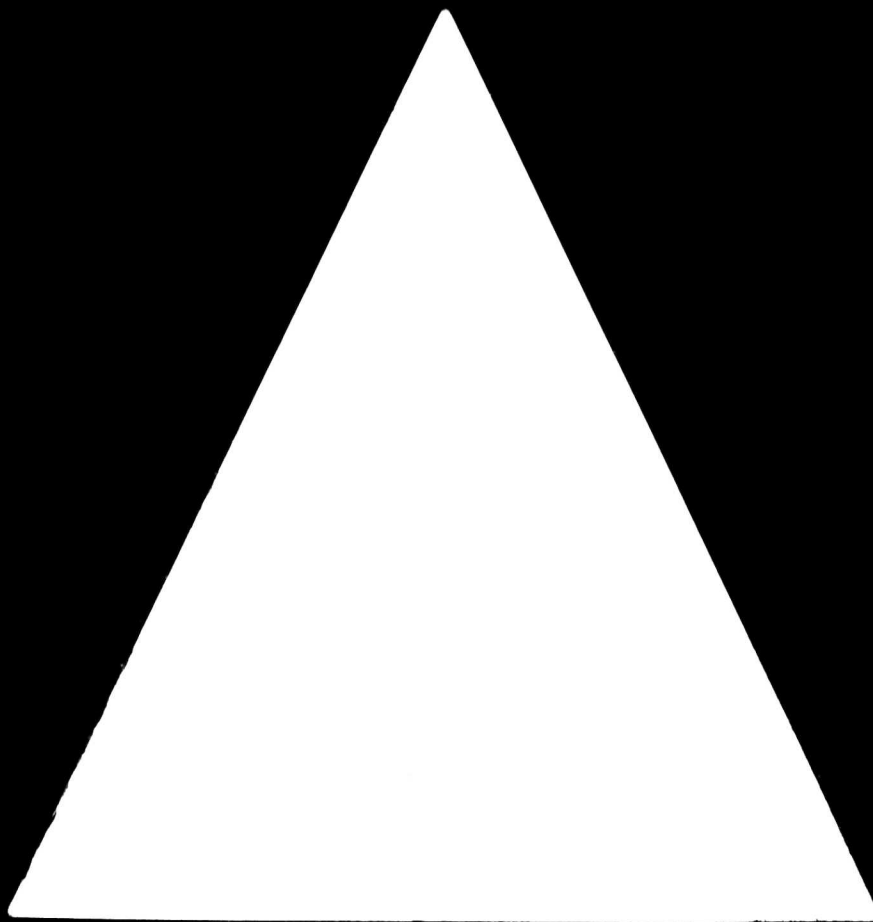
OFFICE OF
J. M. GANN
Judge of Probate Court
COBB COUNTY
MARIETTA, GA.

Georgia Cobb County:

Personally appeared before the undersigned
S.W.Frey, who being duly sworn, on oath says that he knew B.F. Donahoo
in his lifetime, and that he has known him ever since 1855, and that
he knew his wife before she married the said B.F. Donahoo, ~~and~~ in
year of 1861, and that the said Sarah J. Donahoo and B.F. Donahoo
lived together as man and wife until his death in 1917 and that
she is now his lawful widow.

Sworn to and subscribed to before me *S. W. Frey*
this January 2nd 1917

J. M. Gann
Ordinary Cobb County Ga



POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, *B. J. Donahoo* hereby authorize
Eliza of *Macon Ga*

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

him at *Macon* by

Witness my hand and seal this *26th* day of *July* 1897.

Executed in presence of

B. J. Donahoo } *B. J. Donahoo*

Pension Office 5/10/1897
It appears that applicant
owned household furniture
in ~~1895~~ 1896 which he
does not value but he
returned his property in
1895 at \$450.00 - It is
to be presumed that
is same property, no ex-
planation being made
Rich Johnson
Cork of Pension

B. J. Donahoo, Benjamin
Cobb County
No. 3088

INDIGENT PENSION
1897.

Name *B. J. Donahoo*
County *Cobb*

Approved *8/6* 1897

WARRANT HANDLED TO

R. C. Linn

Geo. W. Harrison, State Printer, Atlanta.

B. J. Donahoo
7/23/97
7/31/97

County.

Cobb
James H. Chadwick, of said State and County, having been presented as a witness in support of the application of *Benjamin D. Donelson* 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? *My name is James H. Chadwick and I reside in Cobb Co Ga*
2. Are you acquainted with *Benjamin D. Donelson*, the applicant, if so how long have you known him? *I have known him for forty years*
3. Where does he reside, and how long has he been a resident of this State? *He resides in Cobb Co Ga and has been a resident here for forty years to my own knowledge*
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? *I know that he was in the Confederate Service as a private in the 46th Regt of Infantry, Ellis Battery, because I was a member of the same Battery*
5. When, where and in what company and regiment did he enlist? *He enlisted in July, or August 1862 in the 46th Regt in the Battery at Callahan Ga. & joined the Command of Richmond Va.*
6. Were you a member of the same company and regiment? *I was a member of the same Battery*
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? *He performed regular duty in this Battery until the surrender - but was under a thirty days furlough at the time of the surrender which was the only furlough applicant was had -*
8. What property, effects or income has the applicant? (Give your means of knowledge.) *He has no property except household and kitchen furniture. Has no income*
9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if any did he make of same? *He possessed no other property during those years except the household and kitchen furniture*
10. What is the applicant's occupation and physical condition? *He is a carpenter, and is greatly suffering from piles and hemorrhoidal tumors*
11. Is the applicant unable to support himself by labor of any sort, if so, why? *He is unable to support himself by labor of any sort because of the disease mentioned in my answer to the 10th question*
12. How was he supported during the years 1895 and 1896? *He was supported during those years by the labor of a Negro Son & what his he could give him*
13. What portion of his support for those two years was derived from his own labor or income? *Any work I do but from my knowledge of his condition I would say that he is unable to do any work*
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? *As before stated, he is a great sufferer from piles and hemorrhoidal tumors and has been so since 1863 some years ago for operation was so great that he had a surgical operation for removal and is still suffering from the disease*
15. What interest have you in the recovery of a pension by this applicant? *I have no interest in the recovery of his pension - He was a good and true soldier and comrade*

Sworn to and subscribed before me, this

the 19th day of May 1897.

Witness

Ordinary.

County.

Personally came before me

and

Cobb
A. E. Johnson, both known to me as reputable physicians of said county, who being severally sworn say on oath that they have examined carefully *B. D. Donelson*, applicant for pension under the Act of 1894, and after such personal examination say that his precise physical condition is as follows:

About four years ago Donelson was performing an operation on the applicant for hemorrhoidal tumors and still suffers from similar tumors and this condition is permanent rendering him wholly unable to perform manual labor sufficient to earn a support or to be able to work and hard labor and is ineligible for duty during the war.
 We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this

the 19th day of May 1897.

Ordinary.

ORDINARY'S CERTIFICATE.

County.

Cobb
 I, *John M. Stone*, Ordinary in and for said County, hereby certify that the applicant *Benjamin D. Donelson* 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: *James H. Chadwick and A. E. Johnson & W. R. Montgomery* 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 *Cobb* County show that applicant returned for taxation in his name in 1895, *\$450.00* dollars of property, and in 1896, *nothing* dollars of property.

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

Witness my hand and seal of office, this 19th day of May 1897.

Ordinary

of *Cobb* County.

NOTE.

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

POWER OF ATTORNEY.

State of Georgia.

Cobb County.

B. F. Donohoe hereby authorize

of

Marionetta 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

day of *May* 1898.

B. F. Donohoe

[L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA

Cobb County.

I,

B. F. Donohoe

hereby authorize

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

me

at

by

him

Witness my hand and seal this *6* day of *May* 1898.

Executed in presence of

B. F. Donohoe

(For Those Already Enrolled.)

NO. *2878*

INDIGENT

SOLDIER'S PENSION,

1898.

Name

B. F. Donohoe

County

Cobb

WARRANT ISSUED

July 8

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

See

Geo. W. Harrison, State Printer, Atlanta

Donohoe B. F.

Cobb Co.

CODE REG. 1284.

(For Those Already Enrolled.)

No. *1136*

INDIGENT

SOLDIER'S PENSION,

1899.

Name

B. F. Donohoe

County

Cobb

WARRANT ISSUED

1/14

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison by L. J. A.

Geo. W. Harrison, State Printer, Atlanta

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County,

Personally appears

B. F. Donahoo 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 *15* day of *Sept.* 18*38*; that he is *58* years old and by occupation a *Farmer*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States and served for the term of *2 1/2* yrs in Company *Macon Light Artillery* (or of the *1st* Regt. of *Artillery*); that his physical condition is as follows:

And on account of *infirmity* and *poverty* he is unable to support himself by 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

29 day of *Aug.* 1898.

B. F. Donahoo

Ordinary.

State of Georgia,

Cobb County,

I, _____

do certify that I am well acquainted with *B. F. Donahoo* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 *Aug.* 1898.

J. M. Stone

Ordinary

Cobb County.



NOTE—The blank spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County,

Personally appears

B. F. Donahoo 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 *15* day of *Sept.* 18*38*; that he is *60* years old and by occupation a *Farmer*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served for the term of *3 1/2* yrs in Company *Macon Light Artillery* (or of the *1st* Regt. of *Artillery*); that his physical condition is as follows:

On account of *disease* 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 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

6 day of *Aug.* 1899.

B. F. Donahoo

Ordinary.

State of Georgia,

Cobb County,

I, _____

do certify that I am well acquainted with *B. F. Donahoo* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 *Aug.* 1899.

J. M. Stone

Ordinary

Cobb County.



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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, B. F. Donahoe hereby authorize

of

Minnetta Ga.

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

by him at me

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

B. F. Donahoe [L. S.]

Executed in presence of

M. J. Hawley

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, B. F. Donahoe hereby authorize

of

Manella

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

by hand at Manella

Witness my hand and seal, this 9 day of January, 1901.

B. F. Donahoe [L. S.]

Executed in presence of

Jos M Gann

Donahoe, B. F.

Cobb Co.

CODE SEC. 1284.

(For Those Already Enrolled.)

NO. 506

INDIGENT

**SOLDIER'S PENSION,
1900.**

Name B. F. Donahoe

County Cobb

WARRANT ISSUED

January 8 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

J. F. Donahoe

Gen. W. Harrison, State Printer, Atlanta.

No later

Donahoe, B. F.

Cobb Co.

CODE SECTION 1284

(For Those Already Enrolled.)

No. 241

INDIGENT

**SOLDIER'S PENSION.
1901.**

Name B. F. Donahoe

County Cobb

WARRANT ISSUED

Jan 15 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Donahoe

Gen. W. Harrison, State Printer, Atlanta.

No later

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears B. F. Donahoo 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 15th day of Sept 1838; that he is 61 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 3 1/2 years in Company Massons Light Artillery Co. Vols.; that his physical condition is as follows: On account of disease, infirmity 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.

State of Georgia,

Cobb County.

I, J. W. Stave Ordinary of said County, do certify that I am well acquainted with B. F. Donahoo the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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.

Ordinary

Cobb

County.

NOTE.—The blank spaces must be filled.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears B. F. Donahoo 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 15th day of Sept 1838; that he is 62 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 3 1/2 years in Company Massons Light Artillery Co. Vols.; that his physical condition is as follows: On account of disease, infirmity 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 1901. I have heretofore as a resident of Cobb county been allowed a pension for the year 1900.

Sworn to and subscribed before me, this, the

9th day of January 1901.

Ordinary.

STATE OF GEORGIA,

Cobb County.

I, John Artry Ordinary of said County, do certify that I am well acquainted with B. F. Donahoo the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1901.

Ordinary

Cobb

County.

NOTE.—The blank spaces must be filled.

NOTE.—Affidavit should not be attested before January 1st, 1901.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, B. F. Donahoe hereby authorize John Clutney of _____ to receive and receipt for the pension allowed and request that he remit same to _____ at Monetta by _____

Witness my hand and seal, this 15 day of January 1902.
B. F. Donahoe [L. S.]

Executed in presence of
J. H. Curre

(FOR THOSE ALREADY ENROLLED)

No. 297

INDIGENT

**SOLDIER'S PENSION
1902.**

Name B. F. Donahoe
County Cobb

Co. _____ Regiment Mass. 1st Artillery
WARRANT ISSUED

1902

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

Clutney
[L. S.]

W. H. Harrison

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, B. F. Donahoe hereby authorize John Clutney of _____ to receive and receipt for the pension allowed and request that he remit same to _____ at _____ by _____

Witness my hand and seal, this 1 day of Jan 1903.
B. F. Donahoe [L. S.]

Executed in presence of

W. H. Harrison

(FOR THOSE ALREADY ENROLLED)

No. 453

INDIGENT

**SOLDIER'S PENSION
1903.**

Name B. F. Donahoe
County Cobb

Co. _____ Regiment Mass. 1st Artillery
WARRANT ISSUED

1903

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

Clutney
[L. S.]

W. H. Harrison

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County.

Personally appears *B. F. Donahoo* 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 *15th* day of *Sept.* *1838*; that he is *63* years old and by occupation a *farmer* that he enlisted in the military service of the Confederate States (or of the State of) during the war between the

States, and served for the term of *3 1/2 yrs* in Company *Mason's Light Infantry* of *Ga. Vols.*; that his physical condition is as follows: *On account of disease, infirmity 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 1902. I have heretofore as a resident of *Cobb* county been allowed a pension for the year 1901

Sworn to and subscribed before me, this the

day of *January* 1902.

Ordinary.

STATE OF GEORGIA,

County.

I,

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

Given under my official signature and seal, this

day of *January* 1902.

Ordinary.

County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County.

Personally appears *B. F. Donahoo* 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 *15th* day of *Sept.* *1838*; that he is *64* years old and by occupation a *farmer* that he enlisted in the military service of the Confederate States (or of the State of) during the war between the

States, and served for the term of *3 1/2 yrs* in Company *Mason's Light Infantry* of *Ga. Vols.*; that his physical condition is as follows: *On acct of age, infirmity, 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 1903. I have heretofore as a resident of *Cobb* county been allowed a pension for the year 1902

Sworn to and subscribed before me, this the

day of *January* 1903.

Ordinary.

STATE OF GEORGIA,

County.

I,

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

Given under my official signature and seal, this

day of *Jan* 1903.

Ordinary.

County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

I, *B F Donahoe* hereby authorize

John Lindsey of

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

at

by

Witness my hand and seal, this

2 day of *Jan*

1904.

B F Donahoe

[L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

I, *B F Donahoe* hereby authorize

John Lindsey of

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

at

by

Witness my hand and seal, this

5 day of *Jan*

1905.

B F Donahoe

[L. S.]

Executed in the presence of

John Lindsey

INDIGENT SOLDIER'S PENSION 1904.

Name *B F Donahoe*
County *Cobb*
Co. *1st Cavalry*

WARRANT ISSUED

1904.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Geo W. Harbison, State Printer, Atlanta.

no date

Donahoe, B. F.
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. *707*

INDIGENT SOLDIER'S PENSION 1905.

Name *B F Donahoe*
County *Cobb*
Co. *1st Cavalry*

WARRANT ISSUED

JAN 23 1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harbison, State Printer, Atlanta.

no date

STATE OF GEORGIA

FOR APPLICANTS HERETOFORE ATTORNEYED PENSIONERS

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears *B. F. Donahoo* 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 *10* day of *Sept* 1838; that he is *60* years old and by occupation a *farmer*, that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served for the term of *3* years in Company *Major's Light Artillery* of *the 1st* *Infantry*; that his physical condition is as follows: *on account of infirmity and poverty, unable to support himself*

that his property consists of the following items:

nothing

of the value of *nothing* Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of *Cobb* County been allowed a pension for the year 1903.

Sworn to and subscribed before me, this the *10* day of *Sept* 1904. *B. F. Donahoo* Ordinary.

STATE OF GEORGIA,

Cobb County.

I, *John C. Coker* Ordinary of said County, do certify that I am well acquainted with *B. F. Donahoo* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 *Sept* 1904.

John C. Coker Ordinary.

Cobb County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears *B. F. Donahoo* 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 *10* day of *Sept* 1838; that he is *65* years old and by occupation a *farmer*, that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served for the term of *3* years in Company *Major's Light Artillery* of *the 1st* *Infantry*; that his physical condition is as follows: *Infirmary & poverty*

that his property consists of the following items:

nothing

of the value of *nothing* 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 *Cobb* County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the *10* day of *Sept* 1905. *B. F. Donahoo* Ordinary.

STATE OF GEORGIA,

Cobb County.

I, *John C. Coker* Ordinary of said County, do certify that I am well acquainted with *B. F. Donahoo* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 *Sept* 1905.

John C. Coker Ordinary.

Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY. }
I, B. F. Donahoo hereby authorize
John H. Wiley of _____
to receive and receipt for the pension allowed, and request that he remit same to
_____ at _____
by _____

WITNESS my hand and seal, this 3 day of July 1906.
B. F. Donahoo [I. S.]

Executed in the presence of
W. H. Mann

COUS SECTION 1234
(FOR THOSE ALREADY ENROLLED.)

No. 550-

INDIGENT SOLDIER'S PENSION 1906.

Name B. F. Donahoo
County Cobb
Co. _____ Regiment _____
Wm. Light Artillery
WARRANT ISSUED
11 2 2 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT-HANDLED TO
Wiley

THE PENSIONER'S PENSION AND RECEIPT OF THE U. S. DEPARTMENT OF WAR

not data

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY. }
I, B. F. Donahoo hereby authorize
John H. Wiley of _____
to receive and receipt for the pension allowed, and request that he remit same to
_____ at _____
by _____

WITNESS my hand and seal, this 8 day of July 1907.
B. F. Donahoo [I. S.]

Executed in presence of
W. H. Mann

COUS SECTION 1234
(FOR THOSE ALREADY ENROLLED.)

No. 558

INDIGENT SOLDIER'S PENSION 1907.

Name B. F. Donahoo
County Cobb
Co. Wm. Light Artillery

WARRANT ISSUED

JAN 21 1907

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT-HANDLED TO
Wiley

THE PENSIONER'S PENSION AND RECEIPT OF THE U. S. DEPARTMENT OF WAR

not data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Cobb County.

Personally appears B F Donahoo 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 _____ day of _____ 18____; that he is _____ years old and by occupation a _____, 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 _____ in Company _____ of _____ th Regiment of Macon Light Artillery 1862 that his physical condition is as follows: Infirmary & Poverty

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this the 3 day of July 1906. B F Donahoo Ordinary.

State of Georgia,

Cobb County.

I, John H. Hooten Ordinary of said County,

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

Given under my official signature and seal, this 3 day of July 1906.

John H. Hooten Ordinary Cobb 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,

Cobb County.

Personally appears B F Donahoo 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 _____ 18____; that he is _____ years old and by occupation a _____, 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 _____ in Company Macon Light Artillery of 1st th Regiment of Gen. Dull; that his physical condition is as follows: eye & Infirmary

that his property consists of the following items:

of the value of _____ Dollars. I am now earning by my labor, _____ 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 Cobb County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 3 day of July 1907. B F Donahoo Ordinary.

State of Georgia,

Cobb County.

I, John H. Hooten Ordinary of said County,

do certify that I am well acquainted with B F Donahoo the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 July 1907.

John H. Hooten Ordinary Cobb County.



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

Georgia Cobb County

Personally came & examined who upon oath says that the property returned by him in 1893 was and is now the property of his wife which she inherited by the said father's estate. He was simply acting as her agent. It is the understood & mentioned in this application as his wife's home stead - 4.0 acres of land.

That he has no property, ^{formation} except his household and kitchen which is worth possibly twenty dollars.

Sworn to and subscribed before me }
this July 26th 1897. } B.F. Donahoe
J.M. Stone }
Only.

Georgia Cobb County

Personally appears W.R. Montgomery, Clk. of the Supr. Ct. in and for said County who on oath says he is the keeper of the records of Deeds in and for said County and that B.F. Donahoe the applicant for permission in application to which this is attached does not own any real estate in this County, ^{as appears of record} and has not for some years back. The last he owned ^{as appears of record} was sold ~~from~~ ^{to} to pay his debts.

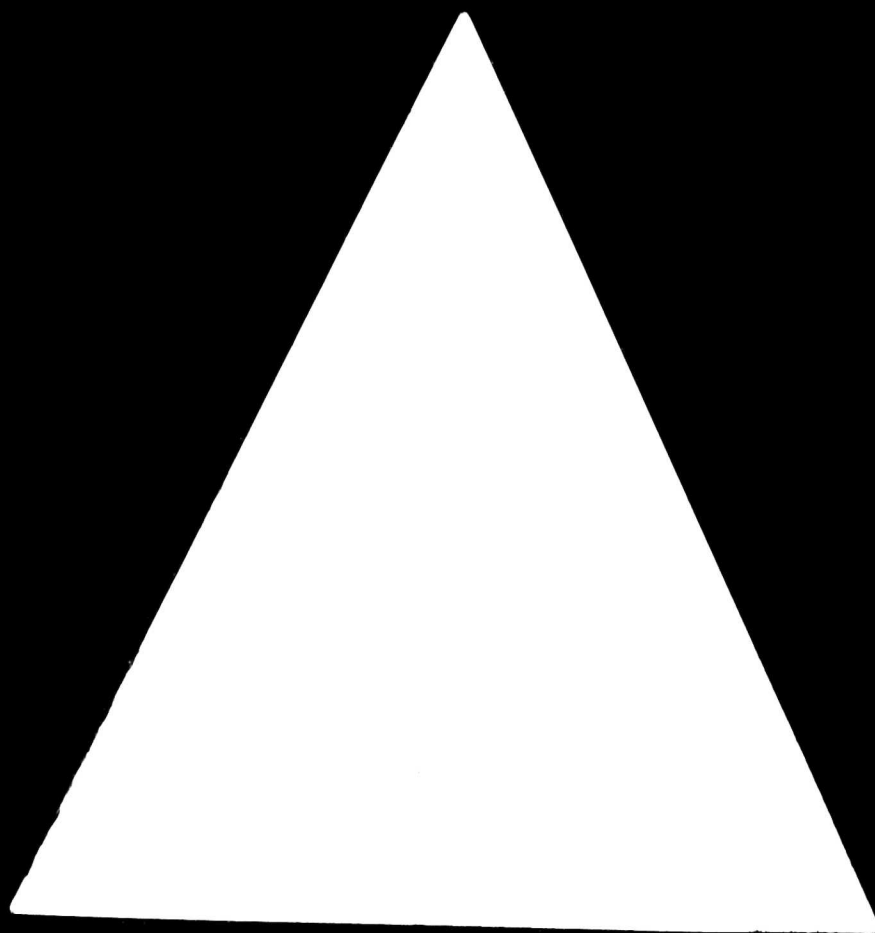
Sworn to & subscribed

before this July 21st 1897

J.M. Stone

Only

W.R. Montgomery, Clk.



Ordinary's Certificate

STATE OF GEORGIA,

Hall COUNTY }

I, W. H. Hatcher Ordinary of said County, do certify that I know _____ 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 W. H. Hatcher & R. V. Chapman 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 13 day of October 1919
(SEAL) W. H. Hatcher Ordinary, HALL County

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witnesses in the following words: "You shall solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give to the best of your knowledge and belief." 2. Additional affidavits may be attached if blank space 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. 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 1910.

County Boh

Name Wm. Cornelia Dorsey

Widow of James H. Dorsey

Company D.

Regiment 27

Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-30-1919

Aug 10, 1961 -
Examinated by S. L. ...
...
... 1, 1961.

Dorsey, Cornelia
Cable 1919

STATE OF GEORGIA,

Hall

COUNTY.

I, J. M. Whischel Ordinary of said County, do certify that I knew _____ 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 J. M. Whischel and R. J. Seymour 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 13 day of October 1919

(SEAL)

J. M. Whischel

Ordinary.

Hall

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

Name

Widow

Company

Regiment

Approved

J. W. LINDSEY,

Commissioner of Pensions.

Byrd Printing Co., State Printing, Atlanta.

10-30-1919

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

Questions for Applicant

STATE OF GEORGIA,

Cobb

COUNTY.

Personally before me comes Mrs. Cornelia Dorsey 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. Cornelia Dorsey, Marietta, Ga.
2. How long and since when have you been a continuing resident of the State of Georgia? Eight, two years. Since April 29, 1897.
3. When, where and to whom were you married? March 20, 1873, at Marietta, Ga. to Joseph N. Dorsey.
4. Have you married since the death of first and soldier husband? No
5. 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.) Organized Co. "D" 27th Ga. Inf. in Hall Co. Ga. in 6/14/62 and ordered to service as Captain of same; Person known well to R. J. Gann. Battle of Atlanta, Ga. & R. Lee. 1865 in which he was my recollection.
6. Was your husband personally present at the time of the surrender or discharge of this command? Yes.
7. If he was not present state clearly where he was?
8. Where was his command when he left?
 - a. For what cause did he leave his command?
 - b. By whose authority did he leave his command?
 - c. For how long was he granted leave of absence?
 - d. What was his physical condition when he left his command?
 - e. What effort did he make to return to his command?
 - f. In what way was he prevented from going back to Command
 - g. Was he captured by the enemy at any time?
 - h. If so, when and where captured and where held as a prisoner, and when and for what cause released?
9. When and where did your first husband die? Dec 5, 1883, Gainesville, Ga.
10. Were you residing together when he died? Yes
11. If not, how long had you resided apart? X
12. Are you now a widow? Yes
13. Have you or your husband heretofore been paid a pension by the State? No

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

Sworn to and subscribed before me this the

27 day of September 1919
J. M. Gann Ordinary
Cobb County.

(SEAL)

Mrs. Cornelia Dorsey
 I J. M. Gann, Ordinary of Cobb Co., Ga. certify that I know the applicant Mrs. Cornelia Dorsey, and she is a Resident of said County, and her statements are entitled to full faith and credit.

J. M. Gann Ordinary,
 Cobb Co., Ga.

Dorsey, Cornelia
Cobb Co. Ga. 1919

Aug 10, 1861 -
Discharged, to S. J. Gann
of General Grant's Division
April 1, 1864.

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA,

Hall COUNTY.

Personally before me comes J. M. Merck and R. T. Seymour who, after being duly sworn, true answers to make to the following questions, answers as follows:

1. What is your name and where do you reside? J. M. Merck, R. T. Seymour
Hainesville Hall County Georgia
2. How long and since when have you known Mrs. Cornelia Dorsey applicant?
since 1873 41 years
3. How long and since when has she continuously resided in this State? (Give date.)
since 1873 to my knowledge
4. When and to whom was she married? Jasper H Dorsey How do you know?
5. How long and since when did you know Sixty years her husband?
6. When and where did Jasper H Dorsey the husband of applicant, die?
1883 - Hainesville Hall County Ga
7. Were the applicant and her husband living together as husband and wife at the date of his death?
Yes
8. If not, how long did they live apart before his death? —
9. When, where and in what Company and Regiment did Jasper H Dorsey enlist?
Last of August 1864 - 1st Co. B. Georgia Battalion
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? from last of August to surrender 1865
12. When and where did his Command surrender, and was discharged? The last of April or first of May 1865 - Camden S. Co.
13. Were you personally present when it was surrendered? Yes If not, where were you — and how came you there? —
14. Was the husband of applicant personally present at surrender? Yes If not where was he? — When, where and for what cause did he leave Command? (Give date.) — By whose authority did he leave his Command? — And how long was he granted leave? — How do you know all this? —
15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command? —
16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? —

Sworn to and subscribed before me this the

10 day of October 1869

M. M. Merck Ordinary

of Hall County.

(SEAL)

J. M. Merck

R. T. Seymour

J. M. Merck answered all questions except question 9
R. T. Seymour answered question 9 & 11

must in 5. He answered as Captain of Co. A
Then promoted to First Co.

Office of Ordinary

GEORGIA, Cobb County.

I, J. M. GANN, Ordinary and Ex-Officio Clerk of the Court of Ordinary (I having no clerk), do hereby certify that I have compared the foregoing copy of

Marriage Record
of Jasper N. Bates, Jr. & Junia
Caroline Brown,

with the original record thereof, now remaining in this office, and the same is a correct transcript therefrom, and of the whole of such original record as found in book *"A"*, records of *Marriage*, folio *459*.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of the Court of Ordinary, this the *16* day of *October*, 191*7*.

J. M. Gann
Ordinary and Ex-Officio C. C. O.

GEORGIA, Cobb County.

I, J. M. GANN, Ordinary and Ex-Officio Clerk of the Court of
Ordinary (I having no clerk), do hereby certify that I have compared the
foregoing copy of *Marriage Record*
of *Jasper N. Bolen, Jr. & Junius*
Cornelia Brown,

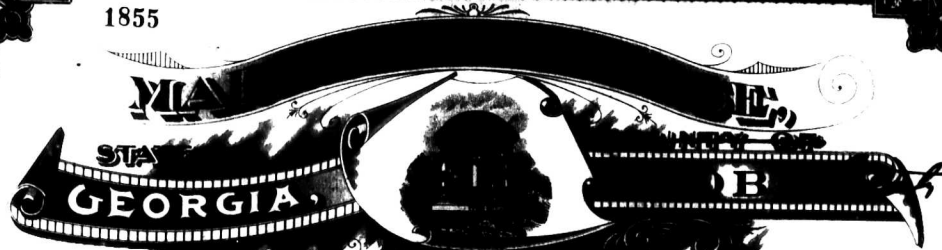
with the original record thereof, now remaining in this office, and the same
is a correct transcript therefrom, and of the whole of such original record
as found in book *"A"*, records of *Marriage*
_____, folio *459*.

IN TESTIMONY WHEREOF, I have hereunto set my hand
and affixed the seal of the Court of Ordinary, this the *16* day
of *October* 191*7*.

J. M. Gann

Ordinary and Ex-Officio C. C. O.

1855



To ALL WHOM THESE PRESENTS SHALL COME, MINISTER OF THE GOSPEL, Judge of the Superior Court or Justice of the Peace to be elected:
in the Honorable State of matrimony, you are hereby authorized to join
Jasper N. Dorsey and Mrs. Junius Cornelia Brown
in the celebration 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 29th day of
April 1873 H. M. Hammett (L.S.)
Ordinary

STATE OF GEORGIA

CERTIFICATE

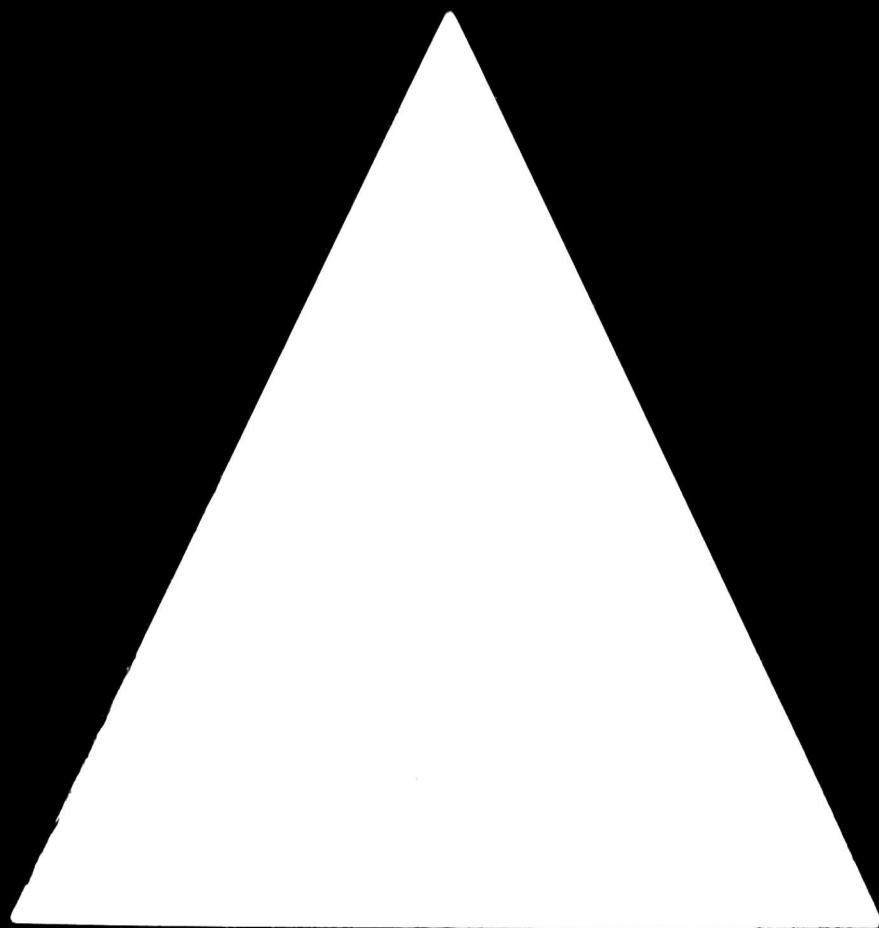
COBB COUNTY

I Certify that Jasper N. Dorsey and Mrs. Junius Cornelia Brown
were joined in Matrimony by me on the 2nd day of May 1873 between Hundred
and

Recorded May 2^d 1873 H.

H. M. Hammett Ordinary.

D. L. Buttress (M. G.)



100-110

Dorsey
Cobb
C. H. Dorsey

No. *1*

**Confederate
Soldier's Application.**

UNDER ACT 1910.

County *Cobb*
Name *J. M. Dorsey*
Company *C*
Regiment *30th Ga*

Approved

J. W. [illegible]
[illegible]

CHAS. P. BYRD, State Printer

8/10 *11/15/11*

ENTERED ROSTER OFFICE

...valuation of property based on tax ...
 ...valuation from one half to one third ~~the~~ in value.
 ...tax valuation, and will be allowed to

11/15/11
 ENTERED POSTER OFFICE

Approved

Company

Regiment

Name

County

UNDER ACT 1910.

Soldier's Application.

Confederate

No. 1

11/15/11

11/15/11

11/15/11

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

County of Effingham

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 company 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. Dancy, 1111 1/2 Ave. S.W., Atlanta, Ga.

2. How long and since when have you been a continuous resident citizen of this State? Since May 6, 1865, 77 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 arms used.) August 1862 in Co. E, 30th Ga. Infantry

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) March 16, 1864, at this date I was discharged from the service

6. When and where was your Company and Regiment surrendered or discharged from the service? My Co. E, 30th Ga. Inf. was surrendered on March 16, 1864, at Nashville, Tenn. I was sent to prison

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 and was captured with my Co. E, 30th Ga. Inf.

a. Where was your Command when you left it? At Nashville, Tenn.

b. When did you leave the Command? March 16, 1864

c. For what cause did you leave? None

d. By whose authority did you leave? None

e. For how long was your leave granted? In what way? None

f. Why did you not return to your Command after leave expired? None

g. In what way were you prevented? None

h. What effort did you make to return? None

i. Were you captured during the war? Yes

j. If so, when and where? In what prison were you held and when were you released? December 10, 1864, at Nashville, Tenn. I was sent to Camp Douglas, Ill. and was released on January 13, 1865, at Nashville, Tenn.

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.) 13 Cases of hard ware \$200.00 of which I own 12 and 1 is owned by my wife. I also own 1000 ft. of land at 120.00 per acre. I also own 1000 ft. of land at 120.00 per acre. I also own 1000 ft. of land at 120.00 per acre. Total \$1425.00

10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov., 1908. To whom and for what price? None

11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemized list) 13 Cases of hard ware \$200.00 of which I own 12 and 1 is owned by my wife. I also own 1000 ft. of land at 120.00 per acre. I also own 1000 ft. of land at 120.00 per acre. I also own 1000 ft. of land at 120.00 per acre. Total \$1425.00

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

13. Are you drawing a pension of any amount from this State or the United States? Yes

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? Yes

Sworn to and subscribed before me, this the 11th day of August, 1912, at the County of Effingham

J. M. Dancy

J. M. Dancy

J. M. Dancy

J. M. Dancy

J. M. Dancy

J. M. Dancy

J. M. Dancy

J. M. Dancy

J. M. Dancy

STATE OF GEORGIA.

Coch County.

M. A. Dorsey as a witness in support of the application of *M. A. Dorsey* for the pension provided by the Act of 1910, in said State, and after being sworn true answers to the questions propounded answers as follows:

- What is your name and where do you reside? *M. A. Dorsey, 574 years old, married, lives in Coch County, Georgia.*
- How long and since when have you known the applicant? *Since 1864.*
- 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 now resides in Coch County, Georgia, and has been a resident since 1864.*
- When, where and in what Company and Regiment did he enlist during war from 1861 to 1865? (Give date and place) *August 1862, Company B, 1st Georgia Infantry, 1st Regiment.*
- How did you obtain your information of this Service? *I was a member of the same Co. and Regiment.*
- How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) *Until December 16, 1864, when the Co. was captured.*
- When and where was his Command surrendered or discharged (give date and place) *His Command was captured Dec. 16, 1864, at Nashville, Tenn.*
- Were you personally present at the Surrender? *Yes.*
- If not, where were you and how came you there? *I was present.*
- Was the applicant personally present with his Command at surrender? *Yes.*
- If not where was he and how came him there? *He was present.*
- When did he leave his Command? *Dec. 16, 1864.* Where was his Command when he left it? *At Nashville, Tenn.* for what cause did he leave? *His Command was captured.*
- By whose authority did he leave? *By the authority of the Command.* and how long was he granted leave? *He was granted leave until he was recaptured.* How do you know that you have stated to be true? *I know him personally.*
- What way did he prevent from returning to his Command? *He was captured.* How do you know? *I know him personally.*
- What effort did he make to return to his Command and how do you know? *He made no effort to return.*
- Was applicant captured as a prisoner? *Yes.* If so, when and where? *Dec. 16, 1864, at Nashville, Tenn.* In what prison was he held? *He was held in the prison at Nashville, Tenn.* and when released? *He was released in May, 1865.*

Sworn to and subscribed before me, this the *11th* day of *August*, 1910, at *Coch* County, Georgia.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA. *Coch* County.

Personally before me comes *M. A. Dorsey* who on oath says that they are free holders residing in said County 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 item and value.) *131 acres of land, 1/2 of which is in the hands of the State, and 1/2 of which is in the hands of the State, and 1/2 of which is in the hands of the State.*

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

1910. (State of Georgia) *Coch* County. Sworn to and subscribed before me, this the *11th* day of *August*, 1910, at *Coch* County, Georgia.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA. *Coch* County.

Ordinary of said County, certify that I know the applicant *M. A. Dorsey* for Pension in the person he represents himself to be and resides in said County. That I also know *M. A. Dorsey* the witness swearing to the service and *M. A. Dorsey* 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 entitled and trustworthy and their statements are entitled to full faith and credit. That the Tax Receipts *Coch County* shows that *M. A. Dorsey* and wife value for tax is in 1865 *131 acres* for 1866 *131 acres* for 1867 *131 acres* for 1868 *131 acres* for 1869 *131 acres* for 1870 *131 acres* for 1871 *131 acres* for 1872 *131 acres* for 1873 *131 acres* for 1874 *131 acres* for 1875 *131 acres* for 1876 *131 acres* for 1877 *131 acres* for 1878 *131 acres* for 1879 *131 acres* for 1880 *131 acres* for 1881 *131 acres* for 1882 *131 acres* for 1883 *131 acres* for 1884 *131 acres* for 1885 *131 acres* for 1886 *131 acres* for 1887 *131 acres* for 1888 *131 acres* for 1889 *131 acres* for 1890 *131 acres* for 1891 *131 acres* for 1892 *131 acres* for 1893 *131 acres* for 1894 *131 acres* for 1895 *131 acres* for 1896 *131 acres* for 1897 *131 acres* for 1898 *131 acres* for 1899 *131 acres* for 1900 *131 acres* for 1901 *131 acres* for 1902 *131 acres* for 1903 *131 acres* for 1904 *131 acres* for 1905 *131 acres* for 1906 *131 acres* for 1907 *131 acres* for 1908 *131 acres* for 1909 *131 acres* for 1910 *131 acres* for 1911 *131 acres* for 1912 *131 acres* for 1913 *131 acres* for 1914 *131 acres* for 1915 *131 acres* for 1916 *131 acres* for 1917 *131 acres* for 1918 *131 acres* for 1919 *131 acres* for 1920 *131 acres* for 1921 *131 acres* for 1922 *131 acres* for 1923 *131 acres* for 1924 *131 acres* for 1925 *131 acres* for 1926 *131 acres* for 1927 *131 acres* for 1928 *131 acres* for 1929 *131 acres* for 1930 *131 acres* for 1931 *131 acres* for 1932 *131 acres* for 1933 *131 acres* for 1934 *131 acres* for 1935 *131 acres* for 1936 *131 acres* for 1937 *131 acres* for 1938 *131 acres* for 1939 *131 acres* for 1940 *131 acres* for 1941 *131 acres* for 1942 *131 acres* for 1943 *131 acres* for 1944 *131 acres* for 1945 *131 acres* for 1946 *131 acres* for 1947 *131 acres* for 1948 *131 acres* for 1949 *131 acres* for 1950 *131 acres* for 1951 *131 acres* for 1952 *131 acres* for 1953 *131 acres* for 1954 *131 acres* for 1955 *131 acres* for 1956 *131 acres* for 1957 *131 acres* for 1958 *131 acres* for 1959 *131 acres* for 1960 *131 acres* for 1961 *131 acres* for 1962 *131 acres* for 1963 *131 acres* for 1964 *131 acres* for 1965 *131 acres* for 1966 *131 acres* for 1967 *131 acres* for 1968 *131 acres* for 1969 *131 acres* for 1970 *131 acres* for 1971 *131 acres* for 1972 *131 acres* for 1973 *131 acres* for 1974 *131 acres* for 1975 *131 acres* for 1976 *131 acres* for 1977 *131 acres* for 1978 *131 acres* for 1979 *131 acres* for 1980 *131 acres* for 1981 *131 acres* for 1982 *131 acres* for 1983 *131 acres* for 1984 *131 acres* for 1985 *131 acres* for 1986 *131 acres* for 1987 *131 acres* for 1988 *131 acres* for 1989 *131 acres* for 1990 *131 acres* for 1991 *131 acres* for 1992 *131 acres* for 1993 *131 acres* for 1994 *131 acres* for 1995 *131 acres* for 1996 *131 acres* for 1997 *131 acres* for 1998 *131 acres* for 1999 *131 acres* for 2000 *131 acres* for 2001 *131 acres* for 2002 *131 acres* for 2003 *131 acres* for 2004 *131 acres* for 2005 *131 acres* for 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acres* for 2529 *131 acres* for 2530 *131 acres* for 2531 *131 acres* for 2532 *1*

Georgia Cobb County

Personally appeared before me J M Dorsey,
who being duly sworn says that on
November 4th 1878. that he had in his
possession and Control 131 acres of land
of which affiant owned a one Sixth interest
the same been inherited by affiant and
his children from his deceased wife
that all of his children having reached
their majority, that each obtained their
distributive share to make this division
it was necessary to sell said land.
That 80 acres of said land was sold to
Wm C. L. Scott for the sum of \$1500⁰⁰ leaving
50 acres now on the market and it is offered
for the sum of \$3000⁰⁰ but have not been able
to sell as yet at that price this would make
a total value of the estate \$4500⁰⁰ of which
affiant will receive 1/6 or \$750⁰⁰ this is
all the property affiant has of said
kind affiant has been forced to break
up home keeping and now lives
with his children. affiant makes
this acknowledgment to make it plain
and accurate as to the value of
all property he or interest in property he
now has

J. M. Dorsey

sworn to before me

this August 4th 1881

J. M. Dorsey

Ordinary

Georgia Cobb County

Personally appeared before me
J. L. Brooks and C. L. Scott well known
to me as reputable citizens of Cobb County
Ga. who being duly sworn says that they
are well acquainted with J. M. Dorsey being
neighbors to said Dorsey that they know
that said J. M. Dorsey inherited from his
deceased wife a one Sixth interest in
131 acres of land, and that a portion of said
land has been sold for \$1500. and the remainder
is now on the market and offered for the
price of \$3000⁰⁰ but is yet unsold that said
J. M. Dorsey receives and will receive
only one Sixth of the receipt from said
said sale, and that this is all the property
said J. M. Dorsey owns any interest therein
and that he now lives with his children

J. L. Brooks
C. L. Scott

Subscribed and sworn to
before me this Sept 5th 1881

J. M. Gann
Ordinary Cobb County

Georgia Cobb County

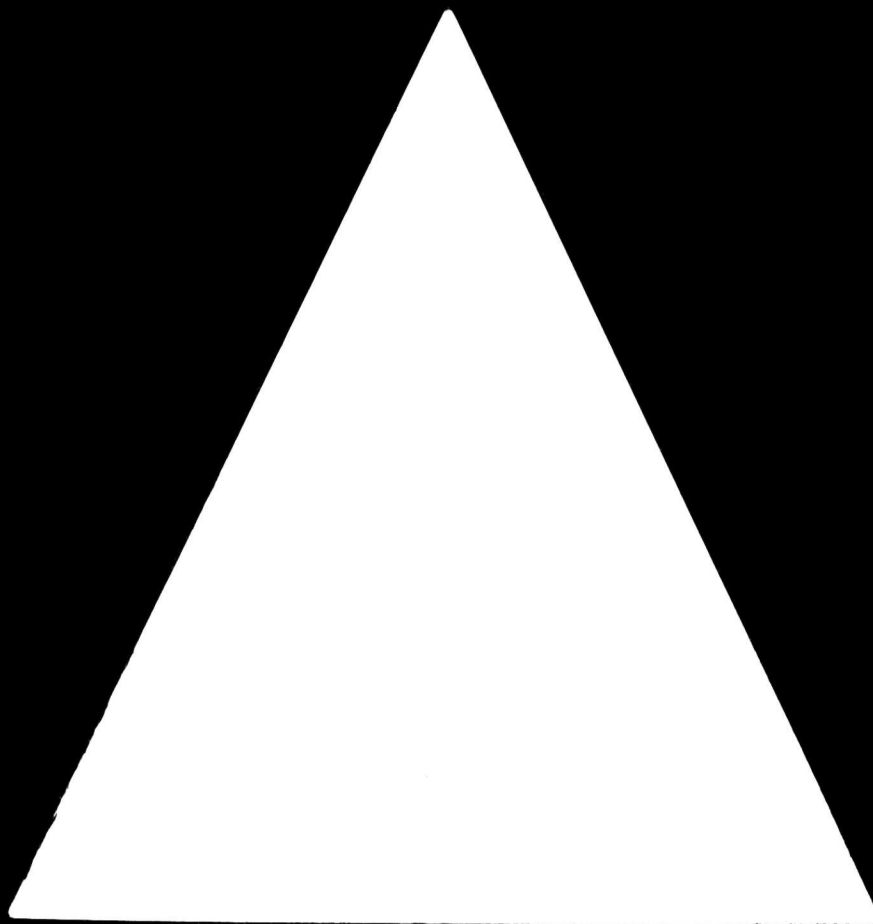
J. M. Gann Ordinary of said County. That
I know J. L. Brooks and C. L. Scott who are householders
and were duly sworn by me before signing
the above affidavit and that they are truthful and
trustworthy and their statements are entitled to
full faith & credit

Oct 30th 1881

J. M. Gann
Ordinary

Oct 30/11

J M Gamm
Ordinary



POWER OF ATTORNEY.

STATE OF GEORGIA.

P. F. Cobb COUNTY.

I, *P. F. Cobb*, hereby authorize

J. L. Stover of *Cobb* County, Georgia,

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

Witness my hand and seal this *24* day of *April* 1899.

Executed in presence of

P. F. Cobb

*Pay to R. C. Drinn
J. L. Stover*

*Doub, P. F.
Cobb Co.*

No. *3794*

INDIGENT PENSION

1899.

Name *P. F. Doub*
County *Cobb*

Approved *5/2* 1899.

RICHARD JOHNSON,
Commissioner of Penitents.

WARRANT HANDED TO

R C Drinn

Geo. W. HARRISON, STATE PRINTER, ATLANTA.

5/1, 99.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

I, P. F. Doub, hereby authorize
J. M. Stone of Marietta Ga
 to receive and receipt for the pension allowed, and request that he remit same to
me

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

Executed in presence of

P. F. Doub
Pay to R. C. Drinn
J. M. Stone

INDIGENT PENSION

1899.

Name P. F. Doub
 County Cobb

Approved 5/2 1899.

RICHARD JOHNSON,
 Commissioner of Pensions.

WARRANT HANDED TO

R. C. Drinn

STATE PRINTER, ATLANTA.

5/11.99.

Questions for Applicant.

STATE OF GEORGIA,

Cobb County.

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

1. What is your name and where do you reside? (Give State, County and post office)
P. F. Doub Cobb County Ga.
2. How long and since when have you been a resident of this State?
Became resident of Ga Dec 18th 1888
3. When and where were you born?
Nov Dec 14th 1838 - In N.C.
4. When and where and in what company and regiment did you enlist to serve?
Oct. 17th 1862 - at Greensboro N.C. - Co "B."
3rd Regt. N.C. Vols
5. How long did you remain in such company and regiment?
About two years
6. For how long a period did you discharge regular military duty?
Two years or more
7. When, where and under what circumstances were you discharged from service?
At the surrender in April 1865
8. What is your present occupation?
doing little odd jobs when able
9. How much can you earn (gross) per annum by your own exertions or labor?
Very little
10. What has been your occupation since 1865?
Clark when able to work
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 am disabled with Chronic diarrhea and have been since the war - continued it in the war - have been paralytic, paralyzed.
13. What property, effects or income do you possess, and its gross value?
Nothing at all
14. What property, effects or income did you possess in 1890, 1895, 1896, 1897 and 1898, and what disposition, if any, did you make of same?
I had no property during these years at all - had no income.
15. In what County did you reside during those years and what property did you then return for taxation?
In Cobb Co. Ga.
16. How were you supported during the years 1897 and 1898?
By my little work and by Charity
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?
\$100. or more - Very little
18. What was your employment during 1897 and 1898? What pay did you receive in each year?
doing little odd jobs when able - Very small amount
19. Have you a family? If so, who compose such family? Give their means of support? Have they a homestead?
Yes - myself & two children - Children supports themselves by work - No homestead
20. Are you receiving any pension? If so, what amount, and for what disability?
None

Sworn to and subscribed before me this the

29 day of April 1899.
J. M. Stone
 of Cobb County.

P. F. Doub

Applicant.

Every Question MUST be Answered.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Cobb COUNTY.

J. H. Murray of said State and County, having been presented as a witness in support of the application of *P. H. Doub* 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?
Cobb County Ga - J. H. Murray
2. Are you acquainted with *P. H. Doub*, the applicant; if so how long have you known him?
for 8 or 10 years
3. Where does he reside, and how long since when has he been a resident of this State?
In Cobb Co Ga - for 8 or 10 years
4. When, where and in what company and regiment did he enlist, and how do you know?
5. Were you a member of the same company and regiment?
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?

7. What property, effects or income has the applicant? (Give your means of knowledge.)

None at all - I am well acquainted with him and have known him for years

8. What property, effects or income did the applicant possess in 1896, 1897 and 1898, and what disposition, if any, did he make of same?

None at all

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

has not - has none to convey

10. What is the applicant's occupation and physical condition?

Doing little odd jobs - he is diseased with chronic diarrhoea and partially paralyzed

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

he is not - on account of his diseases and physical condition he can't work

12. How was he supported during the years 1897 and 1898?

by doing little odd jobs as by charitable friends

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

Very little

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

He is getting old is diseased is partially paralyzed - unable to work has no property nor income

15. What interest have you in the recovery of a pension by this applicant?

None at all

Sworn to and subscribed before me, this *29* day of *April* 1899.

J. H. Murray Witness.
J. H. Stone Ordinary.

also to nos 1, 2 & 3.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Cobb COUNTY.

Personally came before me *J. D. Malone* and *Dr. H. Simpson* both known to me as reputable physicians of said County, who being severally sworn, say on oath that they have examined carefully *P. H. Doub*, applicant for pension under Section 1254, Code, and after such personal examination say that his present physical condition is as follows:

He has a worse case of chronic diarrhoea of many years standing, which has rendered him very weak and feeble. About one year ago his lower extremities were paralyzed and he has never fully recovered use of same. 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 *29* day of *April* 1899.
J. D. Malone M.D.
Dr. H. Simpson M.D.
J. H. Stone Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cobb COUNTY.

I, *J. H. Stone*, Ordinary in and for said County, hereby certify that the applicant *P. H. Doub* resides in said County, and has been a bona fide resident of this State since the *29* day of *April* 1898 and that the witnesses, viz: *J. H. Murray*, *J. D. Malone* and *Dr. H. Simpson* are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of *Cobb* County show that applicant returned for taxation in his name in 1897 *nothing* Dollars of property, and in 1898 *nothing* Dollars of property.

In my opinion the foregoing claim is *made in good faith.*
Witness my hand and seal of office, this *29* day of *April* 1899.
J. H. Stone Ordinary.
of *Cobb* 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,

Cobb County.

I *P. F. Doub* hereby authorize
J. M. Gann of *Maricetta Ga*

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

by *me*

Witness my hand and seal, this *15* day of *Jan'y*, 1900.

P. F. Doub [L. S.]

Executed in presence of

H. J. H. H. H.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I *P. F. Doub* hereby authorize
John Doub of *Maricetta*

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

by *me*

Witness my hand and seal, this *14th* day of *Jan'y*, 1900.

P. F. Doub [L. S.]

Executed in presence of

Jas M Gann

1901

Doub P. F.
Cobb
CODE SEC. 1284.
(For These Already Enrolled.)

NO. *2635*

INDIGENT

SOLDIER'S PENSION,
 1900.

Name *P. F. Doub*
 County *Cobb*

WARRANT ISSUED
Jan'y 26 1900.

JOHN. W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
J. M. Gann
John. W. Lindsey, State Printer, Atlanta.

No later

Doub P. F.
Cobb

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

NO. *267*

INDIGENT

SOLDIER'S PENSION,
 1900.

Name *P. F. Doub*
 County *Cobb*

WARRANT ISSUED
Jan'y 15 1900.

JOHN. W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
J. M. Gann
John. W. Lindsey, State Printer, Atlanta.

No later

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

County.

Personally appears

P. F. Doub 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 *18th* day of *Dec.* 1888; that he is *61* years old and by occupation a *Clerk*; 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 *4 yrs* in Company *D*, of *53* th Regiment of _____; that his physical condition is as follows: *On account of disease 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 _____ day of _____, 1900.

P. F. Doub

Ordinary.

State of Georgia,

County.

I, *John A. Doub* Ordinary of said County, do certify that I am well acquainted with *P. F. Doub* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 _____, 1900.

day of

Ordinary.

Cobb County.



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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

County.

Personally appears

P. F. Doub 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 *18th* day of *Dec.* 1888; that he is *62* years old and by occupation a *Clerk*; 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 *4 yrs* in Company *D*, of *53* th Regiment of _____; that his physical condition is as follows: *On account of disease 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~~ 1900.

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

P. F. Doub

Ordinary.

State of Georgia,

County.

I, *John A. Doub* Ordinary of said County, do certify that I am well acquainted with *P. F. Doub* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 _____, 1900.

day of

Ordinary.

Cobb 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,

Chatham County.

hereby authorize

of

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

at

by

Witness my hand and seal, this *22* day of *January*, 190*3*

P. F. Doubt [L. S.]

Executed in presence of

W. L. Lamm

1903

Hand. P. F.
Chatham County

YOUR SECTION 124
(FOR THOSE ALREADY ENROLLED.)

No. *445*

INDIGENT

SOLDIER'S PENSION
190*2*.

Name *P. F. Doubt*

County *Chatham*

Co. *B* Regiment *53*

10th Cavalry
WARRANT ISSUED

1903

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Ordy

Geo. W. Harrison, State Printer, Atlanta.

1903

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears P. F. Douth 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 _____ 1887; that he is 44 years old and by occupation a Club 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 4 Year in Company B, of 13th Regiment of North Carolina Vol; that his physical condition is as follows:

owing to infirmity 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 1902. I have heretofore as a resident of Cobb County been allowed a pension for the year 1902

Sworn to and subscribed before me, this the _____

22 day of January 1903

P. F. Douth

Ordinary.

STATE OF GEORGIA,

Cobb County.

I, John A. Douth Ordinary of said County,

do certify that I am well acquainted with P. F. Douth the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1903

John A. Douth Ordinary _____ County.



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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

P. F. Doub
John D. Doub

hereby authorize

of

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

at

by

Witness my hand and seal, this 26 day of Jan 1904.

P. F. Doub [L. S.]

Executed in the presence of

J. M. Sam

Doub, P. F.
Cobb Co.

CODE SECTION 134.
(FOR THOSE ALREADY ENROLLED.)

No. 2714

INDIGENT
SOLDIER'S PENSION
1904.

Name P. F. Doub
County Cobb
Co. D 53 Regiment

WARRANT ISSUED

1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

John W. Lindsey, State Printer, Atlanta.

No date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County.

Personally appears P. F. Doub 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 18; that he is 65 years old and by occupation a nothing, 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 in Company D, of 53rd Regiment of ; that his physical condition is as follows: Age Infirmitly & Poverty

that his property consists of the following items:

nothing

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

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of Cobb County been allowed a pension for the year 1 903

Sworn to and subscribed before me, this the }
26 day of Jan 1904. }
P. F. Doub Ordinary.

STATE OF GEORGIA,

County.

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

Given under my official signature and seal, this 26 day of Jan 1904.
John A. Doughty Ordinary. Cobb County.



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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I *P. F. Doub* hereby authorize
John Anthony of _____
to receive and receipt for the pension paid hereon and request that he remit same to
_____ by _____
at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal this *14*
day of *Jan* 190*2*
P. F. Doub [L. S.]

Executed in presence of

J. M. B. Amey

*Doubt P. F. Cobb Co.
filing and Copies sent*

CODE SECTION 128

(For Those Already Enrolled.)

No. *498*

DISABLED

SOLDIER'S PENSION.

1901.

Name *P. F. Doub*

County *Cobb*

Disability

Amount, \$

D-53

1901.

John W. Lindsey

Commissioner of Pensions.

WARRANT HANDED TO

Only

Geo. W. Hays and Finance Agent.

no later

701

State of North Carolina
County of Guilford:

In Person appears David
Scott of said State in
County who on oath says
he is acquainted with P. F. Doub
for fifty years, and undertakes
he now resides in Cobb
County Ga. - P. F. Doub
enlisted at Greensborough
Guilford Co. N.C. in March
1862 - He enlisted in
Co. "D", 53rd Regt. N.C. Vols.
Affiant was Captain of
the said Company.

Affiant says he knows of
the said P. F. Doub's service
in the Confederate Army for
2 1/2 or 3 years, or during the
remainder of the war, P. F.
Doub was a good and
faithful soldier and as I
remember was discharged at
the surrender. Affiant now
resides at Greensboro N.C.

Affiant asserts that

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears

P. F. Daub 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 18th day of *December* 1888; 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 in Company *D*, of *54*th Regiment of *A. C.* Volunteers, *Daniels*'s Brigade; that whilst engaged in such military service in the State *of Georgia*, on the day of 186 , he was wounded, injured or diseased as follows:

On account of disease and poverty he is unable to support himself
has no property

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 *Cobb* County been allowed an invalid pension of *60* Dollars, for the year 1901.

Sworn to and subscribed before me, this the *P. F. Daub*, 14th day of *Jan* 1901, Postoffice

John A. Astrey

Notary. 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,

Cobb County.

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

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

John A. Astrey Ordinary *Cobb* County.

he has no interest in the recovery of this pension

Sworn to and Sub-
scribed before me this
29th day of Decr 1899

Dario Scott Witness

John A. Astrey
Clerk Superior Court
Smiford County N.C.



710 2

State of North Carolina
County of Guilford

~~J. M. Stone~~ Clerk Superior Court
Judge of Probate of said
County do certify that
David Scott the foregoing
affiant is a resident of
said State & County, and
as a witness he is worthy
of full faith and credit
as such.

Witness my official sig-
nature and seal of Office
- this 29th day of April 1899.

~~J. M. Stone~~
Clerk Superior Court
Judge of Probate
of Guilford County

J. M. Stone,
Ordinary and Judge Probate.

Office of Ordinary,

Cobb County, Ga.

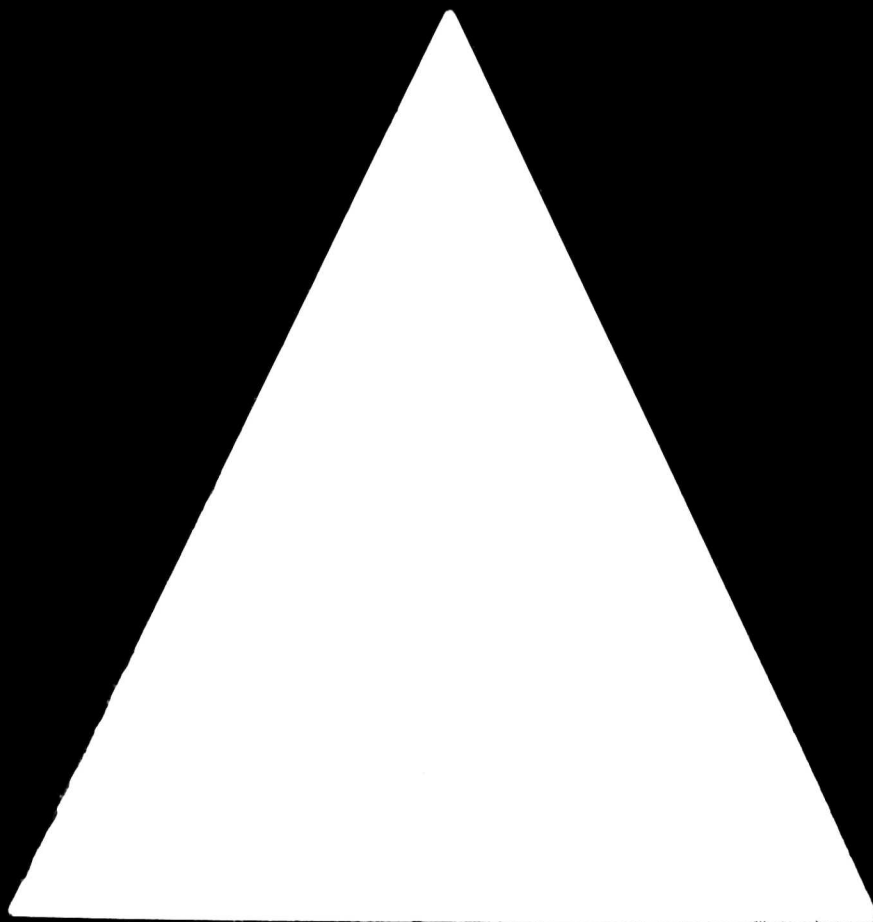
Marietta, Ga. April 30 1899.

Richard Johnson

I send you
the application about
which I spoke to you
- the proofs came today
I believe everything is
all right - if possible
put this claim in
for I know it is
worthy.

Yrs. Truly

J. M. Stone



Pension office
11/11-1915

Applicant comes
was of the N. G.
State Groups and
of C. S. A. - and
in provisions
of the N. G. Groups
has a record to
pay a Pension to
the State Groups or
the N. G. of other States

J. W. Lindsey
Com. of Am.

DOWD, Charles D.
Cobb Co. Georgia
11/1206915
M. J. R. R.

**Confederate
Soldier's Application.**

UNDER ACT 1910.

County Cobb
Name C. D. Dowd
Company E
Regiment 70th N. C.
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

CHAS. P. BYRD, State Printer, Atlanta.

10/26/15

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA

South County, of said State and County, hereby applies for the pension provided for Act of 1910, as Confederate Soldier, and submits his sworn statement, with his testimony to make out the same, and after being duly sworn, was 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).
Abraham H. Howard
2. How long and since when have you been a continuous resident citizen of this State?
Since the 20th of October, 1904
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).
About the 20th of May, 1864 at Macon, Ga. Co. B. 2nd Cavalry, Ala.
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge).
A discharge was given by the Provost Marshal at Macon, Ga. on the 12th of May, 1865.
6. When and where was your Company and Regiment surrendered or discharged from the Service?
At Macon, Ga. on the 12th of May, 1865.
7. Were you actually present with your Command when it was surrendered or discharged?
About 1865.
8. If you were not actually present, state specifically and clearly where you were.
At Macon, Ga.
- a. Where was your Command when you left it?
I was with Capt. Taylor's Company, Ala. Cavalry, at Macon, Ga. on the 12th of May, 1865.
- b. When did you leave the Command?
At Macon, Ga.
- c. For what cause did you leave?
At Macon, Ga.
- d. By whose authority did you leave?
At Macon, Ga.
- e. For how long was your leave granted? In what way?
At Macon, Ga.
- f. Why did you not return to your Command after leave expired?
At Macon, Ga.
- g. In what way were you prevented?
At Macon, Ga.
- h. What effort did you make to return?
At Macon, Ga.
- i. Were you captured during the war?
At Macon, Ga.
- j. If so, when, and where? In what prison were you held and when were you released?
At Macon, Ga.
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).
At Macon, Ga.
10. What property of every kind have you or your wife disposed of and for what purpose since 4 Nov. 1908. To whom and for what price?
At Macon, Ga.
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).
At Macon, Ga.
12. What annual or monthly income or earnings of yourself and wife and the source derived have you?
At Macon, Ga.
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 on this the

21st day of June, 1915.

Abraham H. Howard Ordinary

South County.

Charles D. Dorn

South County.

Proving

Confederate

Soldier's Application.

UNDER ACT 1910.

Confederate

South

Abraham H. Howard

South

Abraham H. Howard

Approved

J. W. LINDSEY,

Commissioner of Pensions.

CHAS. F. BIRD, STATE PRINTER, ALBANY.

1915/6/21

1915/6/21

QUESTIONS FOR WITNESS AS TO SERVICE.

North Carolina.
STATE OF ~~Georgia~~
Wake County.

Walter Clark

of said State and County is hereby presented
as a witness in support of the application of Capt. C. D. Dowd for the pension provided
by the Act of 1910, in ~~said~~ ^{of Georgia} 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? Walter Clark, Raleigh N. C.
2. How long and since when have you known the applicant?
C. D. Dowd. In 1864 and 1865
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this
State and how do you know?
4. When, where and in what Company and Regiment did C. D. Dowd enlist during
war from 1861 to 1865? (Give date and place) Moore County N. C. Co. E. 70th N. C.
5. How did you obtain your information of this Service? I was a Field Officer
1864
in that regiment from May till about Feb. 1865
6. How long within your own personal knowledge did he perform actual military service with
this Company and Regiment? (give date) From May 1864 till about Feb. 1865
7. When and where was his Command surrendered or discharged (give date and place).
Under Gen. Joseph E. Johnston, High Point N. C. 3 May 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? No. ~~unknown~~
11. If not where was he and how came him there? He resigned and left for Lee's
army.
12. When did he leave his Command? about Feb. 1865 Where was his Command
when he left it? in Eastern N. C. for what cause did he leave? he resigned
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) Yes.
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

18 day of Oct 1915

Walter Clark
Clerk of Supreme Court
of N. C.

AFFIDAVIT OF TWO FREEHOLDERS

STATE OF GEORGIA.

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

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov
1908? (State it fully by items.) 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? None sold or given
6. Was the disposition of this property made in good faith and full value? None to wife of
or was it made to obtain a pension?
Sworn to and subscribed before me, this the 27 day of Oct 1915
W. A. Griffin Ordinary,
of Wake County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

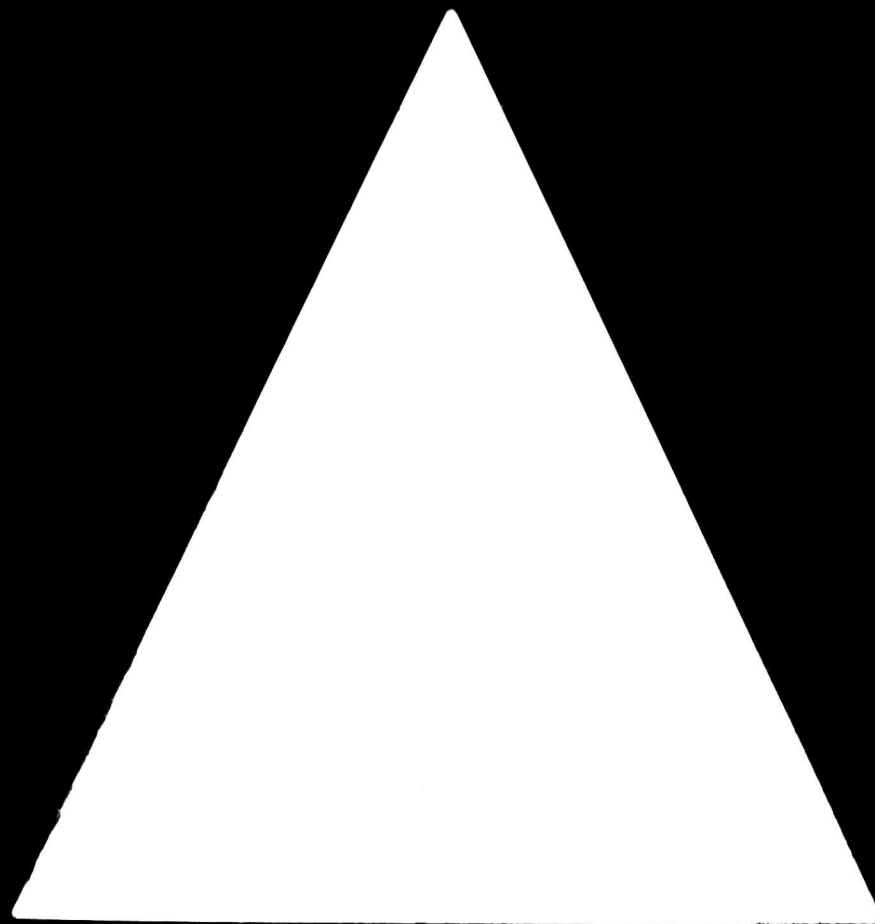
W. A. Griffin County.
I, W. A. Griffin Ordinary of said County, certify that I know
the applicant C. D. Dowd for Pension is the person he represents himself to be and resides in
said County. That I also know W. A. Griffin the witness swearing to the
service and W. A. Griffin who are freeholders, that
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. A. Griffin shows that C. D. Dowd and wife
value for tax is in 1908 \$200.00 for 1909 \$200.00 for 1910 \$200.00
for 1911 \$200.00 for 1912 \$200.00 for 1913 \$200.00

Sworn under my hand and official seal of office this 21 day of Oct 1915

W. A. Griffin Ordinary,
of Wake 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 executed if such oaths are insufficient.
3. All affidavits must be made before the Ordinary and certified by him.
4. If applicant has no property at all in his possession, use or control of self and wife, affidavits of freeholders
unnecessary.

07 Clerk of Supreme Court
J. R. C.



OK.
Dawson, S. W.
No. Cobb Co

INDIGENT PENSION
1898.

Name S. W. Dawson
County Cobb

Approved _____ 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO _____

8/20.98

Geo. W. Harrison, State Printer, Atlanta

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County

I, S. W. Dawson hereby authorize
D. A. Mumford of Cobb
to receive and receipt for the pension allowed and request that he remit same to me

Witness my hand and seal this _____ day of July 1898.

S. W. Dawson [S]

67K.
Dawson, R. W.
No. Cobb Co

INDIGENT PENSION

1898.

Name R. W. Dawson
County Cobb

Approved _____ 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

GEORGE W. HARRISON, STATE PRINTER, ATLANTA

8/20.98

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County

I, R. W. Dawson hereby authorize
to receive and receipt for the pension allowed and request that he remit same to

Witness my hand and seal this _____ day of _____ 1898.

Executed in presence of
R. W. Dawson }
W. H. Harrison }
W. H. Harrison }
W. H. Harrison }
W. H. Harrison }

(Cobb County)
 Noble G. W. Downs
 O. A. Dunwoody of Cobb

hereby authorize

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

Witness my hand and seal this

2nd day of July 1898.

Executed in presence of

W. L. G. Downs [L.S.]
 W. L. G. Downs

W. L. G. Downs, R. W.

No. Cobb Co

INDIGENT PENSION

1898.

W. L. G. Downs

Cobb

Approved

1898.

RICHARD JOHNSON,
 Commissioner of Pensions.

WARRANT HANDED TO

W. L. G. DOWNS, STATE PRINTER, ATLANTA

8/20-98

STATE OF GEORGIA,

Cobb County.

George W. Downs 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.)

George W. Downs State of Georgia, County of Cobb

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

years Since 1830

3. When and where were you born?

Newton Co. Jan 1830 (State of Georgia)

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

Regulars Co. Enlisted in Cobb Co. (in Co. E.)

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

Joined in 1862
 early in the year & remained until the
 surrender

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

About two years

7. When, where and under what circumstances were you discharged from service?

At Appomattox
 at the surrender

8. What is your present occupation?

Nothing I can get me able to do

9. How much can you earn (gross) per annum by your own exertions or labor?

Not more than twenty per dollar

10. What has been your occupation since 1865?

Principally guard duty

11. Upon which of the following grounds do you base your application for pension, viz: first "age and

poverty," second "infirmary and poverty" or third "blindness and poverty"?

Infirmary & poverty

12. If upon the first ground, state how long you have been in such condition that you could not earn

your support? If upon the second, give a full and complete history of the infirmity and its extent? If

upon the third, state whether you are totally blind and when and where you lost your sight?

I have been suffering constantly with Rheumatism contracted

on the service in the last year of the war it has been getting

worse & I find it getting so that I am unable to do any labor

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, 1896 and 1897 and what disposition,

if any, did you make of same?

I had none But as agent for

my daughter returned property for her which

was hers & in which I had no interest & she has

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

I have resided in Cobb County & have returned no property

16. How were you supported during the years 1896 and 1897?

Sometimes performing guard

duty at factory others what little work I could do

17. How much did your support cost for each of those years and what portion did you contribute thereto

by your own labor or income?

I suppose about fifty dollars & by my own labor & property

18. What was your employment during 1898 and 1897? What pay did you receive in each year?

Principally guard duty at factory & so on about 100

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

a homestead? My wife & daughter who has two children

My daughter now

works in factory & contributes mostly to our support by her

labor. I have no homestead nor has she

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

None

Sworn to and subscribed before me this the

2nd day of July 1898.

W. L. G. Downs

Applicant.

Ordinary.

Cobb County.

Every Question MUST be Answered

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Millon County.

Edith A. Wallace of said State and County, having been presented

as a witness in support of the application of *George W. Dumas* for pension under the Act approved December 15th, 1894, and after being duly sworn true answer to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? *Edith A. Wallace*
For Millon County State of Georgia
2. Are you acquainted with *George W. Dumas*, the applicant, if so how long have you known him? *I am & have known him for forty years*
3. Where does he reside, and how long and since when has he been a resident of this State?
He resides at Roswell Cobb Co & has been living there since I first knew him
4. When, where and in what company and regiment did he enlist, and how do you know? *In Cobb Co in 1862*
in Cobb Co 1st Georgia regulars in some Co. Regiment
5. Were you a member of the same company and regiment? *I was*
6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? *About two years*
he was a good soldier & performed faithful duty. He contracted rheumatism towards the end of his service but continued to perform duty until the surrender at Appomattox
7. What property, effects or income has the applicant? (Give your means of knowledge.) *None*
I have lived near him always & know that he has neither wife nor heirs by which little he can do aided by his daughter
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?

He has not

10. What is the applicant's occupation and physical condition? *He has sometimes guarded*
of factors & some little jobs as his health would allow

he suffers very much from rheumatism which has been getting more
continuous

11. Is the applicant unable to support himself by labor of any sort, if so, why? *He is unable to*
support himself from the above stated cause thus increasing
the infirmities of his old age

12. How was he supported during the years 1896 and 1897? *By aid of his daughter*
& what little he could do as stated above

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

From his own labor I should say about fifty dollars

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? *I know that he has been suffering*
for years with rheumatism and that it has been getting worse & worse
a great deal of them time has lost feet & ankles swelling very much & suffering
from the performance of any labor

15. What interest have you in the recovery of this applicant? *None*

Sworn to and subscribed before me, this *25* day of *August* 1898. *E. A. Wallace*
Witness.

H. W. Mosallen Ordinary.

Georgia
Millon County This is to certify that the witness *E. A. Wallace* who appears as a witness for *George W. Dumas* is a citizen of said County, is of undoubted character and worthy of belief.
H. W. Mosallen Ordinary

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Cobb County.

Personally came before me *J. E. Green M.D.* and

A. P. Kemp M.D., both known to me as reputable physicians of said County, who being severally sworn, say on oath that they have examined carefully *Edith A. Wallace*

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

George W. Dumas - Whom we have known for 20 years - has rheumatism in his back - hips - knees - ankles - feet - he is not able to work & cannot support any 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

2nd day of *July* 1898. *J. E. Green M.D.*
A. P. Kemp M.D.
Ordinary.

ORDINARYS' CERTIFICATE.

STATE OF GEORGIA,

Cobb County.

I, *J. E. Green* Ordinary in and for said County, hereby certify that the applicant *G. W. Dumas* resides in said County, and has been a bona fide resident of this State since the *1st* day of *January* 1898 and that the witnesses, viz.: *J. E. Green and A. P. Kemp*

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 *Cobb* County show that applicant *he pays as apt for his daughter* returned for taxation in his name in 1896 *One thousand eight hundred* Dollars

of property, and in 1897 *\$320* Dollars of property.

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

Witness my hand and seal of office, this *27* day of *July* 1898

J. E. Green Ordinary
of *Cobb* 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,

Cobb County.

I, *G. W. Downs*, hereby authorize
J. M. Nembler of *Roosel*

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

by *me* *him*

Witness my hand and seal this *17th* day of *Jan* 1899.

Executed in presence of

J. M. Nembler } *G. W. Downs* (L. S.)

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, *G. W. Downs*, hereby authorize
J. M. Nembler of *Roosel* *Ga.*

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

by *me* *him*

Witness my hand and seal, this *17th* day of *Jan* 1900.

Executed in presence of

J. M. Nembler (L. S.)

CODE SEC. 1284.

(For Those Already Enrolled.)

No. 974

INDIGENT

SOLDIER'S PENSION,

1899.

Name *G. W. Downs*
County *Cobb*

WARRANT ISSUED

1899

RICHARD JOHNSON,
(Commissioner of Pensions.)

WARRANT HANDED TO

J. M. Nembler

Geo. W. Harrison, State Printer, Atlanta.

no data

Downs, G. W.
Cobb Co.

CODE SEC. 1284.

(For Those Already Enrolled.)

No. 983

INDIGENT

SOLDIER'S PENSION,

1900.

Name *G. W. Downs*
County *Cobb*

WARRANT ISSUED

1900.

JOHN. W. LINDSEY,

(Commissioner of Pensions.)

WARRANT HANDED TO

J. M. Nembler

Geo. W. Harrison, State Printer, Atlanta.

no data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears G. W. Downs 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 _____ 1891; that he is 65 years old and by occupation a Laborer; 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 5 years in Company A, of 1st Regiment of Regt. 1st Artillery; that his physical condition is as follows: Infirmary poverty &c.

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 not been enrolled heretofore as a resident of _____ county been allowed a pension for the year 1899

Sworn to and subscribed before me, this, the _____

day of Jan 1899.

Ordinary.

State of Georgia,

Cobb County.

I,

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

Given under my official signature and seal, this _____

day of Jan 1899.

Ordinary J. W. Stone Cobb 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,

Cobb County.

Personally appears G. W. Downs 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 _____ 1891; that he is _____ years old and by occupation a Laborer; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 3 years in Company A, of 1st Regiment of Battery Light Artillery regt.; that his physical condition is as follows: On account of Infirmary poverty &c. 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 _____

day of Jan 1900.

Ordinary.

State of Georgia,

Cobb County.

I,

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

Given under my official signature and seal, this _____

day of Jan 1900.

Ordinary J. W. Stone Cobb 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,

Cobb County }

I, G. W. Down hereby authorize

J. M. Hambree of Kennell

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

me at Kennell

by me

Witness my hand and seal, this 7 day of January 1901.

[L. S.]

Executed in presence of

W. B. Hambree

(For Those Already Enrolled.)

No. 102

INDIGENT

SOLDIER'S PENSION.

1901.

Name G. W. Down
County Cobb

WARRANT ISSUED

Jan 15 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Hambree

State of Georgia.

W. B. Hambree

Down, G. W.
Cobb County

(FOR THOSE ALREADY ENROLLED.)

No. 442

INDIGENT

SOLDIER'S PENSION

1902.

Name G. W. Down
County Cobb

Co. A Regiment 1st
Regt

WARRANT ISSUED

Jan 16 1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Hambree

State of Georgia.

W. B. Hambree

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County. }

I, G. W. Down hereby authorize

J. M. Hambree of Kennell

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

G. W. Down at Kennell

by Hambree

Witness my hand and seal, this 7 day of January 1902.

G. W. Down [L. S.]
mark

Executed in presence of

J. E. Hambree

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb

County.

Personally appears

E. M. Downs

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 *1831*; that he is *67* years old and by occupation a *Laborer* 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 *10* *Maxwell's Battery* in Regiment *1st* *Georgia* *Artillery* *Regulars*; that his physical condition is as follows:

He is unable to make a day's work for himself.

that his property consists of the following items:

Nothing

of the value of *Nothing* Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this the

day of *January* 1901.

John A. Antley

Ordinary.

STATE OF GEORGIA,

Cobb

County.

I, *George F. Downs*

Ordinary of said County,

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

Given under my official signature and seal, this

day of *January* 1901.

Ordinary

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,

Cobb

County.

Personally appears

E. M. Downs

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 *1831*; that he is *67* years old and by occupation a *Laborer* 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 *10* *Maxwell's Battery* in Regiment *1st* *Georgia* *Artillery* *Regulars*; that his physical condition is as follows:

On account of age, infirmity and poverty he is unable to support himself.

that his property consists of the following items:

Nothing

of the value of *Nothing* Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this the

day of *Jan* 1902.

John A. Antley

Ordinary.

STATE OF GEORGIA,

Cobb

County.

I,

John A. Antley

Ordinary of said County,

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

Given under my official signature and seal, this

day of *Jan* 1902.

Ordinary

County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, G. H. Down hereby authorize

G. M. Hambree of Knox

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

me at Knox

by Hambree

Witness my hand and seal, this 4 day of January 1903.

Executed in presence of

G. E. Hambree

G. H. Down [L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, G. H. Down hereby authorize

G. M. Hambree of Knox

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

me at Knox

by Hambree

Witness my hand and seal, this 20 day of January 1904.

Executed in presence of

G. E. Hambree

G. H. Down [L. S.]

(FOR THOSE ALREADY ENROLLED.)

No. 434

INDIGENT

**SOLDIER'S PENSION
1903.**

Name

G. H. Down

County

Cobb

Co. A

Regimental Post Office

WARRANT ISSUED

J. H. Catlett

1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

C. H. Down

Gen. Harrison, State Printer, Atlanta.

No date

(FOR THOSE ALREADY ENROLLED.)

No. 617

INDIGENT

**SOLDIER'S PENSION
1904.**

Name

G. H. Down

County

Cobb

Co. A

Regimental Post Office

WARRANT ISSUED

125

1904.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Hambree

Gen. W. Harrison, State Printer, Atlanta.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Abh County.)

Personally appears *W. Downs* of *Abh*

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 *1831*; that he is *72* years old and by occupation a *Laborer*, that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the

battery States, and served for the term of *3 yrs* in Company *A*, of *1st* Regiment of *Right Artillery*, *Co. B*, that his physical condition is as follows: *from disability of poverty cannot earn sufficient*

that his property consists of the following items:

nothing

of the value of *nothing* Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this the day of *Jan* 1903.

Ordinary.

STATE OF GEORGIA,

Abh County.)

I, *John A. Hartley* Ordinary of said County,

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

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

Ordinary

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,

Abh County.)

Personally appears *W. Downs* of *Abh*

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 *1831*; that he is *72* years old and by occupation a *Laborer*, 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 *1st* Regiment of *Right Artillery*, *Co. B*, that his physical condition is as follows: *Disability of poverty cannot earn sufficient*

that his property consists of the following items:

of the value of *nothing* Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of *Abh* County been allowed a pension for the year *1903*

Sworn to and subscribed before me, this the day of *Jan* 1904.

Ordinary.

STATE OF GEORGIA,

Abh County.)

I, *John A. Hartley* Ordinary of said County,

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

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

Ordinary

County.

NOTE.—The blank spaces must be filled.

NOTE.—Affidavit should not be attested before January 1st, 1904.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Colt COUNTY.

I, G. H. Young hereby authorize
S. E. Hemmick of Roswell
to receive and receipt for the pension allowed, and request that he remit same to
me at Roswell
by Hand

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

Executed in the presence of

S. E. Hemmick

G. H. Young [L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

Colt COUNTY.

I, G. W. Downs hereby authorize
F. M. Hemmick of Roswell
to receive and receipt for the pension allowed, and request that he remit same to
me at Roswell
by Hand

WITNESS my hand and seal, this _____ day of January 1906.

Executed in the presence of

L. E. Hemmick

G. W. Downs [L. S.]

Downs, G. W.
Colt Co.

CODE SECTION 1254
(FOR THOSE ALREADY ENROLLED.)

No. 652

INDIGENT
SOLDIER'S PENSION
1905.

Name G. W. Downs
County Colt
Co. 1st Regiment

WARRANT ISSUED
1/2 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
F. M. Hemmick

U.S.G. W. HARRISON, BALTIMORE, F.B. STATE PRINTER, ATLANTA.

no date

Downs, G. W.
Colt County

CODE SECTION 1254
(FOR THOSE ALREADY ENROLLED.)

No. 652

INDIGENT
SOLDIER'S PENSION
1906.

Name G. W. Downs
County Colt
Co. 1st Regiment

WARRANT ISSUED
2 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
F. M. Hemmick

U.S.G. W. HARRISON, BALTIMORE, F.B. STATE PRINTER, ATLANTA.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears

W. H. Downs

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 12 day of January 1881; that he is 73 years old and by occupation a laborer, 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 12th Infantry Regiment of Battery Light Artillery; that his physical condition is as follows: poverty eye infirmity and

that his property consists of the following items:

Nothing

of the value of _____ Dollars. I am now earning, by my labor, _____ 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 Cobb County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the 12 day of January 1905.

Ordinary.

STATE OF GEORGIA,

Cobb County.

I,

John A. Wooten

Ordinary of said County,

do certify that I am well acquainted with W. H. Downs the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 January 1905.

Ordinary.

Cobb 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,

Cobb County.

Personally appears

W. H. Downs

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 12 day of January 1882; that he is 74 years old and by occupation a laborer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 in Company A, of 11th Regiment of Major's Co. 2nd Light Art.; that his physical condition is as follows: Infirmary poverty

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this the 12 day of January 1906.

Ordinary.

State of Georgia,

Cobb County.

I,

John A. Wooten

Ordinary of said County,

do certify that I am well acquainted with W. H. Downs the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 January 1906.

Ordinary.

Cobb County.



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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

I, G. W. Downs, hereby authorize

F. M. Hembree of Roanoke

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

me at Roanoke

by hand

WITNESS my hand and seal, this first day of January 1907.

G. W. Downs [L. S.]

Executed in presence of

H. C. Sherman

Downs, G. W.

Cobb Co

Cross Section 124

(FOR THOSE ALREADY ENROLLED)

No. 700

INDIGENT SOLDIER'S PENSION 1907.

Name G. W. Downs

County Cobb

Co. A Regiment 1st

Calum

WARRANT ISSUED out,

JAN 21 1907.

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT HANDED TO

Hembree

JOHN W. LINDSEY, SECRETARY, ATLANTA.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Cobb County.

Personally appears W. H. Brown 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 _____ 18____; that he is _____ years old and by occupation a _____, 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 _____ in Company _____ of _____th Regiment of Maxwell's Co. Bat. Lt. art; that his physical condition is as follows: _____

that his property consists of the following items: _____

of the value of _____ Dollars. I am now earning by my labor, _____ 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 Cobb County, been allowed a pension for the year 1906.

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

Ordinary.

State of Georgia,

Cobb County.

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

Given under my official signature and seal this _____ day of _____ 1907.

Ordinary

County.

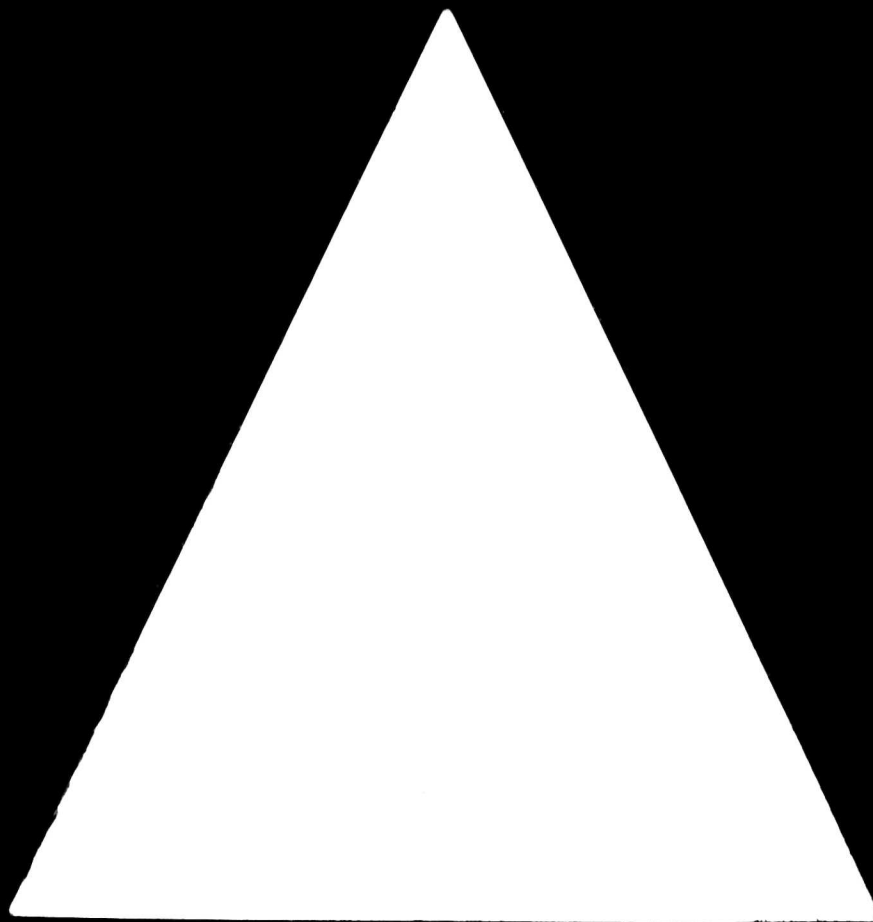
AMs
recd
seal
here

Note: This blank space must be filled.
Note: Affidavit should not be attested before January 1st, 1907.

W. D. Allen

Georgia } Personally appeared
Cobb County } Mrs. Sallie Powers
who after being duly sworn
says that G. W. Downs is her
father and that she Sallie
Powers and her daughter Maudie
works in the Savel Worlins Mills
and that her father G. W. Downs has
been giving in Personal property to
the amount of his hundred dollars
which is the rightfully the property
of My Self as my own money
that My self and Maudie has
earned while in the factory and
affiant further says that G. W.
Downs has been acting as agent
for her in the way of giving in
taxes and that she has furnished
the money to pay all the taxes
given in and paid by said G. W.
Downs for the last four years
and that G. W. Downs has no property
at all either personal or real that
he has no means of support only
that of what My self and Maudie
gives to him servants and subservants
do for me this 18th of June 1898
Fell Kember & Co. } Sallie Powers.

Georgia Cobb County
J. M. Stone Clerk of
said County do hereby
Certify that J. M. Wimer
before whom this Affidavit
is made is a Notary Public
of said County duly com-
missioned as such.
July 2/98 J. M. Stone
Clerk



POWER OF ATTORNEY.

STATE OF GEORGIA,

DeKalb County,

I, *John W. Brennan*, hereby authorize
David J. Brennan of *DeKalb* County, Ga.
to receive and receipt for the pension allowed, and request that he remit same to

by

him

Witness my hand and seal this

7th

day of

January

1899.

Executed in presence of

David J. Brennan

David J. Brennan (L.S.)

(*clayton 1898*)

Brennan John W.

DeKalb Co.
(For Those Already Enrolled)

No. *970*

INDIGENT
SOLDIER'S PENSION,
1899.

Name *John W. Brennan*

County *DeKalb*

WARRANT ISSUED

1/13

1899.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

David J. Brennan

Geo. W. Harrison, State Printer, Atlanta.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, *John W. Druman*, hereby authorize
J M Hembree of *Roosville Ga*

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

by

Witness my hand and seal this *7th* day of *Jan* 1899.

Executed in presence of

Lawrence J. Druman *J M Hembree* (L. S.)

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, *John W. Druman* hereby authorize
J M Hembree of *Roosville Ga*

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

by

Witness my hand and seal, this *17th* day of *Jan* 1900.

Executed in presence of

[L. S.]

(Clayton 1898)

copy 1898
(For Those Already Enrolled.)

No. 970

INDIGENT

SOLDIER'S PENSION,

1899.

Name

County

WARRANT ISSUED

1/13 1899

RICHARD JOHNSON,

(Commissioner of Pensions.)

WARRANT HANDED TO

J M Hembree

Geo. W. Harrison, State Printer, Atlanta.

W. L. Lato

CODE SEC. 1284.

(For Those Already Enrolled.)

No. 16

INDIGENT

SOLDIER'S PENSION,

1900.

Name

County

WARRANT ISSUED

January 16 1900.

JOHN. W. LINDSEY,

(Commissioner of Pensions.)

WARRANT HANDED TO

J M Hembree

Geo. W. Harrison, State Printer, Atlanta.

W. L. Lato

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears John W. Druman 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 7th day of Sept 1844; that he is 54 years old and by occupation a laborer; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States,

and served for the term of 2 yrs in Company A, of McKee's Battery Light Artillery Ga. Vols.; that his physical condition is as follows: On account of disease Infirmary 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 1899. I have heretofore as a resident of Clayton county been allowed a pension for the year 1898

Sworn to and subscribed before me, this, the

7th day of Jan'y 1899. J. M. Stone Ordinary.

State of Georgia,

Cobb County.

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

Given under my official signature and seal, this 7th day of Jan'y 1899.

Affix your seal here.

J. M. Stone Ordinary Cobb County.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears John W. Druman 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 7th day of Sept 1844; that he is 54 years old and by occupation a Laborer; 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 McKee's Battery Light Artillery Ga. Vols.; that his physical condition is as follows: On account of disease Infirmary 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

11th day of Jan'y 1900. J. M. Stone Ordinary.

State of Georgia,

Cobb County.

I, J. M. Stone Ordinary of said County, do certify that I am well acquainted with John W. Druman the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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'y 1900.

Affix your seal here.

J. M. Stone Ordinary Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, *John A. Brennan* hereby authorize
F. W. Hembree of *Roanoke*
 to receive and receipt for the pension allowed and request that he remit same to
me at *Roanoke*
 by *Roanoke*

Witness my hand and seal, this *10* day of *January* 1901.
John A. Brennan [L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, *John A. Brennan* hereby authorize
F. W. Hembree of *Roanoke*
 to receive and receipt for the pension allowed and request that he remit same to
John A. Brennan at *Roanoke*
 by *Roanoke*

Witness my hand and seal, this *7* day of *January* 1902.

John A. Brennan [L. S.]

Executed in presence of

L. E. Hembree

For Those Already Enrolled

144

INDIGENT

SOLDIER'S PENSION.
 1901.

Name *John A. Brennan*
 County *Cobb*

WARRANT ISSUED

Jan 10 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

Roanoke

144

Brennan, John W.
Cobb County
(To those 1901)

CODE SECTION 124.
 (FOR THOSE ALREADY ENROLLED.)

No. *460*

INDIGENT

SOLDIER'S PENSION
 1902.

Name *John A. Brennan*
 County *Cobb*
 Co. *A* *10th* *Regiment*
Light Artillery

WARRANT ISSUED

44 1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

Roanoke

(See W. Harrison State Printer, Atlanta.)

144

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

County,

Personally appears *John H. Drennan*

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 *7th* day of *Sept.* 18*64*; that he is *56* years old and by occupation a *laborer* 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 yrs* in Company *A*, of *1st* Regiment of *Missile Artillery*; that his physical condition is as follows: *On account of Disease Incurred and he is unable to support himself*

that his property consists of the following items:

of the value of *Nothing* Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this the *7th* day of *January* 1901.

Ordinary

STATE OF GEORGIA,

County,

I, *John H. Drennan*

Ordinary of said County,

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

Given under my official signature and seal, this *7th*

day of *January* 1901.

Ordinary

County.

NOTE.—The blank spaces must be filled.

NOTE.—Affidavit should not be attested before January 1st, 1902.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County,

Personally appears *John H. Drennan*

of *Colt*

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 *7th* day of *Sept.* 18*64*; that he is *56* years old and by occupation a *laborer* 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 yrs* in Company *A*, of *1st* Regiment of *Missile Artillery*; that his physical condition is as follows: *On account of Disease Incurred and he is unable to support himself*

that his property consists of the following items:

of the value of *Nothing* Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this the *6th* day of *Jan* 1902.

Ordinary.

STATE OF GEORGIA,

County,

I, *John H. Drennan*

Ordinary of said County,

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

Given under my official signature and seal, this *6th*

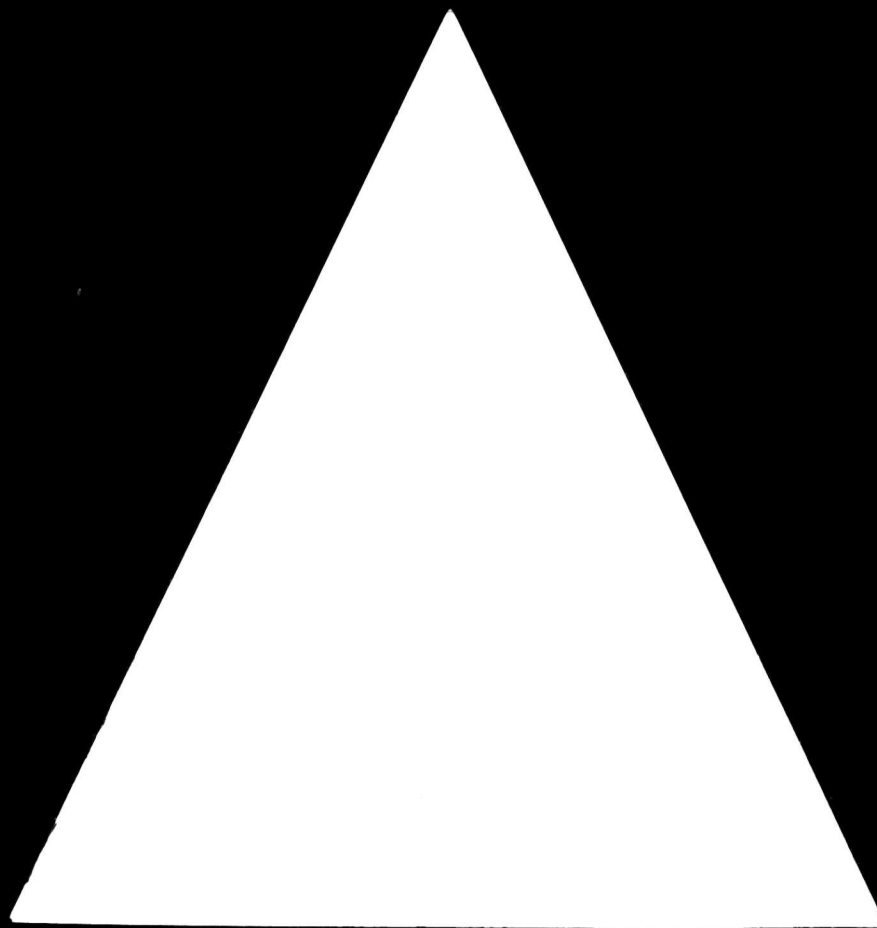
day of *Jan* 1902.

Ordinary

County.

NOTE.—The blank spaces must be filled.

NOTE.—Affidavit should not be attested before January 1st, 1902.



Form No. 5.
POWER OF ATTORNEY,
STATE OF GEORGIA.

County.

Know all Men by these Presents, That I,

of

County, in said State, do hereby appoint

of

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

alforesaid.

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

9 day of April 1891

Executed in the presence of us:

J. P. Pearson

Rec. How Orling

Witnesses.

If allowed, send amount by

me at

and oblige,

to



Dunbar H. T.
Cobb County
214 1891.

No. 387

Widows' Pension

PAID TO

Mrs. H. J. Dunbar

OF

Cobb

COUNTY.

\$100.00.

Warrant Issued

1891

AND HANDED TO

POWER OF ATTORNEY.

Form No. 6.

STATE OF GEORGIA.

Cobb County.

Know all Men by these Presents, That I,

H. T. Dunbar

of *H. T. Dunbar*

County, in said State, do hereby appoint

H. S. Arnold

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *7* day of *April* 1891

Executed in the presence of us:

J. C. Stone
John C. Stone

DIRECTIONS.

If allowed, send amount by

me at

, and oblige,

to



Widows' Pension

PAID TO

Wm. H. J. Dunbar

OF

Cobb

COUNTY.

\$100.00

Warrant Issued

AND HANDED TO

1891

Form No. 6. Widows' Pension Warrant

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA.

County of *Cobb*

In person came before me, the undersigned Ordinary

in and for the County of *Cobb*

Mrs. *H. T. Dunbar*

, who being sworn according to law, says under

oath that she is the widow of *H. T. Dunbar*

, who was a soldier in

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

, of the

56 Regiment of *Georgia*

Volunteers; that he enlisted in said

service on or about the

14

day of

April

186

2, and was in the

Confederate Army up to

7

day of

June

186

8. That while in the

Army, he was on the

16

day of

May

186

3, (See Note No. 1)

He was wounded at the battle of *Battle of Barks Creek* in the State of *Mississippi*. I did of said wound on the *7* of *June* in *Mississippi*.

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 *29*th day of *June* 1861, and that she has resided in Georgia continuously since the *29*th day of *May* 1867; 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

7 day of *April*

1891.

H. T. Dunbar

J. C. Stone
Ordinary.

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

Affidavit for Three Witnesses.

Form No. 2.

STATE OF GEORGIA,

County of *Cobb*

In person came before me, the undersigned Ordinary
in and for said County, witnesses

(each known to said Attesting Officer as truthful,
reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge,

Mrs. *M. J. Dunbar*, of the County of *Cobb*,

State of Georgia, is the widow of *W. H. Dunbar*, who was a soldier in
Company *4* of the *26* Regiment of *Georgia* Volunteers.

That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or
about the *11* day of *April* 1862 That while in said service, or by
reason of said service in the Army, he lost his life as follows: *He was a Cavalry man*
at the battle of Wadley Creek in the state of Miss.
died in the City of Memphis Miss on 7th of June 1863
from the effect of said wound.

We further swear that Mrs. *M. J. Dunbar* was the wife of said
soldier during the service, and that she has not intermarried since his death, and that she resides in
Cobb County of the State of Georgia.

Sworn to and subscribed before me, this, the

day of *April* 1891.

J. M. Stone
Ordinary.

L. H. Howell
J. M. Thompson
E. P. Padon

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

Form No. 3.

STATE OF GEORGIA,

County of *Cobb*

I, *J. M. Stone* Ordinary

in and for said County of *Cobb*

State of Georgia, hereby certify that I am acquainted with Mrs. *M. J. Dunbar*
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

9th day of *April* 1891.

SEAL

J. M. Stone

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 Cobb
 I, John Stone Ordinary in and for said County of
W. J. Dunbar State of Georgia, hereby certify that I am acquainted with Mrs.
W. J. Dunbar the applicant for a pension in this case, and
 know, from my own knowledge (or from positive proof presented to me by reputable wit-
 nesses), that she resides in this County, and that she resided in the State of Georgia on
 December 23, 1890, and has not lived out of the State since that date. That she is the
 widow of W. J. Dunbar 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 30th day of January, 1894.

SEAL

John Stone Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Cobb County.

KNOW ALL MEN BY THESE PRESENTS, That I, W. J. Dunbar

County in said State, do hereby appoint
 of W. J. Dunbar my true and lawful attorney in fact, for
 me, and in my name, to receive and receipt for whatever amount of money I may be en-
 titled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the
 foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any
 Warrant that may be issued by the Governor, or for any sum of money which may be
 coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 30th
 day of January, 1894.

Executed in the presence of us:

John Stone
John Stone

DIRECTIONS.

Send amount by _____ to _____
 me at _____, and oblige _____

WIDOWS' PENSION,
 for year ending February 15th, 1894.

PAID TO
W. J. Dunbar
 OF
Cobb
 COUNTY.

WARRANT ISSUED
1/30
 AND NAMED TO
W. J. Dunbar
 1894.

1894.

FOR THOSE HEREONFORWARD
1894.

Dunbar, W. J. (mrs)
Cobb County

Geo. W. HARRISON, State Printer, Atlanta.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of *Cobb*

Personally comes Mrs.

H. J. Deenbar

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

Cobb

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

continuously ever since

May 29th

18

77 That she is the Widow of

J. W. W. Deenbar

who was a Soldier in Company

of the

56th

Regiment of

Ga.

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

Sept.

186

7th

186

3 That he lost his

life on the

7th

day of

June

1863 (State here

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

*That while in the Confederate Army
at Vicksburg & Baker's Creek Miss.
he was wounded in battle of Baker's
Creek and died at the Hospital
at Vicksburg Miss. June 7th 1863.*

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1854 that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension 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

3rd day of *July*

1894.

Ordinary.

Post-office

H. J. Deenbar
Roswell Ga.

STATE OF GEORGIA, County of Cobb
 I, John Stone Ordinary in and for said County of
State of Georgia, hereby certify that I am acquainted with Mrs.
H. H. Dunbar 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
H. H. Dunbar 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
2nd day of July, 1893.

John Stone
 Ordinary.

POWER OF ATTORNEY.

Form No. 8.

STATE OF GEORGIA, County of Cobb
 KNOW ALL MEN BY THESE PRESENTS, That I, H. H. Dunbar
 of Cobb County in said State, do hereby appoint John Stone
 of Cobb County my true and lawful attorney in fact, for
 me and in my name, to receive and receipt for whatever amount of money I may be entitled to
 from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing 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 2nd
 day of July, 1893 H. H. Dunbar [L. S.]

Executed in the presence of us:

G. M. Fleming

DIRECTIONS.

Send amount by _____ to _____
 me at _____ and oblige _____

WIDOW'S PENSION,

for year ending February 15th, 1893.

PAID TO

H. H. Dunbar
or admt. 177.75

Cobb County.

Warrant Issued

1893

AND HANDED TO

John Stone

John W. Harrison, State Printer, Atlanta.

STATE OF GEORGIA, County of Cobb
 I, John Stone Ordinary in and for said County of
State of Georgia, hereby certify that I am acquainted with the
H. H. Dunbar the applicant for a pension in this case, and
 know from my own knowledge (or from positive proof presented to me by reputable wit-
 nesses), that she resides in this County, and that she resided in the State of Georgia on
 December 23, 1890, and has not lived out of the State since that date. That she is the
 widow of H. H. Dunbar 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 5th day of July, 1895.

John Stone Ordinary.

POWER OF ATTORNEY.

Form No. 8.

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

In Witness Whereof, I have hereunto set my hand and seal, this 5th
 day of July, 1895. H. H. Dunbar [L. S.]

Executed in the presence of us:

John Stone
Only

DIRECTIONS.

Send amount by _____ to _____
 me at _____ and oblige _____

WIDOW'S PENSION,

for year ending February 15th, 1895.

PAID TO

H. H. Dunbar
or admt. 177.75

WARRANT ISSUED

24 July 1895.

AND HANDED TO

John Stone

John W. Harrison, State Printer, Atlanta.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Cherokee*

Personally comes Mrs.

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

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

continuously ever since *May 29* 18 *27* That she is the Widow of

who was a Soldier in Company

of the *54* Regiment of

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

186 *1* and served in the Army up to *June 3* 186 *3* That he lost his

life on the *7th* day of *June* 18 *63* (State here

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

While in the army, he was shot in the hip at Lake Creek, Mississippi, and died at a hospital on the 7th day of June 1863.

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 18 *67*, 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

2nd day of *July* 1893.

J. H. Stone Ordinary.

Post-office

H. J. Dunbar
Roswell Ga.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Cobb*

Personally Comes Mrs.

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

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

continuously ever since *May 29* 18 *27* That she is the Widow of

who was a Soldier in Company

of the *56th* Regiment of

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

186 *1* and served in the Army up to *Sept. 3* 186 *3* That he lost his

life on the *7th* day of *June* 18 *63* (State here

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

While in the army, he was shot in the hip at Lake Creek, Mississippi, and died at a hospital on the 7th day of June 1863.

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 18 *57*, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this

5th day of *July* 1895.

J. H. Stone Ordinary.

Post-office

H. J. Dunbar
Roswell Ga.

STATE OF GEORGIA, County of Cobb
 I, J. M. Stone Ordinary in and for said County of
 State of Georgia, hereby certify that I am acquainted with Mrs.
H. J. Dunbar 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 W. W. Dunbar
 deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1895.
 In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this
1st day of July, 1890.
J. M. Stone Ordinary.

Form No. 2.

POWER OF ATTORNEY.

STATE OF GEORGIA, County of Cobb
 I, H. J. Dunbar hereby authorize J. M. Hamline
 of Roomell to receive and receipt for the pension paid hereon and request
 that he remit same to me by him
 In Witness Whereof, I have hereunto set my hand and seal, this
 day of July, 1896.
H. J. Dunbar
 Executed in the presence of
J. M. Stone
Ordinary

STATE OF GEORGIA, County of Cobb
 I, J. M. Stone Ordinary in and for said County of
 State of Georgia, hereby certify that I am acquainted with Mrs.
H. J. Dunbar 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 W. W. Dunbar
 deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1895.
 In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this
 the 23rd day of July, 1897.
J. M. Stone Ordinary.

Form No. 2.

POWER OF ATTORNEY.

STATE OF GEORGIA, County of Cobb
 I, H. J. Dunbar hereby authorize J. M. Hamline
 of Roomell to receive and receipt for the pension paid hereon and request
 that he remit same to me by him
 In Witness Whereof, I have hereunto set my hand and seal, this
 day of July, 1897.
H. J. Dunbar
 Executed in the presence of
J. M. Stone
Ordinary

WIDOW'S PENSION,
 for year ending February 15th, 1896.
 PAID TO
H. J. Dunbar
 OF
Cobb County.
 WIDOW OF
W. W. Dunbar
 WARRANT ISSUED
2/1
 AND HANDLED TO
W. W. Dunbar
 1896.

Geo. W. Harrison, State Printer.

WIDOW'S PENSION,
 for year ending February 15th, 1897.
 PAID TO
H. J. Dunbar
 OF
Cobb County.
 WIDOW OF
W. W. Dunbar
 WARRANT ISSUED
2/3
 AND HANDLED TO
W. W. Dunbar
 1897.

Geo. W. Harrison, State Printer.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of

Cobb } Personally Comes Mrs. *H. J. Dunbar*

who being sworn, says on oath, that she is a bona fide resident of said county of *Cobb* State of Georgia, and that she has RESIDED in said State continuously ever since *May 24* 18 *27* That she is the Widow of *W. W. Dunbar* who was a Soldier in Company *A*, of the *56th* Regiment of *Vol.* Volunteers, that he enlisted in said regiment on or about the month of *Sept* 1861 and served in the Army up to *June 7th* 1863 That he lost his life on the *7th* day of *June* 1863 (State here full particulars of the husband's death, when, where and from what cause.) (

was wounded in the hip at battle of Pipers Creek May 16 1863 and died from said wound at Vicksburg Miss. on June 7th 1863.

Deponent swear that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 18 *50* that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of *Cobb* County for the year ending February 15th, 1895, and now apply for the pension provided by law for the year ending February 15th, 1896.

Sworn to and subscribed before me, this

1st day of *July* 1896. *J. M. Stone* Ordinary.

Post-office *Roswell Ga.*

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,

County of

Cobb } Personally Comes Mrs. *H. J. Dunbar*

who being sworn, says on oath, that she is a bona fide resident of said county of *Cobb* State of Georgia, and that she has RESIDED in said State continuously ever since *May 24th* 18 *27* That she is the Widow of *W. W. Dunbar* who was a Soldier in Company *A*, of the *56th* Regiment of *Vol.* Volunteers, that he enlisted in said regiment on or about the month of *Sept* 1861 and served in the Army up to *June 7th* 1863 That he lost his life on the *7th* day of *June* 1863 (State here full particulars of the husband's death, when, where and from what cause.) *While in the*

army near a gun shot in the hip at Pipers Creek and died from wound in the hip at a Vicksburg Miss.

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 18 *51* 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 *Cobb* 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

23rd day of *July* 1897. *J. M. Stone* Ordinary.

Post-office *Roswell Ga.*

POWER OF ATTORNEY.

State of Georgia,

Cobb County.

I, H. J. Dunbar

hereby authorize

as Russell Cobb of Cobb County, Ga

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

H. J. Dunbar

at Newell Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 17

day of January

1898.

H. J. Dunbar

[L. S.]

Executed in presence of

W. J. Dunbar

For Those Heretofore Paid.

1898.

NO. 2054

WIDOW'S PENSION,

For year ending February 15th, 1898.

PAID TO

Mrs. H. J. Dunbar

OF

Cobb County

Widow of

W. J. Dunbar

RICHARD JOHNSON,

Commissioner of Penitentiaries

WARRANT ISSUED

1898.

AND HANDLED TO

W. J. Dunbar

REC. W. HARRISON, STATE PRINTER, ATLANTA

POWER OF ATTORNEY.

State of Georgia,

Cobb County.

I, H. J. Dunbar

hereby authorize

F. M. Nembere

of

Russell Cobb of Cobb County, Ga

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

me by him

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 17

day of February

1899.

H. J. Dunbar

[L. S.]

Executed in presence of

W. J. Dunbar

For Those Heretofore Paid.

1899.

NO. 2631

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAID TO

Mrs. H. J. Dunbar

OF

Cobb County

Widow of

W. J. Dunbar

RICHARD JOHNSON,

Commissioner of Penitentiaries

WARRANT ISSUED

1899.

AND HANDLED TO

F. M. Nembere

REC. W. HARRISON, STATE PRINTER, ATLANTA

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cobb

Personally Comes Mrs.

H. J. Dunbar

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

18²⁷ That she is the Widow of

who was a Soldier in Company

of the

56th

Regiment of

Ga. Vols.

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

1861 and served in the Army up to

life on the

day of

June 1863

1863 That he lost his

1863 (State here

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

That while in the Confederate Army
he became a prisoner of war in a battle at
Gettysburg on May the 14 1863 and died in the
hospital at Washington D.C. on June 18 1863

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 1851

I have been allowed a pension as a resident of Cobb 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

day of July 1898.

Ordinary.

Post-Office Roomer Ga

State of Georgia,

County of Cobb

Ordinary of said County, certify that I am well acquainted

with Mrs.

H. J. Dunbar

who made the above affidavit and am satis-

fied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she
has continuously resided in this State since the

Given under my official signature and seal this the

day of

July 1898.

Ordinary of

County.

Official Seal.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cobb

Personally Comes Mrs.

H. J. Dunbar

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

18²⁷ That she is the Widow of

who was a soldier in Company

of the

56th

Regiment of

Ga. Vols.

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

1861 and served in the Army up to

life on the

day of

June 1863

1863 That he lost his

1863 (State here

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

That while in the Confederate Army
he became a prisoner of war in a battle at
Gettysburg on May the 14 1863 and died in the
hospital at Washington D.C. on June 18 1863

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 1851

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

Sworn to and subscribed before me, this

day of July 1899.

Ordinary.

Post-Office

Roomer Ga

State of Georgia,

County of Cobb

Ordinary of said County, certify that I am well acquainted

with Mrs.

H. J. Dunbar

who made the above affidavit and am satis-

fied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she
has continuously resided in this State since the

Given under my official signature and seal this the

day of

July 1899.

Ordinary of

County.

Official Seal.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

John H. T. Dunbar hereby authorize
J. M. Kemble of *Roswell Ga*
 to receive and receipt for the pension paid hereon and request that he remit same to
me at *him*

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *2^d*
 day of *Feb'y.* 1900.

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, *H. T. Dunbar* hereby authorize
J. M. Kemble of *Roswell*
 to receive and receipt for the pension paid hereon and request that he remit same to
me at *Roswell*

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *11*
 day of *January* 1901.

Executed in presence of

Edw. Harrison

Dunbar, H. T. (ms)
Cobb County
 To Those Heretofore Paid.

1900.

NO. *681*

WIDOW'S PENSION,

For year ending February 15th, 1900.

PAID TO
Mrs. H. T. Dunbar
 of
Cobb County,
 Widow of *H. T. Dunbar*

JNO. W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

24/3 1900,

AND HANDED TO

Dunbar

Geo. W. Harrison, State Printer, Atlanta.

Dunbar, H. T. (ms)
Cobb Co

To Those Heretofore Paid.

1901.

No. *81*

WIDOW'S PENSION,

For year ending February 15th, 1901.

PAY TO
Mrs. H. T. Dunbar
 of
Cobb County,
 Widow of *H. T. Dunbar*

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

M. Kemble 1901,

AND HANDED TO
Jan'y 11 1901

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

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

H. T. Dumbal

Cobb who, being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since May 29th 1827. That she is the Widow of H. T. Dumbal who was a soldier in Company 56th of the 56th Regiment of Ga. Volunteers, that he enlisted in said regiment on or about the month of September 1861 and served in the Army up to June 7th 1863. That he lost his life on the 7th day of June 1863. (State here particulars of the husband's death, when, where and from what cause)

That while engaged in the battle of Bakers Creek May 16th 1863 he received a gun shot and was carried to Vicksburg and died in the hospital on May 16th 1863

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 1851.

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

Sworn to and subscribed before me, this 7th day of July, 1900. J. M. Stone Ordinary

Post Office

State of Georgia,

Cobb County.

J. M. Stone Ordinary of said County, certify that I am well acquainted with Mrs. H. T. Dumbal, 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 29th day of May 1827.

Given under my official signature and seal, this the 7th day of July, 1900.

Official Seal

Ordinary of Cobb County.

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

H. T. Dumbal

who, being sworn, says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since May 29th 1827. That she is the Widow of H. T. Dumbal who was a soldier in Company 56th of the 56th Regiment of Ga. Volunteers, that he enlisted in said regiment on or about the month of Sept 1861 and served in the Army up to Jan 7th 1863. That he lost his life on the 7th day of June 1863. (State here particulars of the husband's death, when, where and from what cause)

While engaged in the battle of Bakers Creek May 16th 1863 received a gun shot and was carried to Vicksburg and died in the hospital on May 16th 1863

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 1851.

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

Sworn to and subscribed before me, this 7th day of January, 1901. John Arvey Ordinary

Post Office

State of Georgia,

Cobb County.

John Arvey Ordinary of said County, certify that I am well acquainted with Mrs. H. T. Dumbal, 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 29th day of May 1827.

Given under my official signature and seal, this the 7th day of January, 1901.

Official Seal

Ordinary of Cobb County.

BOARD OF ALLOTTMENT

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, Mrs. H. T. Dunbar hereby authorize
F. M. Kemble of Roswell Ga
to receive and receipt for the pension paid hereon and request that he remit same to

me by him
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 22
day of Feb. 1900.

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, H. T. Dunbar hereby authorize
F. M. Kemble of Roswell
to receive and receipt for the pension paid hereon and request that he remit same to

me at Roswell
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 11
day of January 1901.

Executed in presence of

Edw. Manning

Dunbar, H. T. (m)
Cobb County
To Those Heretofore Paid.
1900.
NO. 681
WIDOW'S PENSION,
For year ending February 15th, 1900.
PAID TO
Mrs. H. T. Dunbar
OF
Cobb County,
Widow of H. T. Dunbar
JNO. W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
24/13
AND HANDED TO
Dunbar
1900,
Geo. W. Harrison, State Printer, Atlanta.

Dunbar, H. T. (m)
Cobb Co
To Those Heretofore Paid.
1901.
No. 81
WIDOW'S PENSION,
For year ending February 15th, 1901.
PAID TO
Mrs. H. T. Dunbar
OF
Cobb County,
Widow of H. T. Dunbar
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
F. M. Kemble
AND HANDED TO
Jan 11 1901
Geo. W. Harrison, State Printer, Atlanta, Ga.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, *H. J. Dunbar*, hereby authorize
F. M. Hembree of *Roswell*

to receive and receipt for the pension paid hereon, and request that he remit same to
H. J. Dunbar at *by Hand*

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

day of 1902.

H. J. Dunbar [L. S.]

Executed in presence of

Wm. H. Hembree

Dunbar, H. J.
Cobb County

To Those Heretofore Paid.

1902.

No. 200

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. H. J. Dunbar

OF

Cobb County,

Widow of *W. H. Dunbar*

Co. *F* Regiment *56* *ga*

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1/16 1902

AND HANDS TO

Hembree

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

STATE OF GEORGIA,

Cobb County.

I, *H. J. Dunbar*, hereby authorize
F. M. Hembree of *Roswell*

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

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

Executed in presence of

L. E. Hembree

H. J. Dunbar [L. S.]
Mark

Dunbar, H. J.
Cobb County

To Those Heretofore Paid.

1903.

No. 235-

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. H. J. Dunbar

OF

Cobb County,

Widow of *W. H. Dunbar*

Co.

Regiment

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1/16 1903

AND HANDS TO

Hembree

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

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES MRS.

H. J. Dunbar

who, being sworn, says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since May 29th 1827. That she is the Widow of H. J. Dunbar who was a soldier in Company 56 of the 56 Regiment of 59 Volunteers, that he enlisted in said regiment on or about the month of Sept 1861, and served in the Army up to Jan 7th 1863. That he lost his life on the 7th day of June 1863. (State here particulars of the husband's death, when, where and from what cause.)

While engaged in the battle of Babers Creek May 1863 received a gun shot and was carried to Vicksburg and died in the hospital on May 16th 1863

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 1851

I have been paid a pension as a resident of Cobb 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 6th day of June 1902

John H. S. Dunbar
Post-Office Roswell Ga

State of Georgia,

Cobb County.

John Arthur
Ordinary of said County, certify that I am well

acquainted with Mrs. H. J. Dunbar, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18

Given under my official signature and seal, this the 6th day of June 1902

(Official Seal)

John Arthur
Ordinary of Cobb 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 Cobb

PERSONALLY COMES MRS.

H. J. Dunbar

who, being sworn says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1827. That she is the Widow of H. J. Dunbar who was a soldier in Company 56 of the 56 Regiment of 59 Volunteers, that he enlisted in said regiment on or about the month of Sept 1861, and served in the Army up to June 7th 1863. That he lost his life on the 7th day of June 1863. (State here particulars of the husband's death, when, where and from what cause.)

While Engaged in the battle of Babers Creek May 1863 received a gun shot and was carried to Vicksburg and died in the hospital on May 16th 1863

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 1851

I have been paid a pension as a resident of Cobb 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 5th day of Jan 1903

John H. S. Dunbar
Ordinary.

H. J. Dunbar
Post-Office Roswell Ga

State of Georgia,

Cobb County.

John Arthur
Ordinary of said County, certify that I am well

acquainted with Mrs. H. J. Dunbar, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18

Given under my official signature and seal, this the 5th day of January 1903.

(Official Seal)

John Arthur
Ordinary of Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Colt COUNTY.

I, *H J Dunbar* hereby authorize
F M Hembree of *Roswell*

to receive and receipt for the pension paid hereon, and request that he remit same to
me at *by hand*

In Witness Whereof, I have hereunto set my hand and seal, this *2*
day of *January* 1904.

H J Dunbar [L. S.]

Executed in presence of
L. E. Hembree

Dunbar, H. J. (Inv)
Colt County

TO THOSE HERETOFORE PAID.

1904.

No. 233

WIDOW'S PENSION

FOR
YEAR ENDING DECEMBER 31, 1904

PAID TO

Mrs H J Dunbar

Colt

County,

Widow of *M H Dunbar*

Co.

Regiment

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

235 1904.

AND HANDED TO

H J Dunbar

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Colt COUNTY.

I, *H J Dunbar*, hereby authorize
F M Hembree of *Roswell*

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

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

H J Dunbar [L. S.]

Executed in presence of
L E Hembree

Dunbar, H. J. (Inv)
Colt County

To Those Heretofore Paid.

1905.

No. 324

WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO

Mrs H J Dunbar

OR

Colt County,

Widow of *M H Dunbar*

Co. *8* Regiment *56* *Co*

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

423 1905.

AND HANDED TO

M H Dunbar

Geo. W. Harrison, State Printer, Atlanta.

STATE OF GEORGIA

WIDOW'S PENSION

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES Mrs.

H. J. Dunbar

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

Cobb State of Georgia, and that she has RESIDED in said Statecontinuously ever since 1827 That she is the Widow ofH. J. Dunbar who was a soldier in CompanyA of the 56 Regiment of 99Volunteers, that he enlisted in said regiment on or about the month of Sept1861, and served in the Army up to Jan 7 1863 That he lost hislife on the day of June 1863 (State here

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

*While engaged in the
Battle of Benton Creek received a
gun shot wound and was carried
to Vicksburg and died*

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 1857

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

Sworn to and subscribed before me,

this 1 day of Jan 1904

Post Office

Ordinary.

State of Georgia,

County.

I, John H. Harty

Ordinary of said County, certify that I am well

acquainted with Mrs. H. J. Dunbar 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 18Given under my official signature and seal, this the 1st day of January 1904.Official
SealOrdinary of Cobb County.

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

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES Mrs.

Mrs. H. J. Dunbar

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

Cobb State of Georgia, and that she has RESIDED in said Statecontinuously ever since May 24th 1827 That she is the Widow ofH. J. Dunbar who was a soldier in CompanyA of the 56th Regiment of 99thVolunteers, that he enlisted in said regiment on or about the month of Sept.1861, and served in the Army up to June 7th 1863 That he lost hislife on the day of June 1863 (State here

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

*While engaged in the battle of Benton Creek
May 16th 1863, he received a gun shot wound
and was carried to Vicksburg and died in the
hospital on May 16th 1863*

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 1851

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

Sworn to and subscribed before me,

this 2 day of Jan 1905

Post Office

Ordinary.

State of Georgia,

County.

I, John H. Harty

Ordinary of said County, certify that I am well

acquainted with Mrs. H. J. Dunbar 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 18Given under my official signature and seal, this the 2 day of Jan 1905.Official
SealOrdinary of Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

I, H. T. Dunbar, hereby authorize

F. M. Kembre of Kennell

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

me at Kennell

In Witness Whereof, I have hereunto set my hand and seal, this 20

day of January 1906.

H. T. Dunbar [L. S.]
mark

Executed in presence of

Amanda Overha

Dunbar, H. T. (Mr.)

Cobb Co

To Those Heretofore Paid.

1906.

No. 170

WIDOW'S PENSION

For year ending Dec. 31, 1906.

PAID TO

Mrs. H. T. Dunbar

OF

Cobb County,

Widow of H. T. Dunbar

Co. F Regiment 54

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1906,

AND HANDED TO

Shirley

This Pension Warrant and Pensions Co. 100 W. Washington, Wash.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

I, H. T. Dunbar, hereby authorize

F. M. Kembre of Kennell

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

me at Kennell

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

day of January 1907.

H. T. Dunbar [L. S.]

Executed in presence of

Mrs. J. A. Manning

Dunbar, H. T. (Mr.)

Cobb County

To Those Heretofore Paid.

1907.

No. 274

WIDOW'S PENSION

For year ending Dec. 31, 1907.

PAID TO

Mrs. H. T. Dunbar

OF

Cobb County,

Widow of

Co. Regiment

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1907,

AND HANDED TO

Dunbar

Geo. W. Harrison, State Printer, Atlanta.

Allowed Pensions.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cobb

PERSONALLY COMES MRS.

W. J. Dumborwho, being sworn, says on oath that she is a bona fide resident of said County of
State of Georgia, and that she has RESIDED in said Statecontinuously ever since 1863. That she is the Widow of
W. J. Dumbor
of the 56th Regiment ofVolunteers, that he enlisted in said regiment on or about the month of September
1861 and served in the Army up to 1863. That he lost his
life on the June day of 7 1863. (State here
particulars of the husband's death, when, where and from what cause.)
Died in WarburgDeponent 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 1858.I have been paid a pension as a resident of Cobb 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 1st day of May 1906.
John H. Hickey Ordinary.W. J. Dumbor
mark
Post Office

State of Georgia,

Cobb County. Ordinary of said County, certify that I am well
acquainted with Mrs. W. J. Dumbor, 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 1863.Given under my official signature and seal, this 1st day of May 1906.Official
SealOrdinary of Cobb County.NOTE.—All blank spaces must be filled.
Voucher and Affidavits must bear date after January 1st, 1906.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cobb

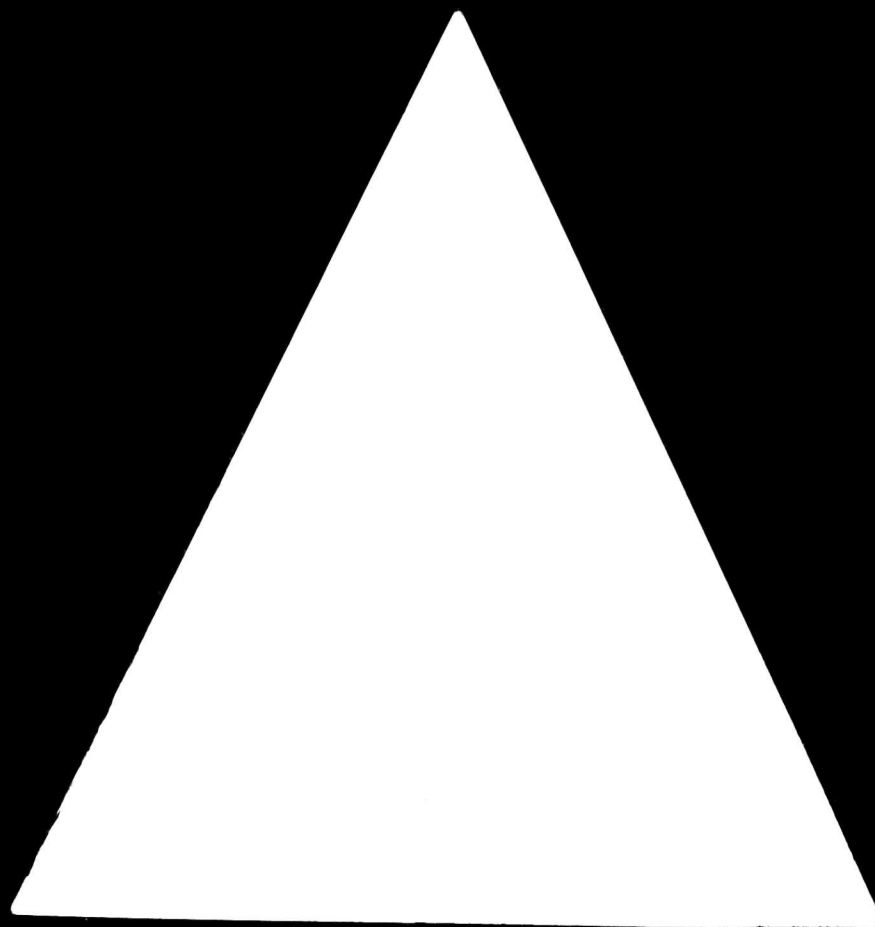
PERSONALLY COMES MRS.

W. J. Dumborwho, being sworn says on oath, that she is a bona fide resident of said County of
Cobb State of Georgia, and that she has RESIDED in said State
continuously ever since 1863. That she is the Widow of
W. J. Dumbor
of the 56th Regiment of Ca
Volunteers, that he enlisted in said regiment on or about the month of _____
1861, and served in the Army up to _____ 1863. That he lost his
life on the _____ day of _____ 1863. (State here
particulars of the husband's death, when, where and from what cause.)
Died in WarburgDeponent 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 1858.I have been paid a pension as a resident of Cobb County, for the
year ending December 31, 1906, and now apply for the pension provided by law for the year ending
December 31, 1907.Sworn to and subscribed before me
this 1st day of May 1907.
John H. Hickey Ordinary.

Post Office

State of Georgia,

Cobb County. Ordinary of said County, certify that I am well
acquainted with Mrs. W. J. Dumbor, 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 _____ 1863.Given under my official signature and seal, this 1st day of May 1907.Official
SealOrdinary of Cobb County.NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1907.



Residence of
Cobb
1893

0

**Confederate
Soldier's Application.**

☒ UNDER ACT 1910.

Cobb
County

H. P. D.
Name

B. D.
Company

176
Regiment

Approved

Entered

ENTERED ROSTER OFFICE

CHAS. F. STEWART, Secy. of War

10/27/91

Questions for Applicants to Answer.

County

What is your name and where do you reside? (Give County and Post-office).....

64-111-13 2. How long and since when have you been a continuous resident citizen of this State? _____

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) May 1863 Manila, P. I. 42nd Regt. I. C.

5. How long did you remain in the actual Military Service with said Company and Regiment?
(Give date of discharge) *April 1945* *865* *3* *4*

6. When and where was your Company and Regiment surrendered or discharged from the Service?
 First day of May 1865 Auburn, 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 at the time of the surrender or discharge. *at the rear of the command*

Where was your Command when you left it? *At the 1st*

Where was your Command when you left it? Urbana, Ga., US
Surrender

c. For what cause did you leave? — Insane

d. By whose authority did you leave?.....

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

f. Why did you not return to your Command after leave expired? _____

g. In what way were you prevented? _____

h. What effort did you make to return? _____

i. Were you captured during the war? NO

j. If so, when, and where? In what prison were you held and when were you released?

9. What property of every description was owned, in the use, possession and control of yourself

owned / Horse value 2000 / one horse room 500

11.	1	Low	20.00	My wife owned 1 note for \$500.00
12.	1	Brown	20.00	Owned only

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 name

possession and control of yourself and wife and its cash value? (Make itemized list).

1. Home value 100,000 20 acres of land value 400,000

1 Cord 15- 400 Dollars in house & 200 Dollars cash
Lous Brown 15- 200 Dollars in house & 200 Dollars cash

you? *Myself and my labor from*

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 reason? no

not allowed.

Sworn to and subscribed before me, this the 9th day of October, 1964 at San Francisco, California.

1918
J. M. Gamm
Ordinary

of _____ County.

Confederate

Soldier's Application.

UNDER ACT 1910.

County

Edk

Name: _____

J. Anderson

Company

Background:

品

APPROVED

J. W. LINDSEY

ENVELOPE

Developer of Pensions

CLAS. P. BYRD, State Printer, Atlanta

Questions for Applicants to Answer.

STATE OF GEORGIA.

County Cherokee

H. O. Duncan of said State and County, hereby applies for the pension provided by Act of 1910, to Confederate Holders, 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)
H. O. Duncan United States Army Co.

2. How long and since when have you been a continuous resident citizen of this State?
All my life 64 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)
June 1864 Marietta Ga. Infantry

5. How long did you remain in the actual Military Service with said Company and Regiment?
Until May 1, 1865: about 12 months

(Give date of discharge) May 1, 1865: Albany Ga.

6. When and where was your Company and Regiment surrendered or discharged from the Service?
May 1, 1865: Albany 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.
Present

a. Where was your Command when you left it?
I left it at Surrender at Albany

b. When did you leave the Command?
May 1, 1865

c. For what cause did you leave?
Was taken over by Surrender

d. By whose authority did you leave?
Was Surrendered by A. S. Chandler (Col)

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

f. Why did you not return to your Command after leave expired?

g. In what way were you prevented?

h. What effort did you make to return?

i. Were you captured during the war?
No

j. If so, when, and where? In what prison were you held and when were you released?

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.)

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

11. What property of any 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).

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

13. Are you drawing a pension of any amount from this State or the United States?
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, 1912.

J. W. Lindsey Ordinary,

of Cherokee County.

Confederate

Soldier's Application.

UNDER ACT 1910.

County

Name

Company

Regiment

Approved

J. W. LINDSEY,

Commissioner of Pensions

QUESTIONS FOR WITNESS AS TO SERVICE

STATE OF GEORGIA

County

I, G. M. Brown of said State and County is hereby presented as a witness in support of the application of G. M. Brown 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? G. M. Brown
2. How long and since when have you known G. M. Brown, the applicant? Ever since 1863
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? Ans: Still County, Ga. ever since 1863
4. When, where and in what Company and Regiment did G. M. Brown serve as a soldier during war from 1861 to 1865? (Give date and place). May 1861 - 1865 - 12 months
5. How did you obtain your information of this service? He was a member of the same Co. & Regiment
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) Until May 1865 - 12 months
7. When and where was his Command surrendered or discharged (give date and place). May 1865 - Albany, Ga.
8. Were you personally present at the Surrender? Yes
9. If not, where were you and how came you there? I was present
10. Was the applicant personally present with his Command at surrender? Yes
11. If not where was he and how came him there? He was present
12. When did he leave his Command? At Surrender Where was his Command when he left it? for what cause did he leave?
- By whose authority did he leave? How do you know 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 21 day of April 1912 } G. M. Brown
of Still County.

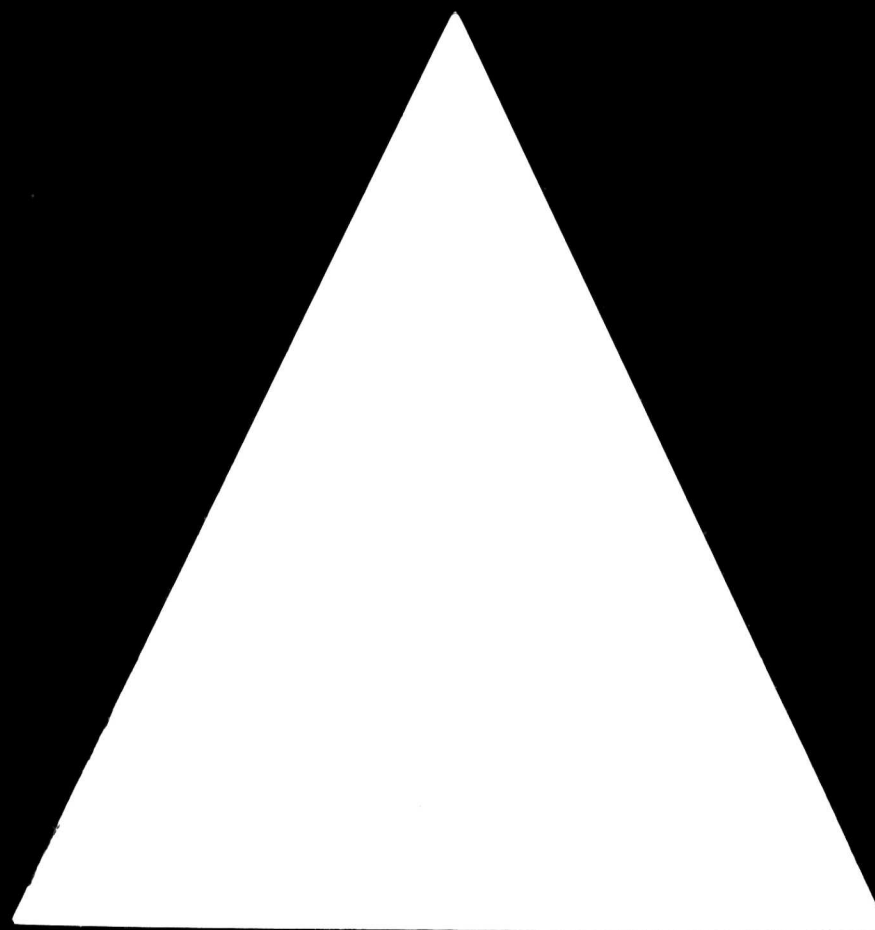
AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA

County

Personally before me came G. M. Brown 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. Land 1/2 A. 1/2
2. 1/2 A. 1/2
3. 1/2 A. 1/2
4. 1/2 A. 1/2
5. 1/2 A. 1/2
6. 1/2 A. 1/2
7. 1/2 A. 1/2
8. 1/2 A. 1/2
9. 1/2 A. 1/2
10. 1/2 A. 1/2
11. 1/2 A. 1/2
12. 1/2 A. 1/2
13. 1/2 A. 1/2
14. 1/2 A. 1/2
15. 1/2 A. 1/2
16. 1/2 A. 1/2
17. 1/2 A. 1/2
18. 1/2 A. 1/2
19. 1/2 A. 1/2
20. 1/2 A. 1/2
21. 1/2 A. 1/2
22. 1/2 A. 1/2
23. 1/2 A. 1/2
24. 1/2 A. 1/2
25. 1/2 A. 1/2
26. 1/2 A. 1/2
27. 1/2 A. 1/2
28. 1/2 A. 1/2
29. 1/2 A. 1/2
30. 1/2 A. 1/2
31. 1/2 A. 1/2
32. 1/2 A. 1/2
33. 1/2 A. 1/2
34. 1/2 A. 1/2
35. 1/2 A. 1/2
36. 1/2 A. 1/2
37. 1/2 A. 1/2
38. 1/2 A. 1/2
39. 1/2 A. 1/2
40. 1/2 A. 1/2
41. 1/2 A. 1/2
42. 1/2 A. 1/2
43. 1/2 A. 1/2
44. 1/2 A. 1/2
45. 1/2 A. 1/2
46. 1/2 A. 1/2
47. 1/2 A. 1/2
48. 1/2 A. 1/2
49. 1/2 A. 1/2
50. 1/2 A. 1/2
51. 1/2 A. 1/2
52. 1/2 A. 1/2
53. 1/2 A. 1/2
54. 1/2 A. 1/2
55. 1/2 A. 1/2
56. 1/2 A. 1/2
57. 1/2 A. 1/2
58. 1/2 A. 1/2
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67. 1/2 A. 1/2
68. 1/2 A. 1/2
69. 1/2 A. 1/2
70. 1/2 A. 1/2
71. 1/2 A. 1/2
72. 1/2 A. 1/2
73. 1/2 A. 1/2
74. 1/2 A. 1/2
75. 1/2 A. 1/2
76. 1/2 A. 1/2
77. 1/2 A. 1/2
78. 1/2 A. 1/2
79. 1/2 A. 1/2
80. 1/2 A. 1/2
81. 1/2 A. 1/2
82. 1/2 A. 1/2
83. 1/2 A. 1/2
84. 1/2 A. 1/2
85. 1/2 A. 1/2
86. 1/2 A. 1/2
87. 1/2 A. 1/2
88. 1/2 A. 1/2
89. 1/2 A. 1/2
90. 1/2 A. 1/2
91. 1/2 A. 1/2
92. 1/2 A. 1/2
93. 1/2 A. 1/2
94. 1/2 A. 1/2
95. 1/2 A. 1/2
96. 1/2 A. 1/2
97. 1/2 A. 1/2
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124. 1/2 A. 1/2
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128. 1/2 A. 1/2
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131. 1/2 A. 1/2
132. 1/2 A. 1/2
133. 1/2 A. 1/2
134. 1/2 A. 1/2
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136. 1/2 A. 1/2
137. 1/2 A. 1/2
138. 1/2 A. 1/2
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178. 1/2 A. 1/2
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255. 1/2 A. 1/2
256. 1/2 A. 1/2
257. 1/2 A. 1/2
258. 1/2 A. 1/2
259. 1/2 A. 1/2
260. 1/2 A. 1/2
261. 1/2 A. 1/2
262. 1/2 A. 1/2
263. 1/2 A. 1/2
264. 1/2 A. 1/2
265. 1/2 A. 1/2
266. 1/2 A. 1/2
267. 1/2 A. 1/2
268. 1/2 A. 1/2
269. 1/2 A. 1/2
270. 1/2 A. 1/2
271. 1/2 A. 1/2
272. 1/2 A. 1/2
273. 1/2 A. 1/2
274. 1/2 A. 1/2
275. 1/2 A. 1/2
276. 1/2 A. 1/2
277. 1/2 A. 1/2
278. 1/2 A. 1/2
279. 1/2 A. 1/2
280. 1/2 A. 1/2
281. 1/2 A. 1/2
282. 1/2 A. 1/2
283. 1/2 A. 1/2
284. 1/2 A. 1/2
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Henry E. A. (Mrs.)
Cobb County
Discontinued May
21-1901
No. 100

Widow's Pension,
 1899.

PAID TO
Mrs E. A. Dunn
 OF
Cobb County
 Widow of *Wm B Dunn*

RICHARD JOHNSON
 Commissioner of Pensions.

Warrant Issued

AND HANDED TO

1/23-1901

Geo. W. Harrison, State Printer, Atlanta.

Wm. B. Dunn
4/29-1901
4/10-99

Pension Office 5/3/1899
 Was the deceased a sound
 & healthy man, free from
 any lung trouble or taint
 when he entered the service?
 At what age did he die?
 Was he not at any time
 free of disease after the
 service? -

Rich Johnson
Comm of Pensions

Pension Office
 6/13-1901

No more evidence
 & he was declared
 Not being & was
 in - that has not
 been for him dis
 missed of

W. B. Dunn
Comm of Pensions

STATE OF GEORGIA,

Power of Attorney.

I, *Wm B Dunn* County of *Cobb*
 do hereby authorize *Wm B Dunn*
 of *Cobb County* Georgia to receive and receipt for the pension money and
 request that he present same to the Pension Office at
 day of *April* 1899.
 IN WITNESS WHEREOF I have hereunto set my hand and seal, this
 day of *April* 1899.
Wm B Dunn
 [L.S.]

STATE OF GEORGIA,

County of Cobb

I, Mrs. E. A. Dunn, hereby authorize W. H. Cheney to receive and receipt for the pension allowed and request that he remit same to me at Marionetta by me.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 8th day of April, 1899.

Executed in the presence of

[L. S.]

STATE OF GEORGIA,

County of Cobb

In person came before me, the undersigned Ordinary in and for the County of Cobb, Mrs. E. A. Dunn, who being sworn according to law, says under oath that she is the widow of Wm. B. Dunn, who was a soldier in

the service of the Confederate States or Georgia State troops, and served as a member of Company A of the 4th Regiment of Ga. Volunteers; that he enlisted in said service on or about the 15th day of April, 1864, and was in the Army.

up to August, 1864. That while in the Army, he was on the 15th day of July, 1864 (See Note No. 1).

He was attacked with cold and jaundice at Ingersollville Ga. in August he came home seriously sick with said diseases and was continually afflicted with the effects of cold, by turning into consumption from which he never recovered and died with said disease consumption on the 8th day of January 1873.

From the time of his service in the Army to the time of his death he was afflicted with said disease, sometimes unable to be out and sometimes so that he could get out in good weather.

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 4th day of Sept.

1873 and that she was born in the State of Ga. and has resided in Georgia continuously since her life that Georgia is her home and was such on the 6th December 1897, 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 General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February 15th, 1898, and herewith tenders the proof of her right to receive the pension granted by said Act.

Sworn to and subscribed before me, this the 15th day of May, 1899.

Post Office

E. A. Dunn
Marionetta Ga.

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

NOTE 2.—The Ordinary will see that ALL blank spaces are filled before the affidavits are signed.

The Instructions as set cut in the Notes must be observed.

Pension Office 5/3/1899
Was the deceased a sound & healthy man free from any lung trouble or taint when he entered the service? At what age did he die? Was he not at any time free of disease after the service? Rich Johnson
County Clerk
Dec 23 1890
Mr. Dunn received
the money for his
last pension and
has not been dis-
missed by
the military
Commissioner

Widow's Pension,
1899.
PAID TO
Mrs. E. A. Dunn
OF
Cobb
County
Widow of Wm. B. Dunn

RICHARD JOHNSON,
Commissioner of Pensions.

Warrant Issued
1899.
AND HANDED TO
1/23-1901
Geo. W. Harrison, State Printer, Albany.

Wm. B. Dunn
4/29-1873
4/10-99

Affidavit for Three Witnesses.

Form No. 2.

STATE OF GEORGIA,

County of Cobb

In person came before me, the undersigned Ordinary in and for said County, witnesses James Burton and _____

(each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally says under oath

that, from their own personal knowledge, Mrs. E. A. Dunn, now a resident

of the County of Cobb State of Georgia, is the widow of Wm. B. Dunn

who was a soldier in Company A of the 44 Regiment of Geo. State

Volunteers. The said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or

about the _____ day of _____ 1864. That he died on the _____ day of _____

1864 from the following causes: Mr. Jas. Burton says that about

1873 Wm. B. Dunn died - I understood
from conversation contracted while in the
Army - I knew since Wm. B. Dunn before
the war and after the war up to his death
- he was sickly and unable to do anything
up to his death from the close of the war.
Burton says that Dunn was discharged
and sent home sick about August 1864.

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

Burton says he was a member of the 2nd Regt.
at Andersonville with said Dunnal and knew
the above facts.

We further swear that she became the wife of said soldier on the _____ day of about

1851 and so remained until his death, since then she has not again married, and that she resided in said State

of Georgia continuously since the _____ day of _____ 1851.

We further swear that we have no personal interest in the pension asked for.

Sworn to and subscribed before me, this _____ day of _____ 1899, James Burton

J. M. Stone Ordinary.

NOTE 1 - Witnesses must not testify about things they may believe, but confine their statements to such facts as they personally know.

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

NOTE 3 - All blank spaces must be filled when signed.

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

Form No. 3.

STATE OF GEORGIA,

County of Cobb

I, J. M. Stone Ordinary in and for said county of Cobb

State of Georgia, hereby certify that I am acquainted with Mrs. E. A. Dunn

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 since the

she says of all her life, and has not yet lived out of the State since that date. I

also certify that the witnesses, to-wit: James Burton and Lemuel

A. J. Burton and and W. L. Green

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 the same was

signed. 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

8th day of April 1899.

J. M. Stone Ordinary.

(SEAL)

NOTES

The pension is only payable to certain classes of widows.

Those whose husbands were killed in the 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 service and has never remarried.

The law does not provide for any one living out of the State of Georgia.

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

Widows whose husbands enlisted from another State or served in other Commands than Georgia Commands are not entitled to pensions unless they were born in Georgia and can make proof of that fact.

No pension can be paid for previous years.

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

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

Witnesses must go before the Ordinary of their County and testify. The attestation of a Justice of the Peace or Notary will not answer in any case.

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

Amending proofs must be executed with the same formality as original proofs and the Ordinary should so certify.

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.

RICH'D JOHNSON,

Commissioner of Pensions.

Amdavit for Three Witnesses.

Form No. 2.

STATE OF GEORGIA

County of *Cobb*
Washington & Green

In person came before me, the undersigned Ordinary in
and for said County, witnesses
and

(each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally says under oath
that, FROM THEIR OWN PERSONAL KNOWLEDGE, Mrs. *E. A. B. B. B.*, now a resident
of the County of *Cobb*

State of Georgia, is the widow of *Wm. B. B. B.*
who was a soldier in Company *4* of the *4* Regiment of *Georgia*

Volunteers. The said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or
about the *10* day of *May* 1864. That he died on the *10* day of *April*

1873 from the following causes: *while serving in the Confederate army*
at Andersonville, after his enlistment he took a
violent cold and on account of it was treated by
the regiment doctor from the time he got sick
he did not do another day's duty by reason of his
inability arising from his sickness caused by
his exposure while in the service. He was taken
sick in June 1864 and was discharged in July 1864
on account of said disability on recommendation
of a board of regiment physicians. He never
recovered from his said sickness and it
went into consumption from which he died
in 1873 as stated. Bird Conger who also more affidavit
was also a member of Co. D with Wm. B. B. B. and myself
and James Burton in 2nd Regiment stationed at Andersonville.

One opportunity for knowing the facts stated in reference to death of applicant's husband were:
I enlisted in the company at the same time *Wm. B. B. B.* did
and was a member of it from the time of his enlistment
to his discharge and ever since the time and up to his death
they lived in *Cobb County* with him and would keep posted
about his condition or

We further swear that she became the wife of said soldier on the *about*
day of *1851* and so remained until his death, since then she has not again married, and that she resided in said State

of Georgia continuously since the *All her life*

We further swear that we have no personal interest in the pension asked for

Sworn to and subscribed before me, this the *10* day of *April* 1899

J. M. Stone Ordinary

Witnesses must not testify about things they now believe, but confine their statements to such facts as they personally know.
NOTE 2. If the husband died after the war of wounds or disease, state fully and particularly how you as witnesses know
the service as a soldier was the immediate cause of his death.
NOTE 3. All blank spaces must be filled when signed.

Amdavit for Three Witnesses.

Form No. 2.

STATE OF GEORGIA

County of *Cobb*

In person came before me, the undersigned Ordinary in
and for said County, witnesses *Bird Conger*
and

(each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally says under oath
that, FROM THEIR OWN PERSONAL KNOWLEDGE, Mrs. *E. A. B. B. B.*, now a resident
of the County of *Cobb*

State of Georgia, is the widow of *Wm. B. B. B.*
who was a soldier in Company *4* of the *4* Regiment of *Georgia*

Volunteers. The said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or
about the *20* day of *April* 1864. That he died on the *10* day of *April*

1873 from the following causes: *while serving in the Confederate*
army at Andersonville, after his enlistment
he took a violent cold and on account of it was
treated by the regiment doctor from the time
he got sick he did not do another day's duty
by reason of his inability arising from his
sickness caused by this exposure while in the
service. He was taken sick in June 1864
and was discharged in July 1864 on account
of said disability.
He never recovered from his said sickness
and it went into consumption from which he
died in 1873 as stated.

One opportunity for knowing the facts stated in reference to death of applicant's husband were:
I was with him in the company and a member of it from
the time of his enlistment to his discharge and ever
since the war up to his death short lived in *Cobb County*
with him and would see him frequently and talk over
matters with him and get about his health and see for
myself what his condition was.

We further swear that she became the wife of said soldier on the *about*
day of *1851* and so remained until his death, since then she has not again married, and that she resided in said State

of Georgia continuously since the *All her life*

We further swear that we have no personal interest in the pension asked for

Sworn to and subscribed before me, this the *10* day of *April* 1899

J. M. Stone Ordinary

Witnesses must not testify about things they now believe, but confine their statements to such facts as they personally know.
NOTE 2. If the husband died after the war of wounds or disease, state fully and particularly how you as witnesses know
the service as a soldier was the immediate cause of his death.
NOTE 3. All blank spaces must be filled when signed.

Georgia, Cobb County. In person came before the undersigned Ordinary in and for the county of Cobb, Dr. E. J. Letz, who being duly sworn according to law, says under oath that he knew Wm. B. Dunn who died about the year 1873 and also personally from his widow now applying for a pension under the laws of Georgia. He attended said Wm. B. Dunn as his physician during his last illness and treated him. He had consumption caused by exposure while in the service of the Confederate States Army and died from that disease about 1873. He stated Eugene J. Letz, M.D. sworn to and subscribed before me, Apr. 8, 1899.
J. M. Stone
Ordinary

Additional Testimony
Georgia, Cobb County.
The person came before me, the undersigned Ordinary of in and for said County, witnesses Henry Mitchell, P. D. Post and James Burton who severally says under oath that, from their own personal knowledge Wm. B. Dunn did enter the service, as a Confederate Soldier, a sound and healthy man free from any lung trouble or taint at the time he entered so far as I know or believe. And that he died at about the age of 44 or 45. ~~years~~.
He was never free from the disease of consumption at any time after service until he died of said disease.
Sworn to and subscribed before me, this 22nd day of December, 1899.
Henry Mitchell
P. D. Post
James Burton
M. Stone
Ordinary

Additional proof -

State of Georgia
Cobb County.

In person appeared
before me the undersigned Mrs. E. A.
Dunn who after being duly sworn
says that from the time she married
Wm B Dunn in 1867 until he went
to the war he was a stout able bodied
man and free from disease - Affiant
knows he never had consumption
until after he joined the army -

Sworn to and subscribed
before me this 20th day of Jan 1900
John J. Hamby
Ordinary Cobb County

Additional Testimony

George Cobb Co.
Testify that P. D.
Post Jas. Hamilton & Henry
Mitchell witnesses in this
affidavit are Citizens of
this County and as
witnesses are worthy of
full faith & credit
Jan 20/1900 J. M. Stone
Ord

Power of Attorney.

Form No 5.

STATE OF GEORGIA,

Cobb County.

I, Mrs E A Dunn hereby authorize J. John Hamby

of Marietta Ga to receive and receipt for the pension allowed and

request that he remit same to me by him

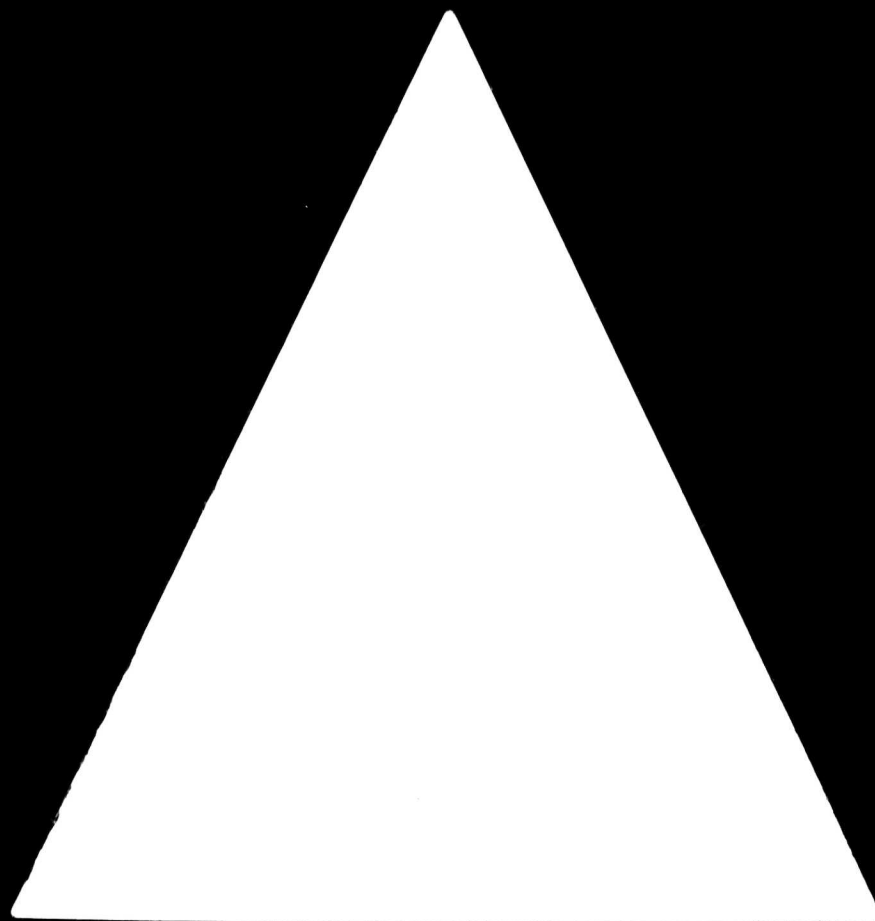
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 20th

day of Jan 1900

E A Dunn [L. S.]

Executed in the presence of

J. J. Hamby



POWER OF ATTORNEY.

STATE OF GEORGIA.

COUNTY, }

Know all Men by these Presents, That I,

(County, State of Georgia, do hereby appoint _____ of _____

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 _____ 1894.

Executed in the presence of us _____

[L. S.]

Send money to me as follows, by _____

DIRECTIONS.

(County, Georgia.

[L. S.]

Dunn, James B.

Cobb Co

(For Those Already Enrolled.)

No. *574*

**Soldier's Pension.
1894.**

Name

County

Disability

Amount

James B. Dunn
Cobb
Loss of arm
\$100
2/22

1894.

W. H. HARRISON,

Secretary Executive Department.

WARRANT RETURNED TO

Applicant

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
COUNTY. }

Know all Men by these Presents, That I, _____ of _____ County, State of Georgia, do hereby appoint _____ of _____ 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 _____ 1894.

Executed in the presence of us _____ [1, 8.]

DIRECTIONS.

Send money to me as follows, by _____ to _____ P. O. _____ County, Georgia.

Dumny James B.
6-58-94
(For These Already Enrolled.)
5/4
Soldier's Pension.

1894.

Name *James B. Dumny*
County *Cobb*
Disability *Loss of Arm*
Amount \$ *100*
2/22

1894.

W. H. HARRISON,

Secretary Executive Department.

WARRANT HANDLED TO

Applicant

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
County. }

KNOW ALL MEN BY THESE PRESENTS, That I, _____ of _____ County, State of Georgia, do hereby appoint _____ of _____ 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 _____ [1, 8.]

DIRECTIONS.

Send money to me as follows, by _____ to _____ P. O. _____ County, Georgia.

Dumny James B.
Cobb Co.
(For These Already Enrolled.)
No. 244
SOLDIER'S PENSION.

1895.

Name *James B. Dumny*
County *Cobb*
Disability *Loss of right Arm*
Amount \$ *100*
3/4

1895.

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDLED TO

apk

Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

PERSONALLY appears

Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of *Sept* 1837 that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a *Private* in Company *A*, of *44th* Regiment of *Volunteers* *Doules*'s Brigade; that whilst engaged in such military service at the battle of *Cedar Creek* in the State of *Va.*, on the *19th* day of *Oct.* 1864 he was wounded as follows:

By gunshot striking the right shoulder joint trying to gain shelter to pieces causing the right arm to be amputated at the shoulder.

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

\$100. dollars, for the year 1893
Sworn to and subscribed before me, this, the *5th* day of *Mar* 1894. *James B. Dunn*

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,

I,

Cobb County, Ordinary of said County, do certify that I am well acquainted with *James B. Dunn* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 *Mar* 1894.



Ordinary

County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

PERSONALLY appears

Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of *Sept* 1832 that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a *Private* in Company *A*, of *44th* Regiment of *Volunteers* *Cooks*'s Brigade; that whilst engaged in such military service at the battle of *Cedar Creek* in the State of *Va.*, on the *19th* day of *Oct.* 1864 he was wounded as follows:

By gunshot striking the right arm between elbow & shoulder causing said arm to be amputated at the shoulder.

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

One hundred. dollars, for the year 1894
Sworn to and subscribed before me, this, the *26th* day of *July* 1895. *James B. Dunn*

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,

I,

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

Given under my official signature and seal, this *26th* day of *July* 1895.



Ordinary

County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

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

by _____

at _____

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

day of _____ 1896.

[L. S.]

Executed in presence of us _____

Dunn, J. B.
ACT OF 1887, SEC. 1
 (For Those Already Enrolled.)
 No. 2933

SOLDIER'S PENSION.

1896.

Name *J. B. Dunn*
 County *Colo.*
 Disability *Loss right Arm*
 Amount, \$ *100.*
3/2-

1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

apph

Geo. W. Harrison, State Printer, Atlanta.

No data

Dunn, J. B.
Colo. County.
ACT OF 18 OCT. 1887
 (For Those Already Enrolled.)

No. 2055-

INVALID

SOLDIER'S PENSION.

1897.

Name *J. B. Dunn*
 County *Colo.*
 Disability *Loss Arm*
 Amount, \$ *100.*
3/24

1897.

RICHARD JOHNSON,

Commissioner of Prisons.

WARRANT HANDED TO

apph

Geo. W. Harrison, State Printer, Atlanta.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

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

by _____

at _____

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

day of _____ 1897.

[L. S.]

Executed in presence of _____

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears J. B. Dunn of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of 1831 that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company A of 44th Regiment of Volunteers, Dough's Brigade; that whilst engaged in such military service in the State of Georgia, on the 19th day of Oct. 1864, he was wounded, injured or diseased as follows:

By gunshot wound in the right arm, on account of which wound the right arm was amputated at the shoulder joint.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 20th, 1890. I have heretofore as a resident of Cobb county been allowed a pension of \$1.00 dollars, for the year 1895.

Sworn to and subscribed before me, this, the 5th day of March, 1890. } J. B. Dunn

W. H. Stone Ory

STATE OF GEORGIA,

Cobb County.

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

Given under my official signature and seal, this 5th day of March, 1890.



Ordinary W. H. Stone Cobb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears J. B. Dunn of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of Sept. 1832 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 A of 44th Regiment of Volunteers, Dough's Brigade; that whilst engaged in such military service in the State of Georgia, on the 19th day of October 1864, he was wounded, injured or diseased as follows:

Right shoulder joint, caused by bullet striking the right arm to be amputated at the joint

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 20th, 1897. I have heretofore under said law as a resident of Cobb county been allowed an invalid pension of \$1.00 Dollars, for the year 1896.

Sworn to and subscribed before me, this, the 9th day of July, 1897. } J. B. Dunn

W. H. Stone Ory

STATE OF GEORGIA,

Cobb County.

I, W. H. Stone Ordinary of said County, do certify that I am well acquainted with J. B. Dunn the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 July, 1897.



Ordinary W. H. Stone Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize

of

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

by

at

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

day of _____, 1898.

[L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize

of

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

by

at

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

day of _____, 1899.

[L. S.]

Executed in presence of

Dunn, J. B.
ACT OF MARCH 1898
 (For These Already Enrolled.)
 No. 2852
INVALID
SOLDIER'S PENSION.
1898.
 Name *J. B. Dunn*
 County *Cobb*
 Disability *Loss R. Arm*
 Amount, \$ *100.*
224 1898.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

appt

LEG. W. HARRISON, STATE PRINTER, ATLANTA

Dunn, J. B.
Cobb Co.

CODE SECTION 126

(For These Already Enrolled.)

No. 2885

INVALID

SOLDIER'S PENSION.

1899.

Name *J. B. Dunn*

County *Cobb*

Disability *Loss arm*

Amount, \$ *100.*

222 1899.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

appt

LEG. W. HARRISON, STATE PRINTER, ATLANTA

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears

J. B. Dunn of *Cobb*

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of

18 *32*

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 *B*, of *44th* Regiment of *Yn* Volunteers, *1st* Brigade; that whilst engaged in such military service in the State of *Yn*, on the *19* day of *Oct*, 1864, he was wounded, injured or diseased as follows:

That while engaged in the battle of Cedar Creek on Oct. 19th 1864. He was struck with bullet which caused the right arm to be amputated at the soldier joint.

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

\$100.

Dollars, for the year 189

Sworn to and subscribed before me, this, the

7th day of *July*, 1898.

J. B. Dunn

POST-OFFICE

Mableton 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,

Cobb County.

I, *J. W. Stoye* Ordinary of said County, do certify that I am well acquainted with *J. B. Dunn* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 *July*, 1898.

Ordinary

Cobb County.

AM: your seal here

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears

J. B. Dunn of *Cobb*

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of

Sept 18 *31*

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 *B*, of *44th* Regiment of *Yn* Volunteers, *1st* Brigade; that whilst engaged in such military service in the State of *Yn*, on the *19* day of *Oct*, 1864, he was wounded, injured or diseased as follows:

By gunshot striking right arm, causing it to be amputated at the shoulder.

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

\$100.

Dollars, for the year 189

Sworn to and subscribed before me, this, the

15th day of *July*, 1899.

J. B. Dunn

POST OFFICE

Mableton 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,

Cobb County.

I, *J. W. Stoye* Ordinary of said County, do certify that I am well acquainted with *J. B. Dunn* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 *July*, 1899.

Ordinary

Cobb County.

AM: your seal here

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

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

by _____

at _____

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

day of _____ 1900.

[L. S.]

Executed in presence of _____



CLAYTON COUNTY.

Z. T. MANSON, Ordinary

Jonesboro, Ga.

189

Georgia }
Clayton County } Z. T. Manson Ordinary
do and for said County hereby certify
that J. B. Dymun has been awarded a
pension of One Hundred Dollars as
a disabled one armed Confederate soldier
in this County.

Given under my hand and seal of
office this 12th March 1894

Z. T. Manson
Ordinary

CODE SECTION 126

(For Those Already Enrolled.)

No. 1937
Do Clayton Co 1901

INVALID

SOLDIER'S PENSION.

1900.

Name J. B. Dymun
County Cobb
Disability Arue
Amount, \$ 100
Warrant issued July 9 1900.

JOHN W. LINDSEY,

Commissionary of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

no data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears *J. B. Drum* of *Cobb*

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 *1st* day of *September* 1831; 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 *44th* Regiment of *Georgia* Volunteers, *Cook*'s Brigade; that whilst engaged in such military service in the State of *Pa.*, on the *19th* day of *Oct* 1864, he was wounded, injured or diseased as follows:

By gun shot striking right arm causing it to be amputated at the shoulder.

Deponent makes application for the pension to which he is entitled for the year ending October 28th, 1900. I have heretofore under said law as a resident of *Cobb* County been allowed an invalid pension of *\$100* Dollars, for the year 1899.

Sworn to and subscribed before me, this, the *15th* day of *February* 1900. } *J. B. Drum*
POST OFFICE *Chamblee, Ga.*

J. M. Stone
Notary State fully the nature of wound or other cause of disability which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

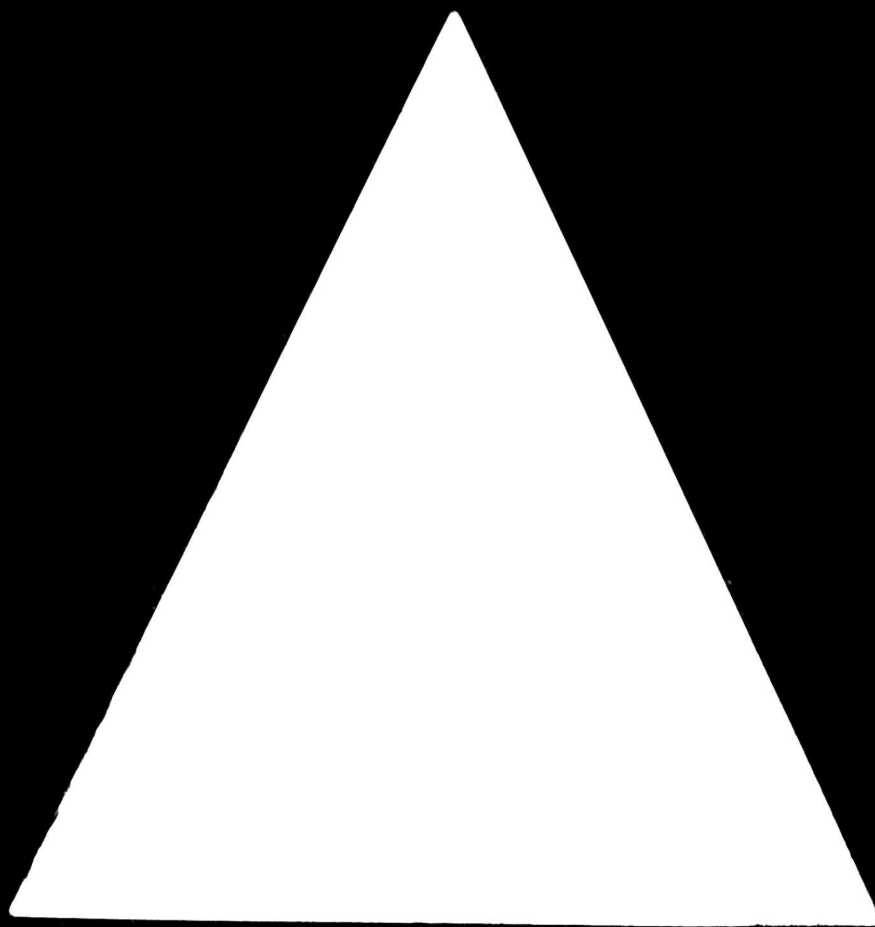
Cobb County.

I, *J. M. Stone* Ordinary of said County, do certify that I am well acquainted with *J. B. Drum* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 *February* 1900.



Ordinary *J. M. Stone* *Cobb* County.



No. *612*

Application for Allowance

FOR

Expenses

Applicant *John Dunn*

County *Cobb*

Amount *25*

Date of Warrant *June 28/88*

Entered on Record,

June 28 1888
M. H. H.

Secretary, Executive Department

STATE OF GEORGIA,
Cobb County

PERSONALLY appears *John Dunn* of Cobb 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 10 day of June 1848; 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 "L", of the 1st Regiment of Georgia Volunteers, whilst engaged in such military service, at the battle of Gettysburg, the State of Georgia, on the 2nd day of July 1863, he was wounded as follows:

shot in the left leg, the thigh bone was broken, causing a painful wound, the entire leg is rendered stiff and has been since the injury. The wound permanently disables the left leg and renders it substantially useless and incompetent to perform manual labor.

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 10 day of Jan 1888
W. M. Hammond Ordinary
John Dunn Deponent

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,
Cobb County.

PERSONALLY came before me *W. P. Stephens* of the county of Cobb State of Georgia, who, being duly sworn, says that he was a commissioned officer in Company "L", of the 1st Regiment of Georgia Volunteers, and that deponent knows *John Dunn*, 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 *John Dunn*, as stated by him in said affidavit. Deponent further states that said *John Dunn* is a bona fide citizen of this State, and resides in Cobb county.

Sworn to and subscribed before me, this 10 day of Jan 1888
W. M. Hammond Ordinary
W. P. Stephens Commissioner

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,

Cobb

County

PERSONALLY came

Joseph Dunn a

citizens of Cobb

county, in said State,

who, being duly sworn, say that ~~they are~~ acquainted with

John Dunn

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 Cobb

County, and ~~we are~~ well satisfied that all the states-

ments in his affidavit are true.

Sworn to and subscribed before me, this

12th day of January 1888

W. M. Hammett

John Dunn
mark

STATE OF GEORGIA,

Cobb

County.

PERSONALLY comes before me

H. M. Hammett

Ordinary of said county,

Dr. J. C. Goins

and Dr. E. L. Selge

both known to

me as reputable physicians of said County, who, being severally sworn, say on oath that they have

carefully examined ~~John Dunn~~

and after such examination say that the

applicant has been injured as follows: ~~He was shot through the left~~

~~hip, the bone was broken the leg around hip~~

~~was stiff and has been since the injury. Both~~

~~are substantially useless, they are entitled~~

to perform manual labor

Sworn to and subscribed before me, this

10th day of January 1888

W. M. Hammett

ORDINARY

NOTE: The physicians who state facts as to the wound and the disability resulting therefrom.

STATE OF GEORGIA,

Cobb

County.

I,

H. M. Hammett

Ordinary of said county,

do certify that I am well acquainted with John Dunn

the

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

before whom the foregoing

affidavits were made and power of attorney was signed, is a

of said county, and that the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this

10

day of

January

1888

H. M. Hammett

Ordinary

Cobb

County.

POWER OF ATTORNEY

STATE OF GEORGIA

Cobb

County.

Know all men by these presents, That I

John Dunn

of Cobb

county, in said State, do hereby appoint

R. B. Brown

of Macon

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

day of January

1888

John Dunn

[L. S.]

Executed in the presence of us:

H. M. Hammett

Ordinary

APPLICATION FOR ALLOWANCE

FOR YEAR ENDING OCTOBER 26, 1889

Applicant *John Dunn*
County *Cobb*

Amount *50*

Date of Warrant *Oct 18*

Entered on record *Oct 11 1889*

Secretary Executive Department *M. H. H.*

Wadsworth & Co
R. C. Dunn

STATE OF GEORGIA

Cobb County,
PERSONALLY appears *John Dunn*, 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 day of

1855; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a *Private* in Company *A* of the *Phillips* Regiment of *Ga.* Volunteers *Norfolk*'s Brigade; that whilst engaged in such military service, at the battle of *Gettysburg* in the State of *Penn.* on the *2nd* day of *July* 1863, he was wounded as follows:

By a fragment of shell striking the right hip bone, passing in the direction of the lower part of the abdomen, fracturing the upper part of the hip bone and cutting through the abdomen to the uterus.
Under a deposit of blood, is incompetent to perform the

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

Sworn to and subscribed before me, this the *15th* day of *July*, 1889, *John H. Dunn* *mark*

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

STATE OF GEORGIA

Cobb County,
PERSONALLY comes before me *A. H. Baker* and *E. J. Setze* Ordinary of said county, both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined *John Dunn* and after such

examination say that the applicant has been injured as follows: *By a gunshot wound, fracturing the right hip bone, passing through abdomen to intestines, & from which there is still a discharge & pain all the time rendering defendant practically incompetent to perform the ordinary avocations of life.*

Sworn to and subscribed before me, this *15th* day of *July*, 1889, *A. H. Baker* *E. J. Setze* *M.D.*
J. M. Storm 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

I, *John Dunn* Ordinary of said county, do certify that I am well acquainted with the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county. I also certify that the foregoing witnesses, to-wit:

are persons of respectability, and that their statements are worthy of full credit and belief.

I further certify that before whom the foregoing affidavits were made and power of attorney was signed, is a

of said county, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 12th day of July, 1889

Ordinary *John Dunn* County

POWER OF ATTORNEY.

STATE OF GEORGIA,

Robt. W. Ga. County 1
Know all Men by these Presents, That I, *John Dunn* of *Robt. W. Ga.* my true and lawful attorney in fact, for county of said State, do hereby appoint of *Robt. W. Ga.* my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

In witness whereof I have hereunto set my hand and seal, this 12th day of July, 1889

Executed in the presence of us:

P. R. Fleming
M. H. Horn

DIRECTION:

Send money to me as follows, by

to
County, Georgia.

P. O.

NOTES.

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 application is for loss of fingers or toes the proofs must be made to show the number, and points where amputated.

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. 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.

STATE OF GEORGIA,

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

I further certify that John Dunn before
whom the foregoing affidavits were made and power of attorney was signed, is a
of said county, and the said affidavits and
signatures thereto are genuine.

Given under my official signature and seal, this 8th day of Feb'y, 1890

Ordinary

County.

STATE OF GEORGIA,

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

I further certify that John Dunn before
whom the foregoing affidavits were made and power of attorney was signed, is a
of said County, and the said affidavits and
signatures thereto are genuine.

Given under my official signature and seal, this 6th day of Feb'y, 1891.

Ordinary

County.

APPLICATION FOR ALLOWANCE.

FOR TALKS RENDERED DURING 1890.

Dis' by John Dunn
Applicant, John Dunn
County, Cobb

Amount, \$5.00

Date of warrant, Feb'y 11

Entered on record, Feb 11 1890

W. W. Harrison
SPECIAL AGENT IN CHARGE

WARRANT FORWARDED TO

R. C. Irvine

Application for Allowance

FOR TALKS RENDERED DURING 1891.

Dis' by John Dunn
Applicant, John Dunn
County, Cobb

Amount, \$5.00

Date of Warrant, Feb'y 7

Entered on record, Feb 7 1891

W. W. Harrison
SPECIAL AGENT IN CHARGE

WARRANT FORWARDED TO

R. C. Irvine

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County. PERSONALLY appears *John Dunn* of *Cobb* 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

January 1848 day of *1848*, that he enlisted in the military service of the Confederate States (or of the State of

Georgia States, and served as a *Private* in Company *A* of *Phillips* Regiment

Volunteers in *Longstreet's* Brigade; that whilst engaged in such military service, at the battle of *Gettysburg* in the State

of *Pennsylvania* on the *3rd* day of *July*, 1863, he was

wounded as follows: *By either a Piece of Shell or*

Minnie Ball striking the right lower

part of the abdomen and passing

back towards the rear of the body passing

through and fracturing the ribs bones

and cutting through to the entrails; - thereby

dependent has been rendered practically incompetent

to perform the duties of his office, and makes application for the allowance to which he is

entitled for the year ending October 26, 1890. I have heretofore been allowed a pension

of \$500.00 dollars, for *John Dunn*

Sworn to and subscribed before me, this the *1st* day of *July*, 1891.

U. Stow Ordmy

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,

Cobb County. KNOW ALL MEN BY THESE PRESENTS, That I, *John Dunn*

of *Cobb* County, State of Georgia, do hereby appoint *W. C. Smith*

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 *1st* day of *July*, 1891.

Executed in the presence of us: *U. Stow Ordmy* [L. S.]

W. C. Smith

DIRECTION.

Send money to me as follows, by

to

P. O.

County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County. PERSONALLY appears *John Dunn* of *Cobb* county,

County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the

day of *1837*, that he enlisted in the military service of the Confederate States (or of the State of

Georgia States, and served as a *Private* in Company *A* of *Phillips* Regiment

Volunteers in *Longstreet's* Brigade; that whilst engaged in such military service at the battle of *Gettysburg* in the State

of *Pennsylvania* on the *3rd* day of *July*, 1863, he was

wounded as follows: *By either a Piece of Shell or*

Minnie Ball striking the right lower

part of the abdomen and passing

back towards the rear of the body passing

through and fracturing the ribs bones

and cutting through to the entrails; - thereby

dependent has been rendered practically incompetent

to perform the duties of his office, and makes application for the allowance to which he is

entitled for the year ending October 26, 1891. I have heretofore been allowed a pension

of \$500.00 dollars, for *John Dunn*

Sworn to and subscribed before me, this the *1st* day of *July*, 1891.

U. Stow Ordmy

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County. Know all Men by these Presents, That I, *John Dunn*

of *Cobb* County, State of Georgia, do hereby appoint *W. C. Smith*

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 *1st* day of *July*, 1891.

Executed in the presence of us: *U. Stow Ordmy* [L. S.]

W. C. Smith

DIRECTION.

Send money to me as follows, by

to

P. O.

County, Georgia.

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb COUNTY.

Know all Men by these Presents, That I,

County, State of Georgia, do hereby appoint

of *John Dunn* 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 *16th* day of *March* 1894.

John X Dunn

Executed in the presence of us

E M Fleming

DIRECTIONS

Send money to me as follows, by

to *John Dunn*
County, Georgia.

P. O.

(For These Already Enrolled.)

1672
Soldier's Pension.

1894.

Name *John Dunn*
County *Cobb*

Disability *Res 2 Co*

Amount, \$ *250*

3/21

1894

W H HARRISON.

Secretary Executive Department of

WARRANT HANDED TO

J. M. Stone

W. H. Harrison State Printer, Atlanta.

John Dunn

Cobb Co.

1893.

No. *570*

Application for Advance

Signature of Soldier

FOR

John Dunn

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POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb County.

Know all Men by these Presents, That I

of *John Dunn* County, State of Georgia, do hereby appoint

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

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

16th day of *March* 1894.

Executed in the presence of us:

John Dunn

Send money to me as follows, by

to *John Dunn*
County, Georgia.

P. O.

STATE OF GEORGIA.

For Applicants Heretofore Allowed Pensions.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.

McCabe

County

PERSONALLY appears

John Dunn Cobb
County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of *1832* 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 *L* of *3rd* Regiment of *Phillips Legion* Volunteers *Hofford*'s Brigade; that whilst engaged in such military service at the battle of *Chattanooga* in the State of *Tenn* on the *25* day of *July* 1863 he was wounded as follows:

By piece of bomb shell striking the right side and hip going through the hip and cutting off a piece of the upper part of the hip bone. Deponent is now a private, incompetent to perform the ordinary manual occupation.

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

\$30 dollars for the year 1893

Sworn to and subscribed before me, this, the

16 day of *March* 1894.

John X Dunn

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.

Cobb County

I,

John Stong

Ordinary of said County,

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

Given under my official signature and seal, this

16 day of *March* 1894.

John Stong

Ordinary

Cobb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.

Cobb County

PERSONALLY appears

John Dunn Cobb

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of *1832* 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 *L* of *Phillips Legion* Volunteers *Hofford*'s Brigade; that whilst engaged in such military service at the battle of *Chattanooga* in the State of *Tenn* on the *25* day of *July* 1863 he was wounded as follows:

By piece of bomb shell striking the right side and hip going through the hip and cutting off a piece of the upper part of the hip bone. Deponent is now a private, incompetent to perform the ordinary manual occupation.

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

\$30 dollars for

Sworn to and subscribed before me, this, the

20 day of *March* 1893.

John X Dunn

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.

Cobb County

I,

John Stong

Ordinary of said County,

do certify that I am well acquainted with *John Dunn* 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

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 thereof are genuine.

Given under my official signature and seal, this

20 day of *March* 1893.

John Stong

Ordinary

Cobb County.

STATE OF GEORGIA.

POWER OF ATTORNEY

STATE OF GEORGIA.

Cobb County.

I, *John W. Stone* Ordinary of said county, do certify that I am well acquainted with *John Dunn* 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 *Feb 17* day of *1892*

Ordinary

County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

KNOW ALL MEN BY THESE PRESENTS, That I, *John Dunn* of *Cobb* County, State of Georgia, do hereby appoint *Martha H. Stone* of 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 *17th* day of *Feb* 1895.

Executed in presence of us

John O'Garra

DIRECTIONS.

Send money to me as follows, by

to *John & Dunn* County, Georgia.

P. O.

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING ON FEBRUARY 28, 1892

Name *John A. Dunn*

County *Cobb*

Disability *Dis'leg*

Amount, \$ *50*

Entered on record *Feb 17*

1892.

W. H. HARRISON,

Secretary of Executive Department

ATTEST.

R. C. Minn

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

SOLDIER'S PENSION.

1895.

No. *293*

(For Those Already Enrolled.)

Name

County

Disability

Amount, \$ *50*

1895.

RICHARD JOHNSON,

Secretary Executive Department

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

Martha H. Stone

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

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 Georgia, and has been such continuously since the day of 1848; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company D of the 1st Georgia Volunteers; that whilst engaged in such military service at the battle of Gettysburg, in the State of Pennsylvania, on the 2nd day of July, 1863, he was wounded as follows: *in the hip or Groin by a Cannon Ball or Shell and has been disabled thereby*

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

fifty Dollars for

Sworn to and subscribed before me this the

27th day of Feb 1892

W. C. Stone 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,

County.

Know all Men by these Presents, That I

County, in said State, do hereby appoint

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

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

day of Feb 1892

Executed in the presence of us

W. C. Stone

DIRECTION.

Send money to me as follows, by

W. C. Stone

County, Georgia.

John H. Stone

P. O.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

County.

Personally appears *John Dunn* 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

day of 1849; that he enlisted in the military service of the Con-

federate States (or of the State of Georgia) during the war between the

States, and served as a Private in Company D, of the 1st Georgia

of the 1st Georgia Volunteers, that whilst engaged in

such military service at the battle of Gettysburg, in the State

of Georgia, on the 2nd day of July, 1863, he was

wounded as follows: *By fire of shot, striking*

right side at the top of the right

bone, driving out the bone to the

hip, & getting off and fracturing

the hip bone, thereby depriving

him of the ability to perform the ordinary manual

duties of life.

Depoent desires to participate in the benefits of the Act, approved October 24th, 1887,

and the acts amendatory thereof, and makes application for the allowance to which he is

entitled for the year ending October 26th, 1895. I have heretofore been allowed a pension of

50 dollars, for the year 1890

Sworn to and subscribed before me, this, the

27th day of Feb 1895.

John H. Stone

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, *John Dunn* Ordinary of said County,

do certify that I am well acquainted with *John Dunn* the

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

in his said affidavit are true, and I know 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 Feb 1895.

SEAL

Ordinary—*John Dunn* County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, *John Dunn* hereby authorize *J. M. Stone* of *Monetta 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 *25* day of *July* 1896.

Executed in presence of us

J. M. Fleming

John Dunn
Pay to R. C. Irwin
J. M. Stone

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, *John Dunn* hereby authorize *R. C. Irwin* of *Monetta 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 *26* day of *July* 1897.

Executed in presence of

J. M. Stone

John Dunn

ACT OF MARCH 1887.
(For These Already Enrolled.)

No. *854*

SOLDIER'S PENSION.

1896.

Name *John Dunn*
County *Cobb*
Disability *right hip*
Amount, \$ *50.*

2/26 1896

RICHARD JOHNSON,

Secretary Executive Department

WARRANT HANDED TO

R. C. Irwin

Gen. W. Harrison State Printer, Atlanta

W. M. Stone

ACT OF MARCH 1887.
(For These Already Enrolled.)

No. *2789*

INVALID

SOLDIER'S PENSION.

1897.

Name *John Dunn*
County *Cobb*
Disability *right hip*
Amount, \$ *50.*

2/27 1897.

RICHARD JOHNSON,

Secretary Executive Department

WARRANT HANDED TO

R. C. Irwin

Gen. W. Harrison State Printer, Atlanta

W. M. Stone

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears John Dunn of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of 18 34 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 2nd of Volunteers, Waller's Brigade; that whilst engaged in such military service in the State of Georgia, on the 2 day of July 1863 he was wounded, injured or diseased as follows:

By piece of shell striking the right side and hip & cutting off a piece of the hip bone protruding the abdomen in the lower part.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1896. I have heretofore as a resident of Cobb county been allowed a pension of \$50. dollars, for the year 1893.

Sworn to and subscribed before me, this, the 15th day of July, 1896.

John X Dunn
mark

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,
Cobb County.

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

Given under my official signature and seal, this 25th day of July, 1896.



Ordinary Cobb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears John Dunn of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of 18 33 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 2nd of Volunteers, Waller's Brigade; that whilst engaged in such military service in the State of Georgia, on the 2 day of July 1863, he was wounded, injured or diseased as follows:

By piece of shell striking the left hip & hip bone and from the hip bone and back the abdomen - Applicant is rendered permanently incompetent to perform the ordinary manual duties of life.

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 Cobb county been allowed an invalid pension of \$50. Dollars, for the year 1896.

Sworn to and subscribed before me, this, the 26th day of July, 1897.

John X Dunn
POST OFFICE Monrovia, 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,
Cobb County.

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

Given under my official signature and seal, this 26th day of July, 1897.



Ordinary Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, John Dunn hereby authorize

of

Marietta Ga

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

me

by

him

at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 1st

day of March 1898.

Executed in presence of

John Dunn [L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, John Dunn hereby authorize

of

Marietta

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

me

by

at Marietta

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 17th

day of February 1899.

Executed in presence of

John Dunn [L. S.]

Dunn, John
Cobb Co.

ACT OF MARCH 1898

(For Those Already Enrolled.)

No. 3247

INVALID

SOLDIER'S PENSION.

1898.

Name John Dunn

County Cobb

Disability Wound

Amount, \$ 50.

1898

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDLED TO

[Signature]

W. H. HARRISON, STATE PRINTER, ATLANTA

See data

Dunn, John
Cobb Co.

CODE SECTION 125A

(For Those Already Enrolled.)

No. 3161

INVALID

SOLDIER'S PENSION.

1899.

Name John Dunn

County Cobb

Disability Leg

Amount, \$ 50.

1899.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDLED TO

[Signature]

W. H. HARRISON, STATE PRINTER, ATLANTA

See data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears

John Dunn

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the

day of *1834*; 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 *2*, of *Phillips Legion* of *Georgia* Volunteers, *Wafford*'s Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *2nd* day

of *July* 1863, he was wounded, injured or diseased as follows:

That while in the battle of Gettysburg Penn he was struck with a bomb shell on the right side and hip on account of which Applicant is rendered practically incapable to perform the ordinary manual labor of life.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 20th, 1898. I have heretofore under said law as a resident of

Cobb county been allowed an invalid pension of

\$50. Dollars, for the year 1898.

Sworn to and subscribed before me, this, the

day of

March

1898.

POST-OFFICE

John Dunn

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,

Cobb County.

I, *John Dunn* Ordinary of said County, do certify that I am well acquainted with *John Dunn* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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

March

1898.

Ordinary

John Dunn Cobb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears

John Dunn of *Cobb*

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the

day of *1834*; 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 *2*, of *Phillips Legion* of *Georgia* Volunteers, *Wafford*'s Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *2nd* day

of *July* 1863, he was wounded, injured or diseased as follows:

By shell bursting and piece striking right hip and fracturing bones thereby rendering applicant incompetent to perform the ordinary manual avocations of life.

Deponent makes application for the pension to which he is entitled for the year ending October 20th, 1898. I have heretofore under said law as a resident of

Cobb County been allowed an invalid pension of

\$50. Dollars, for the year 1898.

Sworn to and subscribed before me, this, the

day of

March

1898.

POST OFFICE

John Dunn

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,

Cobb County.

I, *John Dunn* Ordinary of said County, do certify that I am well acquainted with *John Dunn* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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

March

1898.

Ordinary

John Dunn Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County. }

I, *John Dumm* hereby authorize *J. M. Stowe*

of *Marietta, Ga.*

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

at *Marietta Ga.* by *him*

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *28th* day of *February* 1900.

John Dumm [L. S.]

Executed in presence of

T. J. Hamby

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County. }

I, *John Dumm* hereby authorize *Martha*

of *Marietta*

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

at *his office* by *hand*

IN WITNESS WHEREOF, I have hereunto set my hand and seal this *5* day of *Jan* 1901.

John Dumm [L. S.]

Executed in presence of

J. M. Stowe

Dumm John
Cobb Co

CODE SECTION 136
(For Those Already Enrolled.)
No. *1279*

INVALID
SOLDIER'S PENSION.
1900.

Name *John Dumm*
County *Cobb*
Disability *Wife*
Amount, \$ *50.00*
Warrant issued *Mar 7* 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO
[Signature]
One W. Harrison, State Printer, Atlanta.

No data

Dumm John
Cobb Co

CODE SECTION 139
(For Those Already Enrolled.)
No. *1855*

DISABLED
SOLDIER'S PENSION.
1901.

Name *John Dumm*
County *Cobb*
Disability *Wife*
Amount, \$ *100.00*
Warrant issued *Jan. 15* 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO
[Signature]
One W. Harrison, State Printer, Atlanta.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, John Damm hereby authorize John Damm of Cobb County, Georgia,

to receive and receipt for the pension paid hereon and request that he remit same to me by John Damm at my residence.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 11th day of Jan, 1902.

STATE OF GEORGIA

Executed in presence of

John Damm [L. S.]
John Damm

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, John Damm hereby authorize John Damm of Cobb County, Georgia,

to receive and receipt for the pension paid hereon and request that he remit same to me by John Damm at my residence.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 3 day of Jan, 1903.

Executed in presence of

John Damm [L. S.]
John Damm

(FOR THOSE ALREADY ENROLLED.)

No. 361

DISABLED
SOLDIER'S PENSION
1902.

Name John Damm
County Cobb
Co. 2nd
Disability Philip's Leg
Amount, \$ 50

1/6 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Ordy

no date

(FOR THOSE ALREADY ENROLLED.)

No. 2-48

DISABLED
SOLDIER'S PENSION
1903.

Name John Damm
County Cobb
Co. 2nd
Disability Philip's Leg
Amount, \$ 50

1/3 3 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Ordy

Geo. W. Harrison State Printer, Atlanta

STATE OF GEORGIA

FOR APPLICANTS HERETOFORE ATTORNEED PENSIONS

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County,

Personally appears

John Dunn of *Cobb*

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the

day of *1834*; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the

States, and served as a *Private* in Company *B*, of *Phillips* Regiment of *Georgia* Volunteers, *Wofford*'s Brigade; that whilst engaged

in such military service in the State of *Pa*, on the *2* day of *July*, 1863, he was wounded, injured or diseased as follows:

By shell bursting and

fracturing right hip and fracturing

bones thereby rendering applicant

incapable to perform the ordinary

manual avocations of life

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

Cobb County, been allowed an invalid pension of *\$50* Dollars, for the year 1901.

Sworn to and subscribed before me, this the *10th* day of *Jan*, 1902. *John Dunn* Post-office *Monetta*

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

STATE OF GEORGIA,

County,

I,

John Arthur

Ordinary of said County,

do certify that I am well acquainted with *John Dunn*

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

Given under my official signature and seal, this

day of *January*, 1902.

Ordinary

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.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County,

Personally appears

John Dunn of *Cobb*

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the

day of *1834*; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the

States, and served as a *Private* in Company *B*, of *Phillips* Regiment of *Georgia* Volunteers, *Wofford*'s Brigade; that whilst engaged

in such military service in the State of *Pa*, on the *2* day of *July*, 1863, he was wounded, injured or diseased as follows:

By shell bursting and

fracturing right hip and fracturing

bones thereby rendering

applicant incapable to perform the

ordinary manual avocations of life

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

Cobb County, been allowed an invalid pension of *\$50* Dollars, for the year 1902.

Sworn to and subscribed before me, this the *10th* day of *Jan*, 1903. *John Dunn* Post-office *Monetta*

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

STATE OF GEORGIA,

County,

I,

John Arthur

Ordinary of said County,

do certify that I am well acquainted with *John Dunn*

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

Given under my official signature and seal, this

day of *January*, 1903.

Ordinary

County.

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

NOTE.—All vouchers and affidavits must bear date after January 1, 1903.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 10th
day of January 1904.
John Dunn [L. S.]
Executed in presence of _____

Dunn, John
Cobb Co
CODE SECTION 1350
(FOR THOSE ALREADY ENROLLED.)
No. 350
DISABLED
SOLDIER'S PENSION
1904.
Name John Dunn
County Cobb
Co. Philippian Legion
Disability Right leg
Amount, \$ 50
Jan 25 1904.
JOHN W. LINDSEY,
Commissioner of Pensions
WARRANT HANDED TO
Ruby
Gen. W. Harrison, State Printer, Atlanta.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 12
day of January 1905.
John Dunn [L. S.]
Executed in the presence of _____

Dunn, John
Cobb Co
CODE SECTION 1350
(FOR THOSE ALREADY ENROLLED.)
No. 304
DISABLED
SOLDIER'S PENSION
1905.
Name John Dunn
County Cobb
Co. Regiment
Disability Right leg
Amount, \$ 50
JAN 23 1905.
JOHN W. LINDSEY,
Commissioner of Pensions
WARRANT HANDED TO
Ruby
Gen. W. Harrison, State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears *John Dunn* of *Cobb* County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of *1834*; 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 *2* of *Phillips Legion* of Volunteers *Wofford's* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the day of *July* *1863*, he was wounded, injured or diseased as follows:

By shell bursting and being struck in right hip and fracturing bones thereby rendering applicant incompetent to perform the ordinary manual avocations of life

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 *Cobb* County, been allowed an invalid pension of *50* Dollars, for the year 1903.

Sworn to and subscribed before me, this the *10th* day of *January*, 1904.

John H. H. H. H. Post-office *Macon*

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,

Cobb County.

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

Given under my official signature and seal, this *10th* day of *January*, 1904.

John H. H. H. Ordinary *Cobb* County.

Am I your seal here.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb COUNTY.

Personally appears *John Dunn* of *Cobb* County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of *18*; 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 *2* of *Phillips Legion* of Volunteers *Wofford's* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the day of *1863*, he was wounded, injured or diseased as follows:

Mound in hip

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 *Cobb* County, been allowed an invalid pension of *50* Dollars, for the year 1904.

Sworn to and subscribed before me, this the *12th* day of *January*, 1905.

John H. H. H. Post-office *Macon*

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,

Cobb COUNTY.

I, *John H. H. H.* Ordinary of said County, do certify that I am well acquainted with *John Dunn* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 *January*, 1905.

John H. H. H. Ordinary *Cobb* County.

Am I your seal here.

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

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb COUNTY.

I, John Dunn hereby authorize

John Aubrey of Marilla

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

by me by hand

at his office

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 1st

day of June 1906.

John Dunn [L. S.]

Executed in the presence of

John Dunn

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

I, John Dunn hereby authorize

John Aubrey of

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

by

at

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

day of June 1907.

John Dunn [L. S.]

Executed in presence of

John Dunn

(Cobb Section 1260)

(FOR THOSE ALREADY ENROLLED.)

No. 507

DISABLED
SOLDIER'S PENSION
1906.

Name John Dunn

County Cobb

Co. 2nd Infantry

Disability leg

Amount, \$ 50.00

1906.

JOHN W. LINDSEY.

Commissioner of Pensions.

WARRANT HANDED TO

The Pensioners and Pensioners Co. 100 N. Main St., Ala.

no data

(Cobb Section 1260)

(FOR THOSE ALREADY ENROLLED)

No. 244

DISABLED
SOLDIER'S PENSION
1907.

Name John Dunn

County Cobb

Co. 2nd Infantry

Disability leg

Amount, \$ 50.00

1907.

JOHN W. LINDSEY.

Commissioner of Pensions.

WARRANT HANDED TO

The Pensioners and Pensioners Co. 100 N. Main St., Ala.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Cobb County.

Personally appears John Dunn 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 day of _____ 1836; 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 _____ in Company L Phillips of 6a Volunteers Wofford's Brigade; that whilst engaged in such military service in the State of _____, on the _____ day of _____ 186, he was wounded, injured or diseased as follows:

Disabled by

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 Cobb County, been allowed an invalid pension of 50⁰⁰ Dollars, for the year 1905.

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

John Dunn
Mark
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,

Cobb County.

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

Given under my official signature and seal, this _____ day of _____ 1906.

John A. Wofford
Ordinary Cobb County.

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



FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Cobb County.

Personally appears John Dunn of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of _____ 18____; 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 _____ in Company L Phillips of 6a Volunteers Wofford's Brigade; that whilst engaged in such military service in the State of _____, on the _____ day of _____ 186, he was wounded, injured or diseased as follows:

Disabled by

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 Cobb County, been allowed an invalid pension of 50⁰⁰ Dollars, for the year 1906.

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

John Dunn
Postoffice

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

State of Georgia,

Cobb County.

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

Given under my official signature and seal this _____ day of _____ 1907.

John A. Wofford
Ordinary Cobb County.

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



Audited

Feb. 19

1889.

Wm. S. Smith
COMPTROLLER GENERAL

Cobb

Maimed Soldiers.

Voucher No. 704

Amount \$ 50.

Paid to *John Dunn*
For *Left leg*
disabled.

July 19 1889

Included in Warrant No.
issued to Treasurer

1889.

WARRANT CLERK

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

R. C. Smith

Maimed Soldiers.

Voucher No. 884

Amount \$ 50

Paid to *John Dunn*
For *Disabled by*
body maimed
July 11 1890

Included in warrant No.
issued to Treasurer

18

WARRANT CLERK

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

R. C. Smith

1891.

Maimed Soldiers.

Voucher No. 186

Amount \$ 50

Paid to *John Dunn*
For *Disabled leg*

July 11 1891.

Included in warrant No.
issued to Treasurer.

1891.

WARRANT CLERK

Geo. W. Harrison, State Printer, Atlanta.

R. C. Smith

No. 764

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga

1888

Mr. John Dunn of the County
Cobb 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

Eight hundred dollars

He is entitled to receive the sum of Fifty 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

RECEIVED OF STATE TREASURER R. U. HARDEMAN,

Fifty Dollars

per above voucher, this

19

of

R. C. Irwin

Dollars.

1889.

No. 884

STATE OF GEORGIA,

EXECUTIVE DEPARTMENT.

Atlanta, Ga. July 11 1890

Mr. John Dunn of the County
Cobb 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

Dis by body wound

He is entitled to receive the sum of Fifty 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.

50.00

RECEIVED OF STATE TREASURER R. U. HARDEMAN,

Fifty Dollars

per above voucher, this

11

of

July

1890

Dollars.

R. C. Irwin
Atty in fact

1891
No. 186

STATE OF GEORGIA.
EXECUTIVE DEPARTMENT. }

Atlanta, Ga. July 7 1891.

Mr. John D. ... of the County
of Cobb, 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
Leg disabilities. He is entitled to receive the sum of Fifty & 00/100 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.

W. J. ...
GOVERNOR.

By the Governor

J. H. Harrison
SECY. EXECUTIVE DEPARTMENT.

\$50.00

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

Fifty

per above voucher, this

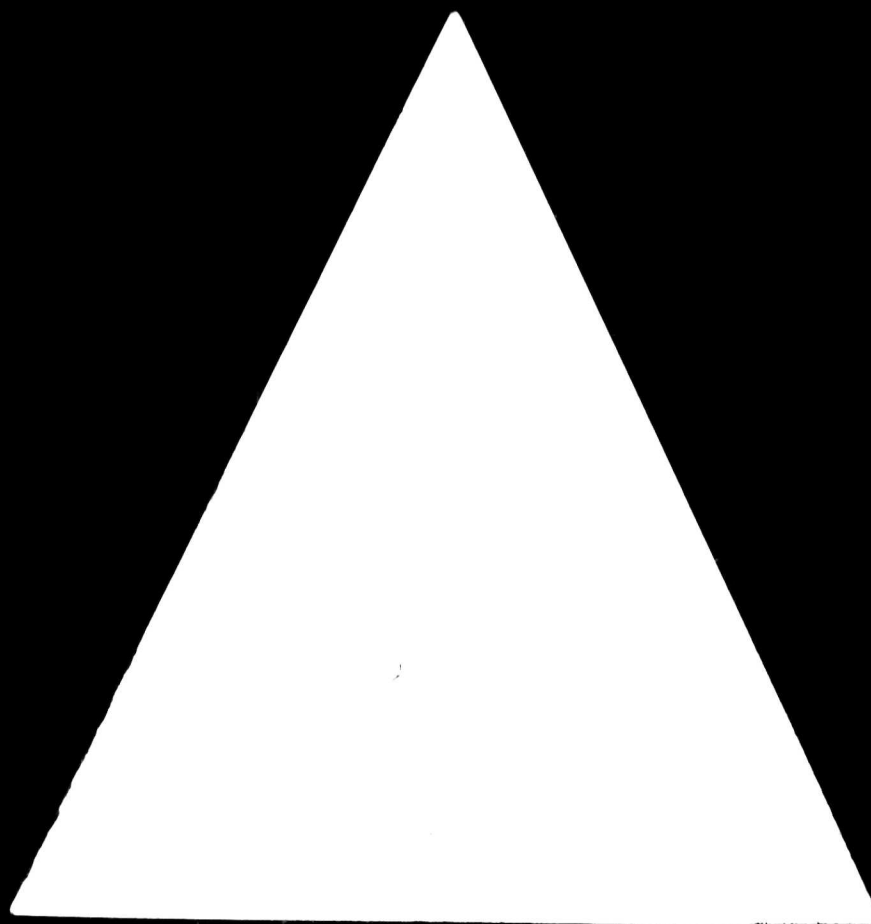
of

July
R. U. Hardeман



Dollars,

1891.



State Dept. Public Welfare,
Atlanta, Oct. 28, 1937.

W. G. Dunn enlisted as a private
in Co. C, Phillips' Legion Co.
Cavalry May 1863. Surrendered,
Greensboro, N. C., Apr. 26, 1865.

William Henderson
Director Confederate Records
Div.

Dunn, W. G.
Cobb County
Ex 1038

Widow's Application

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

County *Cobb*
Name *Mrs. Mae Dunn*
Widow of *W. G. Dunn*
Date of Marriage *Dec 1 1901*
Date of Husband's Death *June 2 1936*
Company *Phillips' Legion Co.*
Regiment *1st*
Approved *DEC 1937*
W. T. G. Gellan
Director.

AUG 13 1947

STATE OF GEORGIA.

Cobb COUNTY.

Ordinary's Certificate

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

Given under my hand and seal of office this *28* day of *July* 1937.
/SEAL OF ORDINARY
W. F. Dentell
Ordinary
of *Cobb* County.

INSTRUCTIONS

1. Before any question is answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will give answers made to each of the questions asked you and the evidence you shall give will be the whole truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Affidavits must be made before the Ordinary of the County in which the applicant so witnesses reside and must be certified by such Ordinary.
4. All affidavits must be made before the Ordinary of the County in which the applicant so witnesses reside and must be certified by such Ordinary.
5. Attach certified copy of marriage license if obtainable.
6. If the applicant is a widow, she must be sworn throughout the State. A short simple form is to be used for such.
7. Don't use the bulk of the form.
8. Do not take an application from any widow who is already receiving a pension.

State Dept. Public Welfare
Atlanta, Oct. 28, 1937.

W. C. Dunn enlisted as a
in Co. C, Phillips' Legi
Cavalry May 1863. Surre
Greensboro, N. C., Apr. 2

Director of Confederate Rec
Div.

Widow's Application

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

County Cobb
Name Mrs. Mae Dunn
Widow of W. C. Dunn
Date of Marriage Dec 1 1901
Date of Husband's Death June 3 1936
Company Phillips' Legion
Regiment 1st
Approved W. C. Dunn 1937
Director.

Ordinary's Certificate

STATE OF GEORGIA,

Cobb COUNTY.

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

Given under my hand and seal of office this 28 day of July 1937.

SEAL OF ORDINARY:

INSTRUCTIONS:

- Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the whole truth. So help you God."
- Additional affidavits may be attached if blank spaces are insufficient.
- Only widows who married prior to January 1st, 1920, are entitled.
- 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.
- Attach certified copy of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
- Fill out the back of the application carefully.
- Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.
- Do not take an application from any widow who is already receiving a pension.

APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,

Cobb COUNTY.

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

SECTION I.

- What is your name, and where do you reside? (Give Post Office and County) Mrs. Mae Dunn, R. F. D. 2, Marietta, Cobb Co. Ga.
- How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? About Dec. 1, 1872 and continuously since
Give date, or year, of your birth. Aug. 3, 1872 Age? 64
- (1) When, (2) where and (3) to whom were you married?
Dec. 1, 1901, Cobb Co. Ga., W. C. Dunn
- a. Have you married since the death of first and soldier husband? No
- b. When and where did your first husband die? Cobb Co. Ga. June 3, 1936
- c. Were you residing together when he died? Yes
- d. If not, how long had you resided apart? -
- e. Are you now a widow? Yes
- f. Have you or your husband heretofore been paid a pension by the State? Yes
- g. If so, when and for what cause were you or your husband placed on the roll? He was on Cobb Co. Confed. Soldier Pension roll. I drew bal. of 1936.

SECTION II.

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

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

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

Sworn to and subscribed before me, this the

24 day of July, 1937.
W. C. Fowler Ordinary
of Cobb County.
(SEAL OF ORDINARY)

Mrs. Mae Dunn
Applicant.

An Affidavit

(Read carefully before making this affidavit.)

State of Georgia,

County of

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

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

Sworn to and subscribed before me, this the

day of , 193

Ordinary,

County.

Questions for Witness as to Marriage and Service of Husband.

STATE OF GEORGIA,

COUNTY.

of said State and County is hereby presented as a witness in support of the application of Mrs. M. A. Dunn for the pension provided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendments of 1920 and 1937, in said State, who, after being sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? (Give Post Office and County) J. R. Fowler, Marietta, Ga.
2. How long and since when have you known Mrs. M. A. Dunn applicant since 1901.
3. Where does she now reside, and since when has she been, continuously, a bona fide, resident citizen of this State? R. F. D. 2, Marietta - most all her life.
4. When and to whom was she married? W. S. Dunn in 1901. How do you know?
5. How long and since when did you know W. S. Dunn her husband? About 50 years.
6. When and where did W. S. Dunn the husband of applicant, die? June 1926 - Cobb Co.
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?

If the husband of the applicant was a pensioner, DO NOT answer the following questions.

9. When, where and in what Company and regiment did enlist? (Give date and place)
10. How did you obtain your information of this service?
11. How long within your personal knowledge did he perform actual military service with this Company and Regiment? (Give dates.)
12. When and where was his Command surrendered or discharged? (Give date and place.)
13. Were you personally present with this Command when it was surrendered? If not, where were you and how came you there?
14. Was the husband of applicant personally present with his Command at its surrender? If not where was he? and how came him there? When, where and for what cause did he leave his Command? (Give date.) By whose authority did he leave his Command? and how long was he granted leave? How do you know all that you have stated to be true? (If of your own knowledge, state clearly and specifically).
15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command?
16. What effort did he make to return to his Command and how do you know this?

17. Was he captured as a prisoner? If so, when and where? In what prison was he held? and when released?

Sworn to and subscribed before me, this the

day of July 1937, Ordinary, County.

(SEAL OF ORDINARY)

J. R. Fowler
(Witness)

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLANTA

Honorable James J. Daniel, Ordinary,
Cobb County,
Marietta, Georgia.

WHEREAS:

MRS. MAE DUNN, WIDOW OF W. G. DUNN,

has filed in this office an application for the Georgia pension allowed to widows of Confederate veterans; and it appearing that the late husband of this applicant performed actual military service as a Confederate soldier and was honorably separated from such service; and that applicant was married to said soldier prior to January 1st, 1920, and that she was not remarried; it is, therefore,

ORDERED:

That said applicant be admitted to the pension roll of the State of Georgia for the month of January, 1938, and thereafter; and that a copy of this order be sent to the Ordinary of said County.

This, the 27th day of December 1937.

H. Thur. Gillen
Director, Confederate Division
State Department of Public
Welfare

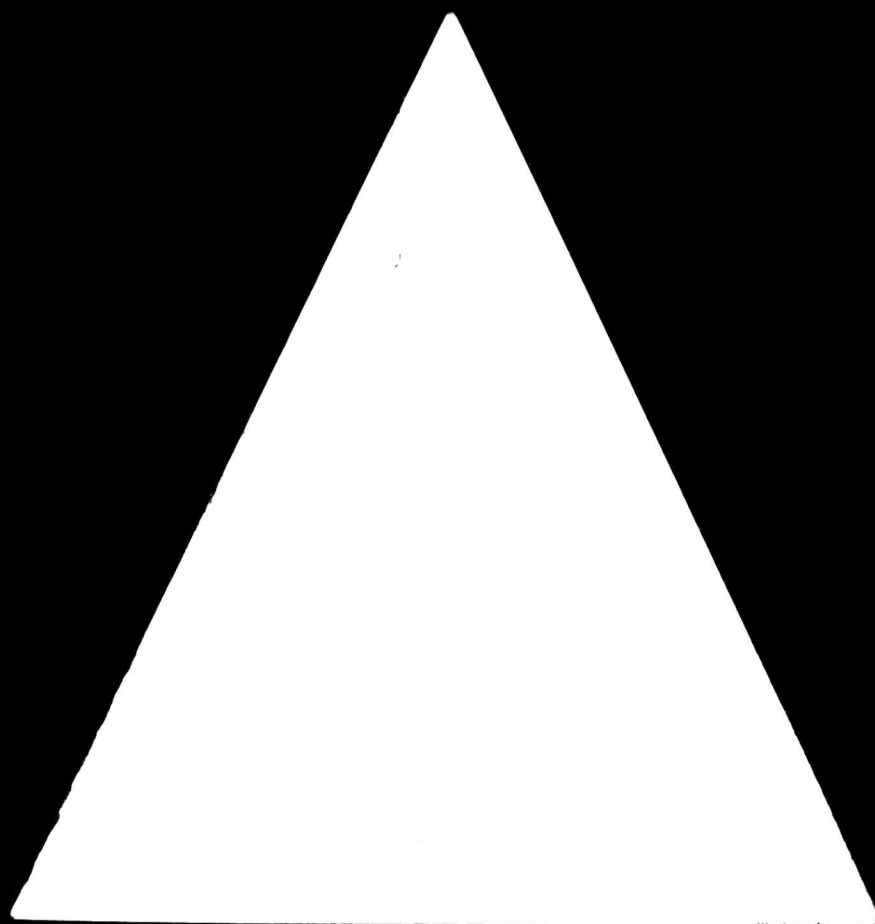
COURT OF ORDINARY, COBB COUNTY
JAS. J. DANIELL, ORDINARY
MARIETTA, GA.

Georgia, Cobb County.

This is to certify that W. G. Dunn and Miss Ella Mae Brannon were married on the first day of December, 1901 as found on Marriage Record Book E, page 166, Cobb County Record of Marriages.

Given under my hand and seal of office, this July 24, 1937.

Jas. J. Daniell
Ordinary



Ordinary's Certificate

STATE OF GEORGIA

COUNTY

Cobb

COUNTY

I, *John D. Adams*

Ordinary of said County, certify that I know

resides in said county. That I also know

John D. Adams

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 *20* day of *Oct* 19 *19*

John D. Adams Ordinary

of *Cobb* County

(SEAL)

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you give shall be the whole truth. No help you take."
2. Affidavits made by persons who are not residents of the county in which the applicant or witness resides and must be certified by such Ordinary.

Dunn, W. G.
Cobb Co

✓ No. *U. N. Jan 1920*

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County *Cobb*

Name *W. G. Dunn*

Company *C*

Regiment *Phillips's Legion Cav.*

Approved _____

6 R.O.
1901

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-30-1919

STATE OF GEORGIA.

COUNTY.

I, J. M. Gamm Ordinary of said County, certify that I know the applicant W. G. Dunn for pension is the person he represents himself to be and resides in said county. That I also know John Tate 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 20 day of Oct 1919

Ordinary

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.

County

Name

Company

Regiment

Approved

J. W. LINDSEY,

Commissioner of Pensions.

Byrd Printing Co., State Printer, Atlanta.

Application for Soldier's Pension Under Act 1910

Amended by Act 1919

Questions For Applicants to Answer

STATE OF GEORGIA.

COUNTY.

I, W. G. Dunn 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)
W. G. Dunn Albionville Cobb Co.
2. How long and since when have you been a continuous resident citizen of this State?
All my life, 74 years
3. Did you enlist in the Army of the Confederate States or in the organized militia of this State from 1861 to 1865? yes
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service)
May 1863, Chertee Co. in Co. C, Phillips's Legion Cavalry
5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge)
18 months until April 26, 1865
6. When and where was your Company and Regiment surrendered or discharged from the Service?
April 26, 1865, near Greensborough, 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.
I was present
- a. Where was your command when you left it? Greensborough, N. C.
- b. When did you leave the command? April 26, 1865
- c. For what cause did you leave? Army Surrendered
- d. By whose authority did you leave? Army
- e. For how long was your leave granted? In what way? —
- f. Why did you not return to your command after leave expired? —
- g. In what way were you prevented? —
- h. What effort did you make to return? —
- i. Were you captured during the war? no
- j. If so, when, and where? In what prison were you held and when were you released? —
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

day of Oct 1919

Ordinary

of

County.

(SEAL)

1919
11/16
46

Questions for Witnesses as to Service

STATE OF GEORGIA,

COUNTY.

John Tate of said State and County is hereby presented as a witness in support of the application of H. C. Dunn 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? John Tate, Marietta Ga.

2. How long and since when have you known H. C. Dunn the applicant? Eighty 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? Cobb Co Ga ever since I know him.

4. When, where and in what Company and Regiment did H. C. Dunn enlist during war from 1861 to 1865? (Give date and place.) He 1863 Co. 2. Phillips Regt. Army

5. How did you obtain your information of this Service? I was in same Co. & Regiment

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date) Until Surrendered June 26/65

7. When and where was his command surrendered or discharged (give date and place) April 26-1865. Columbus Ga.

8. Were you personally present at the surrender? Yes

9. If not, where were you and how came you there? I was present

10. Was the applicant personally present with his command at surrender? Yes

11. If not where was he and how came him there? He was present

12. When did he leave his command? April 26-1865. Where was his command when he left it? For what cause did he leave?

By whose authority did he leave? and how long was he granted leave?

How do you know all that you have stated to be true? If of your own knowledge, tell clearly and specifically. I was with Applicant during all this Service

13. In what way was he prevented from returning to his command?

How do you know? He was never

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

7th day of Oct 1919.

John Tate Ordinary

of Cobb County.

(SEAL)

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Cobb County.

I, Jas. J. Daniell, Ordinary of said County, do certify that I personally know Mrs. Mae Dunn, the applicant, and that she is the lawful widow of W. G. Dunn, who was on the Pension Roll of said Cobb County, and was paid a Pension from Cobb County for 1936, and at the time of his death on the 3 day of June 1936, there was due to him and unpaid his Pension of 120.00 Dollars from the State of Georgia, and I know John J. Kemp, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 16 day of June, 1936.

(Seal of Ordinary)

Jas. J. Daniell, Ordinary
Cobb County

Cobb County

193

Application for Pension Due Deceased Soldier

(UNDER ACT 1891)
(To be paid to his Widow)

BY

Mrs. Mae Dunn
Widow of W. G. Dunn
Date of Marriage Dec. 1, 1901
Date of Death June 3, 1936
Approved and ordered paid.

193
R. de T. LAWRENCE,
Commissioner of Pensions.
Ordinary: Fill out above in full and send this blank to Pension Department for approval before you pay out the money.

FILED
18 1936
VETERAN SERVICE OFFICE
U.S. DEPARTMENT OF WAR
WASHINGTON, D.C.

Application for Pension Due Deceased Soldier

(To Be Paid to His Widow)

(UNDER ACT APPROVED OCTOBER 9, 1891)

STATE OF GEORGIA, Cobb County, *Mae Dunn*
Personally before me, the Ordinary of said County, comes Mrs. *Mae Dunn*
of said County, who after being duly sworn, on oath says that she is the widow of
W. G. Dunn
and that said Pensioner was on the Pension Roll of Cobb County
and was paid a Pension of *Thirty Dollars* (\$ *30.00*) Dollars
from said County for the month of *June* 193*6*, and that said Pensioner died in
Cobb County on the *3rd* day of *June*, 193*6*,
Applicant further swears that she married the said *W. G. Dunn*
on the *1st* day of *December*, 1901, in Cobb County and
State of *Georgia*, and resided with him from the date of marriage to his death as his
lawful wife, and is now his dependent widow, and she asks that the Pension for *1935* and
and unpaid be paid to her.

Sworn to and subscribed before me this *16* day of *June*, 193*6*.
Jas. J. Darrell, Ordinary } *Mrs. Mae Dunn* (L. S.)
Cobb County } *and Marietta Dunn*
(Seal of Ordinary)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Cobb County.
Personally before me comes *John J. Kemp*, who
on oath says that he knew *W. G. Dunn* while in life
and that he knows Mrs. *Mae Dunn*, the
above applicant; and knows that the said *W. G. Dunn*
and *Mrs. Mae Dunn* were in due form of law married in the County
of Cobb in the State of *Georgia* on
the *1st* day of *December*, 1901, and that they were residing
together as husband and wife at the time of his death on the *3rd* day of
June, 193*6*, and that she is his dependent widow.

Sworn to and subscribed before me this *16* day of *June*, 193*6*.
Jas. J. Darrell, Ordinary } *John J. Kemp*
Cobb County }
(Seal of Ordinary)

INSTRUCTIONS:

- 1st. Proof of marriage must be made.
- 2nd. Do not use the enormously large form of marriage certificate in common vogue throughout the State, suitable only for framing. Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage license is the proper thing.
- 3rd. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the seals affixed, and that each of application, when folded, is filled in.
- 4th. Pay out no money on this application until approved in the Pension Department.
- 5th. The widow or person holding her proper power-of-attorney receipts for this pension by signing name, as widow, opposite the name of husband on the soldier pay roll.
- 6th. Only the unpaid pension for the year is covered by this application. Take another application, on the white blank, to admit widow to rolls in her own right.

NAME Dunn, W. G. YEAR 1920 COUNTY Cobb.

WHEN AND WHERE BORN? A resident of Georgia all my life ,
74 years.

ENLISTED WHEN AND WHERE? May, 1863, Cherokee County, Georgia.

RANK:

COMPANY AND REGIMENT? Company C, Phillipp's Legion Cavalry.

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED:

WHEN AND WHERE SURRENDERED? April 26, 1865, near Greensboro, N.C.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED:

WITNESSES: John Tate - same command - - - - - No data.

THE VETERANS SERVICE OFFICE

STATE CAPITOL

ATLANTA

IN RE: Application of Mrs. Mae Dunn,
widow of W. G. Dunn, Cobb County,
for pension balances accrued to
her husband for years 1933, 1934
and 1936:

It appearing that the late husband of this applicant established his right to a pension as a Confederate veteran and was such a pensioner at the time of his death; that applicant was married to said pensioner and that she lived with her said husband to the date of his death and has not remarried, and that the pension payments that had accrued to the husband, but had not been paid to him, are due applicant, under the Act of 1891, (1933, \$90., 1934, \$30. and 1936, \$180.), this application is approved, and it is ordered that said payments be made to her, by the Ordinary of Cobb County, as and when they may become payable.

This the 18th day of June, 1936.

C. L. Hudson
Director

COURT OF ORDINARY, COBB COUNTY
JAMES J. DANIELL, ORDINARY
MARIETTA, GA.

MARRIAGE CERTIFICATE.

STATE OF GEORGIA, COBB COUNTY.

THIS CERTIFIES THAT W. G. Dunn and Miss Ella May Brannon were united in the Holy Bonds of Matrimony by A. B. Vaughan, Minister of the Gospel on the first day of December, in the year of our Lord 1901 as appears of record in my office in Marriage Record, book "E", page 166. This 18th day of June, 1936.

James J. Daniell
Ordinary