

Georgia }
 Cobb County } Personally appeared before
 me J. J. Balling who on
 oath says that J. A. English was
 sent home from the war in the Spring
 of 1864 with the Brain Fever. that she
 had him ~~daily~~ during the remainder of
 the year 1864 and 65. That J. lived within
 a few hundred yards of where he ~~lived~~
 was sent home. And that after the fever
 was broken, it settled in his legs and
 he was compelled to go on crutches for
 7 or 8 months, and that his tongue was
 paralyzed, and heard that he was never
 able to return to the army, on account
 of his physical condition, and that
 his condition at this time is such
 as to need
 J. J. Balling
 subscribed before
 John Thomas Estlin
 Cobb County

Georgia }
 Fulton County } Personally appeared before
 me Annis E. Sanders of Fulton
 Co Ga who on oath says
 1 That she has known J. A. English of
 Cobb County ever since before the war
 between the States
 2^{and} That she lived within three hundred
 yards of said J. A. English during the
 year 1864. and that he came home with
 the Brain Fever in the Spring of 1864. and
 that he was not able to return to the army
 after the fever left him. The same having
 settled in his legs. from which he
 had to go on crutches 8 months after
 he was able to set up
 3 That the fever also paralyzed his
 tongue, and he was for a long time
 he could not talk well
 4 I know that his condition was
 such that up to the time of the surrender
 after he was sent home from the war
 in the Spring of 1864 with Brain Fever
 he was never able to return
 5 I have no interest in the recovery
 of a pension by the applicant whatever
 6 I am acquainted with J. A. English and
 know that he is very feeble

Annis E. Sanders

Seen to and subscribed before me
 December 12th 1901.

John R. Williamson
 Auditor
 Fulton County

[illegible]

AUG 13 1967

Director Confederate Records Di

State Dept. Public Welfare,
Atlanta, Nev. 9, 1939.

George W. Erwin enlisted as a
private in Co. K, 23d Regt.
Ga. Inf. Aug. 31, 1861. Paroled
Charlotte, N. C., May 5, 1865.

Director Confederate Records

Wm. H. Erwin Co.
1999

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

SECTION I.

1. What is your name, and where do you reside? (Give Post Office and County).
Mrs. Anna Erwin, P.O. 1, Marietta, Ga. Cobb Co.
2. How long and since when have you been, continuously, a bona fide resident citizen of the State
of Georgia? Since 1908 - nearly 29 years
- Give date, or year, of your birth. Apr. 27, 1875 Age: 62
3. (1) When, (2) where and (3) to whom were you married? (1) Dec. 18, 1908 (2) Murphy, N.C.
(3) Geo. W. Erwin
- a. Have you married since the death of first and soldier husband? no
- b. When and where did your first husband die? June 4, 1919 in Union Co. Ga.
- c. Were you residing together when he died? yes
- d. If not, how long had you resided apart? yes
- e. Are you now a widow? yes
- f. Have you or your husband heretofore been paid a pension by the State? husband was on Con-
roll of Union Co. Ga.
- g. If so, when and for what cause were you or your husband placed on the roll?

SECTION II.

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

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

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

Sworn to and subscribed before me, this the

27th day of July, 1937.
Wm. H. Erwin Co. Ordinary
(SEAL OF ORDINARY)

Mrs. Anna Erwin Applicant.
mark

Widow's Application

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

County Cobb
Name Mrs. Anna Erwin
Widow of Geo. W. Erwin
Date of Marriage Dec. 18, 1908
Date of Husband's Death June 4, 1919
Company 23d Regt. Ga. Inf.
Regiment 23d Regt. Ga. Inf.
Approved Wm. H. Erwin 1937
Director
DEC 27 1937

Ordinary's Certificate

STATE OF GEORGIA,

Cobb COUNTY.

I, Wm. H. Erwin, Ordinary of said County, do certify
that I know Mrs. Anna Erwin 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 Wm. H. Erwin
the witness who swears to the service of husband and/or the marriage; that both of them are now residents
of said County and were duly sworn by me before signing the foregoing affidavits, and that they are
truthful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and seal of office this 28th day of July, 1937.
(SEAL OF ORDINARY) Wm. H. Erwin Ordinary.
of Cobb County.

INSTRUCTIONS:

1. Before any questions are answered the Ordinary shall swear applicant and the witnesses in the following words: "You
do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be
the whole truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1920, are entitled.
4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be
certified by such Ordinary.
5. Attach certified copy of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Fill out the back of the application carefully.
7. Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.
8. Do not take an application from any widow who is already receiving a pension.

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 _____ for the pension provided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendments of 1920 and 1937, in said State, who, after being sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? (Give Post Office and County) _____
2. How long and since when have you known _____ applicant _____
3. Where does she now reside and since when has she been, continuously, a bona fide, resident citizen of this State? _____
4. When and to whom was she married? _____ how do you know? _____
5. How long and since when did you know _____ her husband? _____
6. When and where did _____ husband of applicant, die? _____
7. Were the applicant and her husband living together as husband and wife at the date of his death? _____

8. If not, how long did they live apart before his death? _____

Were they divorced? _____

If the husband of the applicant was a pensioner, DO NOT answer the following questions.

9. When, where and in what Company and regiment did _____ enlist? (Give date and place) _____
10. How did you obtain your information of this service? _____
11. How long within your personal knowledge did he perform actual military service with this Company and Regiment? (Give dates.) _____
12. When and where was his Command surrendered or discharged? (Give date and place.) _____

13. Were you personally present with this Command when it was surrendered? _____

If not, where were you _____ and how came you there? _____

14. Was the husband of applicant personally present with his Command at its surrender? _____

If not where was he? _____ and how came him there? _____

When, where and for what cause did he leave his Command? (Give date.) _____

By whose authority did he leave his Command? _____

and how long was he granted leave? _____

How do you know all that you have stated to be true? (If of your own knowledge, state clearly and specifically.) _____

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

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

17. Was he captured as a prisoner? _____ If so, when and where? _____

In what prison was he held? _____ and when released? _____

Sworn to and subscribed before me, this the _____

_____ day of _____, 193 _____

_____, Ordinary

of _____ County.

(SEAL OF ORDINARY)

(Witness)

STATE DEPARTMENT OF PUBLIC WELFARE

FURT BUILDING

ATLANTA

Honorable James J. Daniel, Ordinary,
Cobb County,
Marietta, Georgia.

WHEREAS:

MRS. ANNA ERWIN, WIDOW OF GEO. W. ERWIN,

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. Thomas Gillen
Director, Confederate Division
State Department of Public Welfare

Board of County Commissioners

CHEROKEE COUNTY

B. L. PADGETT, REGISTER OF DEEDS

L. B. NICHOLS, CHAIRMAN

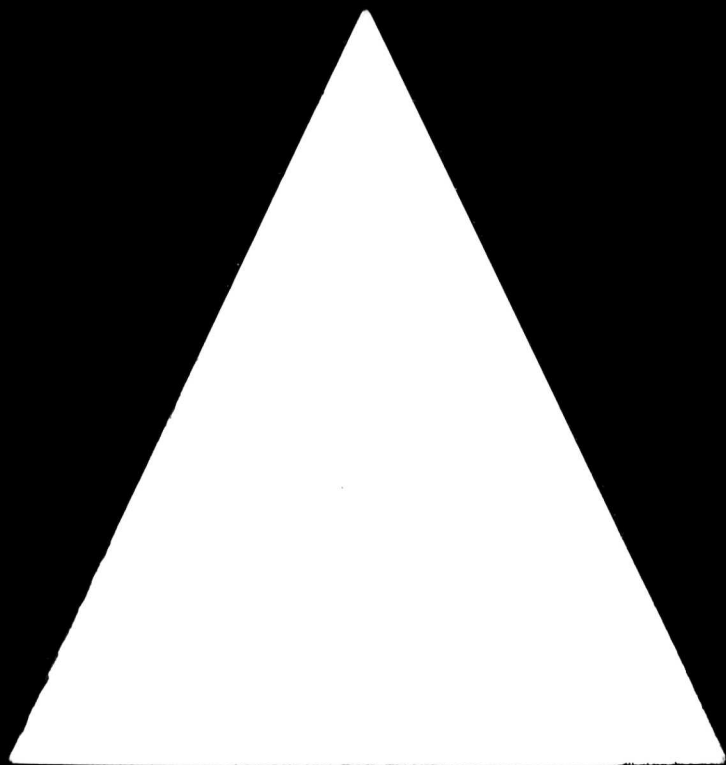
Murphy, N. C.

June 28, 1937

I, B. L. Padgett, Register of Deeds of Cherokee County, N.C. do hereby certify that the Marriage License Book shows that George W. Erwin was married in Cherokee County, on the 18th day of December, 1908, to Anna Cheek. _____ minister and _____ witnesses. The above license show that each of the parties were 27 years old. *Om 1131 73*

Given under my hand and seal of office this the 28th day of June, 1937.

B. L. Padgett
Register of Deeds.



CERTIFICATE OF ORDINARY

STATE OF GEORGIA, C O B B County.

I, Jas. J. Daniel

Ordinary of said County, do certify

that I personally know Mrs. Eliza R. Eskew

the applicant, and that she

is the lawful widow of

B. F. Eskew

who was on

the Pension Roll of said

Cobb

County, and was paid

a Pension from

Cobb

County for 188 3 , and at the time

of his death on the 2nd day of

May

188 4 , there was due to

him and unpaid his Pension of

Ninety

Dollars from the State

of Georgia, and I know T. L. Pittman, Ordinary,

the within

witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 15th

May

188 4 .

(Seal of Ordinary)

Jas. J. Daniel
Cobb County

Eskew, Eliza (Mrs.)
Cobb Co.
Cobb County

193 4 .

Application for Pension Due Deceased Soldier

(UNDER ACT 1891)

(To be paid to his Widow)

BY

Mrs.

Widow of

Date of Marriage July 27, 1894

Date of Death May 2, 188 4 .

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, and then return it with your pay-rolls for permanent filing in the Pension Department.

FILED
MAY 10 1884
VETERAN SERVICE OFFICE
A. L. PENSION, Director

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Cobb County.

I, Jas. J. Daniell, Ordinary of said County, do certify that I personally know Mrs. Eliza R. Eakew, the applicant, and that she is the lawful widow of E. F. Eakew, who was on the Pension Roll of said Cobb County, and was paid a Pension from Cobb County for 1883, and at the time of his death on the 2nd day of May, 1884, there was due to him and unpaid his Pension of Ninety Dollars from the State of Georgia, and I know T. L. Pittman, Ordinary, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 15th of May, 1884.

(Seal of Ordinary)

Jas. J. Daniell Ordinary
Cobb County

Eliza Eakew (Mrs.)
by Cobb Co.

Cobb County

1884

Application for Pension Due
Deceased Soldier

(UNIFORM ACT 1891)
(To be paid to his Widow)

BY
Eliza Eakew
Widow of E. F. Eakew
Date of Marriage July 27, 1894
Date of Death May 2, 1884

Approved and entered paid

188
E. de T. LAWRENCE,
Commissioner of Pensions.

Ordinary: Fill out above in full and send the original to the Pension Department for the purpose of being paid the money due. This return is with your pay-roll for permanent filing in the Pension Department.

FILED
MAY 16 1884
VETERAN SERVICE OFFICE
ALL HENSON, DIRECTOR

(To Be Paid to His Widow)
(UNDER ACT APPROVED OCTOBER 9, 1891)

Personally before me, the Ordinary of said County, comes Mrs. Ellen E. Nakaw
of said County, who after being duly sworn, on oath says that she is the widow of
E. F. Nakaw

Sworn to and subscribed before me this 3rd day of May, 1984
W. J. Daniels, Ordinary } *James R. Jackson* U. S.
Cobb, County } *Mark*
 (Seal of Ordinary) *Martin - Kermanli*

STATE OF GEORGIA _____ County. See attached certificate.

Personally before me comes _____, who

on oath says that he knew _____ while in life

and that he knows Mrs. _____, the

above applicant; and knows that the said _____

and _____ were in due form of law married in the County

of _____ in the State of _____ on

the _____ day of _____, 18 _____, and that they were residing

together as husband and wife at the time of his death on the _____ day of

_____, 19 _____, and that she is his dependent widow.

INSTRUCTIONS:

1st. Proof of marriage must be made.
2nd. The fee for the accompanying form of returning certificate is common years throughout the State, payable only for females.
3rd. The fee for the accompanying form of returning certificate is common years throughout the State, payable only for females.
4th. The fee for the accompanying form of returning certificate is common years throughout the State, payable only for females.
5th. The fee for the accompanying form of returning certificate is common years throughout the State, payable only for females.
6th. The fee for the accompanying form of returning certificate is common years throughout the State, payable only for females.
7th. The fee for the accompanying form of returning certificate is common years throughout the State, payable only for females.
8th. The fee for the accompanying form of returning certificate is common years throughout the State, payable only for females.
9th. The fee for the accompanying form of returning certificate is common years throughout the State, payable only for females.
10th. The fee for the accompanying form of returning certificate is common years throughout the State, payable only for females.

A. L. HENSON
DIRECTOR

C. ARTHUR CHEATHAM
ASST. DIRECTOR

MISS LILLIAN HENDERSON
ASST. DIRECTOR



THE VETERANS SERVICE OFFICE

STATE CAPITOL

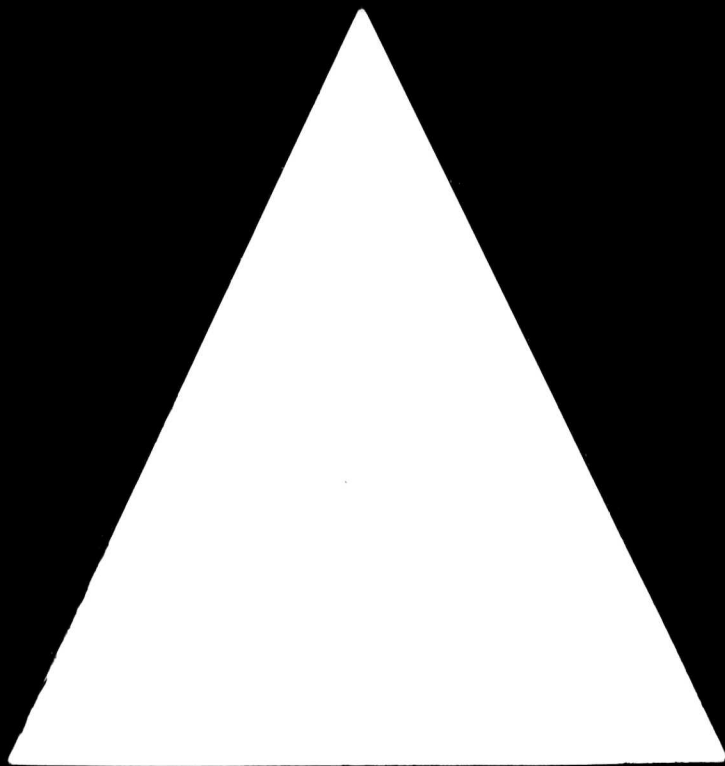
ATLANTA

IN RE: Application of Mrs. Eliza Eskew,
widow of B. F. Eskew, for
pension balances accrued and unpaid
to husband, for years 1930, 1933 and
1934; Cobb County, Georgia;

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 since remarried, and that pension payments accrued to husband and unpaid at the time of his death: \$127. for the year 1930; \$120. for the year 1933, and remaining installments for the year 1934, are due this applicant under the Act of 1891, this application is approved, and it is ordered that said payments be made to her, by the Ordinary of Cobb County, Georgia, as and when they may become payable..

This the 17th day of May, 1934.

A. L. Henson
Director.



Atlanta, Sept. 1, 1937.
405 State Capitol.


(COPY)

War Department,
Washington, Apr. 21, 1917

There are no rolls on file for Co. C, 19th Regiment Ga. Inf., U. S. A., No record found of capture or parole of H. F. Eskew.

(Signed) H. P. McCain
The Adjutant General

B. F. Eskew drew pension
in Douglas County, 1907.

Esken, Eliza
Cobb Co.  1955

Widow's Application

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

County Cole

Name *Mrs. Eliza Eskew.*

Date of Marriage July 27 1894

Date of Husband's Death May 2 1934

Company C. A. ...

Regiment 19th Ga.

Approved Aug-17-1938 193.

L. Th. Green

Director.

STATE OF GEORGIA,

Com

COUNTY

Ordinary's Certificate

1. Case 1: Conjecture

that I know . . . 28. 2112A 1-905W

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

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

193
July
Day of
38
A. C. Daniel
Ordinary
of
Cobb
County

940

County:

INSTRUCTIONS

- [illegible]

AUG 13 1936

Atlanta, Sept. 1, 1937.
403 State Capitol.

(COPY)

War Department,
Washington, Apr. 21, 1937

There are no rolls on file for
Co. C, 13th Regiment Ga. Inf.
C. S. A., No record found of
capture or parole of E. F. E.
Eskew.

(Signed) H. F. McClellan
The Adjutant General

E. F. Eskew Army Pension
in Washington County, 1907

Application in
Washington County
in place of
Eskew after War
1907

Widow's Application

Under Act of 1910 - As Amended by Act of
1917 and Constitutional Amendments
of 1920 and 1937.

County Cobb

Name Mrs. Eliza Eskew

Widow of E. F. Eskew

Date of Marriage July 27, 1894

Date of Husband's Death May 2, 1934

Company C

Regiment 19th Ga.

Approved Sept. 12, 1937

L. T. Daniel
Director

AUG 13 1937

Ordinary's Certificate

STATE OF GEORGIA.

Cobb COUNTY.

Jas. J. Daniell

I, Jas. J. Daniell, Ordinary of said County, do certify
that I know Mrs. Eliza Eskew, 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 J. E. Varler,
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) Jas. J. Daniell Ordinary.
of Cobb County.

INSTRUCTIONS:

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the whole truth. No help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1920, are entitled.
4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
5. Attach certified copy of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Fill out the back of the application carefully.
7. Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.
8. Do not take an application from any widow who is already receiving a pension.

APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,

Cobb

COUNTY.

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

SECTION I.

1. What is your name, and where do you reside? (Give Post Office and County)
Mrs. Eliza Eskew, R. F. D. 2, Cudell, Cobb Co. Ga.
2. How long and since when have you been, continuously, a bona fide resident citizen of the State
of Georgia? All life
- Give date, or year, of your birth. Mar. 23, 1863 Age? 74
3. (1) When, (2) where and (3) to whom were you married?

- a. Have you married since the death of first and soldier husband? No
 - b. When and where did your first husband die? May 2, 1934. Powder Springs, Cobb Co. Ga.
 - c. Were you residing together when he died? Yes
 - d. If not, how long had you resided apart? Yes
 - 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? R. F. Eskew deceased
husband was killed while serving in the Confederate Army for
services to the United States during the War of 1861-65. I draw for
pay for the same.
- SECTION II.
Answer the following questions if your husband was not a pensioner: because of 1904.
1. When, where and in what Company and Regiment did your husband enlist as a soldier in
Confederate Army or Georgia Militia. (Give name of Colonel and Captain.) State whether Infantry,
Cavalry, Artillery, Reserves, State Guards, State Militia or State Troops.
 2. When and where did the Commands of your husband surrender or discharge from the Service?
 3. Was your husband personally present with his Command when it was surrendered or discharged?
 4. If he was not present, state specifically and clearly where he was?
 5. When did he leave the Command?
 - a. For what cause did he leave?
 - b. By whose authority did he leave?
 - c. For how long was his leave of absence granted? d. In what way?
 6. What was his physical condition when he left his Command?
 7. What effort did he make to return to his Command?
 8. In what way was he prevented from going back to his Command?
 9. Was he captured by the enemy at any time?
 10. If so, when and where? In what prison was he held and when was he released?

Sworn to and subscribed before me, this
24 day of July, 1937.
Jas. J. Daniell Ordinary.
of Cobb County.
(SEAL OF ORDINARY)

her
E
Mrs. Eliza Eskew
mark Applicant.
Witness Mrs. R. C. Conner

An Affidavit

(Read carefully before making this affidavit.)

State of Georgia,

County of Cobb

Before me, the Ordinary of said County, comes Mrs. Eliza Eskew, 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.

J. E. Marler of said State and County is hereby presented as a witness in support of the application of Mrs. Eliza Eskew 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 the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? (Give Post Office and County) J. E. Marler, Marietta, Cobb Co. Ga. (104 W. Dixie Ave.)
2. How long and since when have you known Mrs. Eliza Eskew applicant Eighteen or twenty years
3. Where does she now reside, and since when has she been, continuously, bona fide, resident citizen of this State? Bowman St., Marietta, Ga. All time since
4. When and to whom was she married? P. T. Eskew How do you know Witness knows as man
5. How long and since when did you know P. T. Eskew husband? About fifteen years prior to his death
6. When and where did P. T. Eskew the husband of applicant, die? At Powder Springs, Cobb Co. Ga. May 2, 1934
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 he 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

24th day of July, 193 7

..... Ordinary

of Cobb County.

(SEAL OF ORDINARY)

J. E. Marler
(Witness)

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLANTA

Judge Jas. J. Daniell,
Ordinary, Cobb County,
Marietta, Georgia.

WHEREAS:

MRS. ELIZA ESKEW, WIDOW OF B. F. ESKEW,

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 September, 1938, and thereafter; and that a copy of this order be sent to the Ordinary of said County.

This, the 17th day of September, 1938.

L. M. Pittman

Director, Confederate Division
State Department of Public
Welfare

J. L. Pittman
Ordinary, Douglas County,
Douglasville, Georgia

STATE OF GEORGIA :
COUNTY OF DOUGLAS :

This Certifies that Mr. B. F. Eskew and Miss Eliza Ann Roberson were united in the Holy Bonds of Matrimony by K. I. Keaton Justice of the Peace, on the 27th day of July in the year of our Lord Eighteen Hundred and Ninety four as appears of record in my Office in Marriage Record book "C" on Page 2.

This the 28th day of July, 1937.

J. L. Pittman
Ordinary, Douglas County, Georgia.

State of Georgia, Douglas County.

I, T. L. Pittman, Ordinary of said State and County, do hereby certify that the within and foregoing is a true and correct copy of Marriage license of B. F. Eskew and Eliza Ann Roberson, as the same appears of marriage record for Whites in Book "C" page 2, records in the Office of Ordinary, Douglas County, Georgia.

Witness my official signature and seal on this the 5th day of May, 1934 at Douglasville, Georgia.

J. L. Pittman
Ordinary, Douglas County, Ga.

Marriage License
or

AND

Book 19
and recorded on page
Book of Marriage Licenses
Ordinary

2027 MAR-11-1934

Marriage License
or

AND

Issued

19

and recorded on page

Book of Marriage License

Ordinary

No. 490



State of Georgia Douglas County

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

B. F. Eskew---

You are hereby authorized to join
and Eliza Ann Roberson-----

*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 27 *day of*
July--1894. ~~xxx~~ H. T. Cooper

STATE OF GEORGIA

CERTIFICATE

DOUGLAS COUNTY

LICENSE OBTAINED UNDER OATH BY

I Certify that B. F. Eskew *and* Eliza Ann Roberson---
were joined in Matrimony by me this 27-- *day of* July, Eighteen. ~~xxxxxx~~ *Hundred*
and Ninety-four.

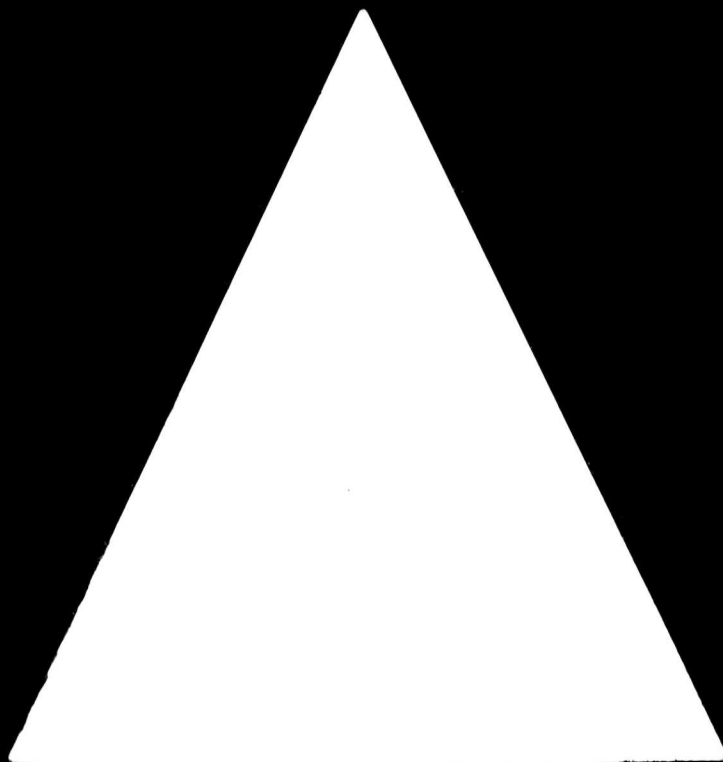
Recorded -----

K. I. Keaton

Ordinary

(L.S.)
Ordinary.

PARTY PERFORMING CEREMONY MUST RETURN TO ORDINARY WITHIN 30 DAYS TO BE RECORDED



~~Eubank, Francis M.~~

Eubank, Francis M.
Cobb Co.

No. 79

APPLICATION FOR

ARM

FOR CONFISCATE SOLDIER

Applicant Francis M. Eubank

County Cobb

Limbs Am arm, alt arm

Amount \$6.00

Date of Warrant Oct 30th 1878

Page

C. H. 14th Regt Ga.
M

61952

AN ACT

To carry into effect the last clause of Paragraph 1, Section 1, Article 7 of the Constitution of 1877

SECTION 1. Be it enacted by the General Assembly of the State of Georgia, That any person now a bona fide resident of this State, who enlisted in the military service of the Confederate States, or of this State, who, while engaged in said military service, lost a limb or limbs, may furnish to the Governor of this State proof that such applicant has supplied himself with such needful artificial limb or limbs, and the Governor, on reception of such proof, is hereby authorized to draw his warrant on the Treasurer of this State in favor of such applicant for either amount hereinafter mentioned, to wit: For a leg extending above the knee, one hundred dollars, for a leg not extending above the knee, seventy five dollars, for an arm extending above the elbow, sixty dollars, for an arm not extending above the elbow, forty dollars. Provided the said amounts of money may be allowed to any one entitled to the benefits of this Act who may prefer to supply himself with the said artificial limb

SEC. 2. Be it further enacted by the said authority, That such application shall contain proof of such applicants being entitled to the benefits of this act, and shall further state whether arm or leg has been supplied. If an arm, whether extending above the elbow or not, if a leg, whether extending above the knee or not, and the Governor shall decide the sufficiency of the proof submitted

SEC. 3. Be it further enacted by the said authority, That no applicant shall receive the sum allowed under this act oftener than once in five years

SEC. 4. Be it further enacted by the authority aforesaid, That all laws and parts of laws in conflict with this Act be and the same are hereby repealed

HENRY R. GOETCHES,
Secretary House Representatives
Wm. A. HARRIS,
Secretary Senate
Approved, September 10th, 1879

A. O. BAYOR,
Speaker House Representatives
RUFUS E. LISTER,
President Senate
ALFRED H. COLQUITT, Governor

STATE OF GEORGIA,

Collier County.

Personally came.....

.....
who, being duly sworn, depose and say they are acquainted with.....*Wm. C. Collier*
.....and know that he lost ~~an~~ *arm*.....in the military service during the late war;
that said ~~arm~~ *arm*.....was amputated ~~above the elbow~~ *above the elbow*; that he is a bona fide
citizen of this State, and we are well satisfied that the facts stated by him in the above affidavit are true.
Sworn to and subscribed before me this *9th* }
.....day of.....18..... }

STATE OF GEORGIA,

Speltz County.

1. *Wm. C. Collier*..... Ordinary of *Collier*
~~to~~ certify that I am well acquainted with.....*Wm. C. Collier*
the applicant for a ~~leg~~ *leg*....., and am well satisfied that the facts stated by him in the foregoing
affidavit are true, ~~and that I am well acquainted with~~.....
.....
~~the citizens who make their affidavit, that they are respectable citizens of this county, and that the facts~~
~~stated by them are true~~

Given under my hand and official seal, this *9th*
day of.....*Oct*.....1879.

Alfred H. Colquitt

Colby County.

Personally appeared before me David M. Eubanks of
the county of Colo Colo, State of Georgia, who, being duly sworn, deposes
and says that he was on the 30th day of September, 1870, a bona fide resident of this State; that he
enlisted in the military service of the Confederate States, or of this State, as a private
in Company B 18 18 Regiment of Georgia Volunteers
that while engaged in such military service, to-wit: at the battle or engagement of Mechanicsville
in the State of Virginia on the 27 day of
June 1862 he was wounded in the left arm, and
that the same was amputated above the elbow
so that he has not received the payment allowed him for such limb under an Act entitled an Act to carry into
effect the last clause of Paragraph 1, Section 1, Article 7 of the Constitution of 1877, approved September
20th, 1879; that he has not supplied himself with an artificial arm and not having
done so, he prefers to supply himself with an artificial arm
Sworn to and subscribed before me this 29 day of October 1878 D. M. Eubanks

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

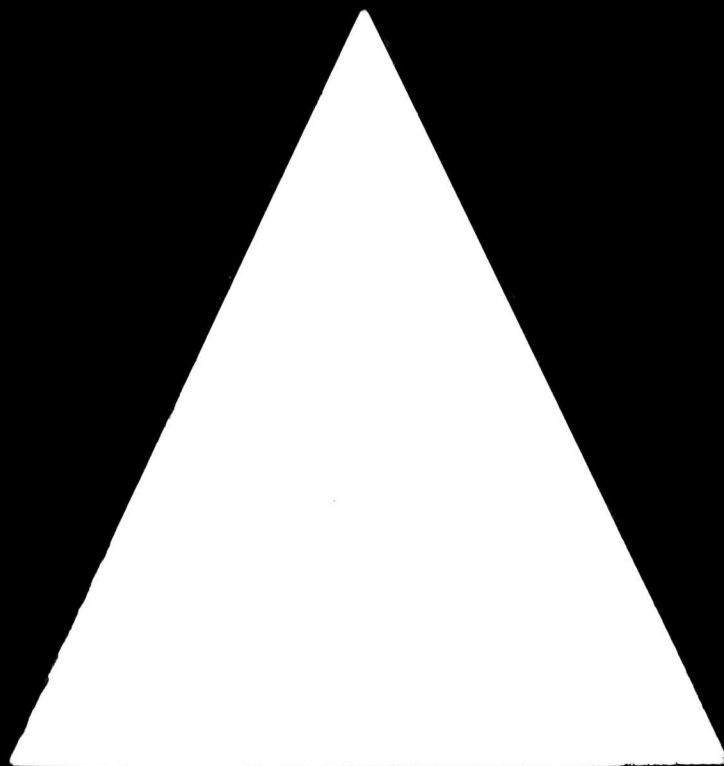
COMMISSIONED OFFICER'S AFFIDAVIT

STATE OF GEORGIA.

County

Personally came before me, Wm. H. Kelly of
the county of Ita, State of Georgia, being duly sworn, deposes
and says that he was Captain in Company B, 19th Regiment
and that Wm. E. Embanks, the above deponent, was a Private
in said company and that this deponent knows that said Wm. E. Embanks
lost arm in the military service as said in the above affidavit.

Sworn to and subscribed before me this.....
 30th.....day of.....Oct.....1879
 J. H. [Signature]
 Notary Public for the State of New York
 Note.—If the affidavit of the commissioned officer is not obtainable, the following affidavit of three responsible citizens
 must be furnished.



POWER OF ATTORNEY.

STATE OF GEORGIA,

Dade County, }

I, *Wm. E. Eubanks*, hereby authorize *John M. McArthur* to receive and receipt for the pension allowed and request that he remit same to *me*.

Witness my hand and seal this *7* day of *July*, 1897.

Wm. E. Eubanks
Wm. E. Eubanks

OK
Eubanks, W. E.

No. *7120*
Cadd County

INDIGENT PENSION
1897.

Name, *W. E. Eubanks*
County, *Dade*

Approved *7/1* 1897.

WARRANT HANDED TO

J. M. Stone

Wm. V. HARRIS, DEPT. PRINTER, ATLANTA.

1/16/97

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, John H. Eubanks hereby authorize

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

at 7 day of July 1897.

Executed in presence of

J. M. Fleming

John H. Eubanks

Questions for Applicant.

STATE OF GEORGIA,

County.

Mr. H. J. Eubanks of said State and County, desiring to avail himself of the Pension Act approved December 10th, 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) H. J. Eubanks
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? About 6 miles west of Marietta in Cobb Co. Ga.
3. When and where were you born? September 24, 1834, Marietta, Ga.
4. When and where and in what company and regiment did you enlist or serve? Enlisted with state troops in 1861 - served 24 months. Then May 1862 transferred in Co. D Phillips' Legion
5. How long did you remain in such company and regiment? until close of war - in 1865
6. For how long a period did you discharge regular military duty? four years and 9 months
7. When, where and under what circumstances were you discharged from service? April 1865 at Kingston Ga. when Lee's army surrendered
8. What is your present occupation? Doing such little work as I am able
9. How much can you earn (gross) per annum by your own exertions or labor? about twenty five dollars
10. What has been your occupation since 1865? farming
11. Upon which of the following grounds do you base your application for pension, viz.: first "age and poverty," second "infirmary and poverty" or third "blindness and poverty"? 1st & 2nd
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 not been able to earn my support for more than two years. I have suffered with rheumatism or partial paralysis. I am sure that I can hardly walk. It is with great difficulty for me to get about. I can hardly walk. It is with great difficulty for me to get about.
13. What property, effects or income do you possess and its gross value? Nothing
14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any, did you make of same? In 1894 & 1895 I possessed 30 acres of land & sold made \$1000.00. I have since used all said money to pay for taking care of me.
15. In what County did you reside during those years and what property did you then receive for taxation? In Cobb County & returned above mentioned property
16. How were you supported during the years 1895 and 1896? By my daughter & home & little by some help from others
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? About seventy five to eighty five dollars
18. What was your employment during 1895 and 1896? What pay did you receive in each year? Doing a number of little jobs
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? No. I have a daughter & a son. They are both married & have children. They are not able to help me. I have no property.
20. Are you receiving any pension, if so what amount and for what disability? None

Every Question MUST be Answered.

Sworn to and subscribed before me this the

7 day of July 1897.

J. M. Fleming Ordinary.

of Cobb County.

Applicant.

H. J. Eubanks

INDIGENT PENSION

1897.

Name

H. J. Eubanks

County

Cobb

Approved

7/1

1897.

WARRANT HANDLED TO

J. M. Fleming

By J. M. Fleming Ordinary.

11/16/97

OK
Eubanks, H. J.

Cobb County

QUESTIONS FOR WITNESS.

STATE OF GEORGIA.

Cobb County.

County.

W. J. Eubanks and M. L. Green, of said State and County, having been presented as a witness in support of the application of W. J. Eubanks 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? W. J. Eubanks in Marilla Cobb Co. Ga.
2. Are you acquainted with W. J. Eubanks, the applicant, is of how long have you known him?

3. Where does he reside, and how long has he been a resident of this State? Cobb Co. Ga.

4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? Yes. I served with him in Phillips Legion about three years.

5. When, where and in what company and regiment did he enlist?

In Phillips Legion Co. B. in May 1862

6. Were you a member of the same company and regiment? Yes

7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? More than three years as a faithful and good soldier

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

None. He has no money. I know that he has had some money for a number of years but he has lost it all. He has no property, effects or 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 had a small tract of land and a little money. He sold all of it. He has no property, effects or income.

10. What is the applicant's occupation and physical condition? No regular occupation. His physical condition is very feeble from age and other disabilities. He is unable to walk.

11. Is the applicant unable to support himself by labor of any sort, if so, why? Yes, because of his age, infirmities he is not able to do any manual labor that requires physical strength or exertion.

12. How was he supported during the years 1895 and 1896? By his children.

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

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? On account of his age and disease he is unable to work. He has no manual labor that requires physical strength or exertion. He has no property, effects or income.

15. What interest have you in the recovery of a pension by this applicant? No one.

Sworn to and subscribed before me, this

day of January 1897.

Witness. M. L. Green

W. J. Eubanks Ordinary.

W. J. Eubanks Ordinary.

W. J. Eubanks Ordinary.

W. J. Eubanks Ordinary.

W. J. Eubanks Ordinary.

W. J. Eubanks Ordinary.

W. J. Eubanks Ordinary.

W. J. Eubanks Ordinary.

W. J. Eubanks Ordinary.

W. J. Eubanks Ordinary.

W. J. Eubanks Ordinary.

W. J. Eubanks Ordinary.

W. J. Eubanks Ordinary.

W. J. Eubanks Ordinary.

W. J. Eubanks Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Cobb County.

County.

Personally came before me, W. J. Eubanks and

W. J. Eubanks, both known to me as reputable physicians

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

W. J. Eubanks, applicant for pension under the Act of 1894, and after

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

He suffers from chronic rheumatism and also from the effects of an attack of partial paralysis some years ago. His joints will be so affected from disease and change that he is unable to do much labor.

We further say on oath that the physical condition of applicant renders him unable to labor at any

work or calling sufficient to earn a support for himself, and that we have no interest in said pension being

allowed.

Sworn to and subscribed before me, this

day of January 1897.

W. J. Eubanks Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cobb County.

County.

I, W. J. Eubanks Ordinary in and for said County, hereby certify that

the applicant W. J. Eubanks resides in said County, and was a bona

fide resident of this State on the first day of January, 1894, and that the witnesses, viz W. J. Eubanks

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 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, Nothing 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 15th day of January 1897.

W. J. Eubanks 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 answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God." Additional affidavits may be attached if blank spaces are insufficient.

POWER OF ATTORNEY.

State of Georgia.

Cobb County.

I *N. G. Eubanks*

hereby authorize

of

J. M. Stone
Marionetta

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

me

by

Stone

at

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

day of *Nov* 1898.

N. G. Eubanks [L. S.]

Executed in presence of

G. M. Fleming

(For Those Already Enrolled.)

NO. *2161*

INDIGENT

SOLDIER'S PENSION,

1898.

Name *N. G. Eubanks*

County *Cobb*

WARRANT ISSUED

12/27

1898.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT MADE TO

Stone

W. HARRISON, STATE PRINTER, ATLANTA

moda

Eubanks, W. G.
Cobb Co.

CODE SEC. 1284.

(For Those Already Enrolled.)

No. *1138*

INDIGENT

SOLDIER'S PENSION,

1899.

Name *N. G. Eubanks*

County *Cobb*

WARRANT ISSUED

1/4

1899

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDLED TO

John Eubanks

(Geo. W. Harrison, State Printer, Atlanta)

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb County.

I.

N. G. Eubanks

hereby authorize

of

J. M. Stone

of

Marionetta

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

me

at

by

Stone

Witness my hand and seal this *14* day of *Jan* 1899.

Executed in presence of

N. G. Eubanks (L. S.)

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears *H. Eubanks* of *Cobb* County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the *1st* day of *May* 18*34*; that he is *63* years old and by occupation a *farmer*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served for the term of *4 Years* in Company *O*, of *Phillips* Regiment *Georgia* Vols.; that his physical condition is as follows:

On account of aged disease and infirmity he is unable to support himself by labor of any sort
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 189*7*

Sworn to and subscribed before me, this, the *13th* day of *May* 1898.

H. Eubanks
Ordinary.

State of Georgia,

Cobb County.

I, *J. M. Stone* Ordinary of said County, do certify that I am well acquainted with *H. Eubanks* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 *May* 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 *H. Eubanks* 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 *30th* day of *May* 18*34*; that he is *64* years old and by occupation a *farmer*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served for the term of *4 Years* in Company *O*, of *Phillips* Regiment *Georgia* Vols.; that his physical condition is as follows:

Discharge, Infirmity and poverty
that his property consists of the following items

Nothing

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1899. I have heretofore as a resident of *Cobb* county been allowed a pension for the year 189*8*

Sworn to and subscribed before me, this, the *4th* day of *May* 1899.

H. Eubanks
Ordinary.

State of Georgia,

Cobb County.

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

Given under my official signature and seal, this *4th* day of *January* 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, *Wm. E. Eubanks* hereby authorize
John W. Lindsey of *Meriwether Co.*
to receive and receipt for the pension allowed, and request that he remit same to
by *him*

Witness my hand and seal, this *15* day of *Jan.* 1900.
W. E. Eubanks [L. S.]

Executed in presence of

T. J. Haubty

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb 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 _____ 1901.
W. E. Eubanks [L. S.]

Executed in presence of

John W. Lindsey

CODE SEC. 1254.

(For Those Already Enrolled.)

NO. *797*

INDIGENT

SOLDIER'S PENSION,

1900.

Name *W. E. Eubanks*
County *Cobb*

WARRANT ISSUED

January 18 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

John W. Lindsey

John W. Lindsey, State Printer, Atlanta.

No data

VOID SECTION 124
(For Those Already Enrolled.)

No. *24*

INDIGENT

SOLDIER'S PENSION.

1901.

Name *W. E. Eubanks*
County *Cobb*

WARRANT ISSUED

Jan 15 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

John W. Lindsey

John W. Lindsey, State Printer, Atlanta.

No data

Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears W. J. Eubanks 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 30th day of May 1834; that he is 65 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 3 1/2 years in Company D, of Phillips Legion Ka, Vol.; 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. W. J. Eubanks Ordinary.

State of Georgia,

Cobb County.

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



J. M. Stone Ordinary Cobb County.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears W. J. Eubanks 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 30th day of May 1834; that he is 65 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 3 1/2 years in Company D, of Phillips Legion Ka, Vol.; that his physical condition is as follows: Disease, infirmity and poverty

that his property consists of the following items:

Nothing

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

Deponent desires to participate in the benefits of the Act, approved December 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 15th day of January 1901. W. J. Eubanks Ordinary.

STATE OF GEORGIA,

Cobb County.

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



John Artry Ordinary Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County. }
I, *W. J. Eubanks* 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 *4th* day of *Jan* 1902.
W. J. Eubanks [L. S.]

Executed in presence of

J. M. Gause

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County. }
I, *W. J. Eubanks* 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 *5th* day of *Jan* 1903.
W. J. Eubanks [L. S.]
Mark

Executed in presence of

(FOR THOSE ALREADY ENROLLED.)

No. *499*

INDIGENT

SOLDIER'S PENSION

1902.

Name *W. J. Eubanks*

County *Cobb*

Co. *O* Regiment

Phillips Legion

WARRANT ISSUED

46 1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

Ordg

(See W. Harrison, State Printer, Atlanta.)

no data

(FOR THOSE ALREADY ENROLLED.)

No. *458*

INDIGENT

SOLDIER'S PENSION

1903.

Name *W. J. Eubanks*

County *Cobb*

Co. *D Phillips Legion*

WARRANT ISSUED

123 1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

Ordg

(See W. Harrison, State Printer, Atlanta.)

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears

M. J. Eubanks

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 30th day of May 1884; that he is 67 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the

States, and served for the term of 4 yrs in Company D, of Philadelpia of Pa. Vols; that his physical condition is as follows: On account of 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 1st day of Jan 1902.

M. J. Eubanks

Ordinary.

STATE OF GEORGIA,

Cobb County.

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

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

John A. Harty

Ordinary.

Cobb 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,

Cobb County.

Personally appears

M. J. Eubanks

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 30th day of May 1884; that he is 68 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the

States, and served for the term of 3 1/2 yrs in Company D, of Philadelpia of Pa. Vols; that his physical condition is as follows: On acct of 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 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 5th day of Jan 1903.

M. J. Eubanks

Ordinary.

STATE OF GEORGIA,

Cobb County.

I, John A. Harty Ordinary of said County, do certify that I am well acquainted with M. J. Eubanks the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 Jan 1903.

John A. Harty

Ordinary.

Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA.

Colt }
COUNTY.

I, *Wm. E. Embanks* hereby authorize
John W. 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 *5th* day of *July* 1904.

Wm. E. Embanks
Mark

Executed in presence of

[L. S.]

COLE SECTION 152A.
(FOR THOSE ALREADY ENROLLED.)

No. *648*
INDIGENT

SOLDIER'S PENSION
1904.

Name *Wm. E. Embanks*
County *Colt*
Co. *4th Infantry*

WARRANT ISSUED

11-15 1904.

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDLED TO

1904.
Geo. W. Harrison, State Printer, Atlanta.

no date

Embanks W. E.
Colt Co.

COLE SECTION 152A.
(FOR THOSE ALREADY ENROLLED.)

No. *708*

INDIGENT
SOLDIER'S PENSION
1905.

Name *Wm. E. Embanks*
County *Colt*
Co. *4th Infantry*

WARRANT ISSUED

11-15 1905.

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDLED TO

Geo. W. Harrison, State Printer, Atlanta.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,

Colt }
COUNTY.

I, *Wm. E. Embanks* hereby authorize
John W. 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 *11th* day of *July* 1905.

Wm. E. Embanks
Mark

Executed in the presence of

J. McGinn

[L. S.]

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Wbh County.

Personally appears

W. E. Carver of *Wbh*

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 *30* day of *July* 18*84*; that he is *69* years old and by occupation a *farmer*, that he enlisted in the military service of the Confederate States for of the State of

during the war between the

States, and served for the term of *3 1/2* years in Company *D*, of *10th* Regiment

that his physical condition is as follows:

chronic inflammation of the lungs, and is unable to support himself

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this the

5th day of *July* 1904.

W. E. Carver
Ordinary.

STATE OF GEORGIA,

Wbh County.

I, *John A. Smith*

Ordinary of said County,

do certify that I am well acquainted with *W. E. Carver* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 *May* 1904.

John A. Smith
Ordinary *Wbh* County.

Note.—The blank spaces must be filled.

Note.—Affidavits should not be attested before January 1st, 1905.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Wbh County.

Personally appears

W. E. Carver of *Wbh*

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 *30* day of *May* 18*84*; that he is *70* years old and by occupation a *farmer*, that he enlisted in the military service of the Confederate States for of the State of

during the war between the

States, and served for the term of *3 1/2* years in Company *D*, of *10th* Regiment

of *Wbh*; that his physical condition is as follows:

chronic inflammation of the lungs, and is unable to support himself

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 1905. I have heretofore as a resident of *Wbh* County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the

5th day of *July* 1905.

W. E. Carver
Ordinary.

STATE OF GEORGIA,

Wbh County.

I,

John A. Smith Ordinary of said County,

do certify that I am well acquainted with *W. E. Carver* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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.

John A. Smith
Ordinary *Wbh* County.

Note.—The blank spaces must be filled.

Note.—Affidavits should not be attested before January 1st, 1906.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY }
I, M. J. Enbanks 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 15 day of May 1906.

Executed in the presence of

M. J. Enbanks [L. S.]
Miner

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY }
I, M. J. Enbanks hereby authorize
John Lindsey of Marietta Ga.
to receive and receipt for the pension allowed, and request that he remit same to
me at his office
by _____

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

Executed in presence of

M. J. Enbanks [L. S.]
Miner

Cons. Section 1234.

(FOR THOSE ALREADY ENROLLED.)

No. 003

INDIGENT
SOLDIER'S PENSION
1906.

Name M. J. Enbanks

County Cobb

Co. O. P. Enbanks

WARRANT ISSUED

15 1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Gray

The Pensioner's Office and Public Co. 1015 N. Washington, Wash.

no data

Enbanks, M. J.

Cobb Co.

Cons. Section 1234.

(FOR THOSE ALREADY ENROLLED.)

No. 555

INDIGENT
SOLDIER'S PENSION
1907.

Name M. J. Enbanks

County Cobb

Co. O. P. Enbanks

Regiment Phillips Legion

WARRANT ISSUED

JAN 21 1907.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

The Pensioner's Office and Public Co. 1015 N. Washington, Wash.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Cobb County.

Personally appears: W. J. Eubanks 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 A, of 1st Georgia of Co. C; that his physical condition is as follows: Infirm, & poor

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 _____ 1906.

Ordinary.

State of Georgia,

Cobb County.

I, W. J. Eubanks 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 _____ 1906.

Ordinary Cobb County.



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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Cobb County.

Personally appears W. J. Eubanks 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 74 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 A, of 1st Georgia of Co. C; that his physical condition is as follows: Age & poverty

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 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, John D. Harty Ordinary of said County,

do certify that I am well acquainted with W. J. Eubanks the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 Cobb County.

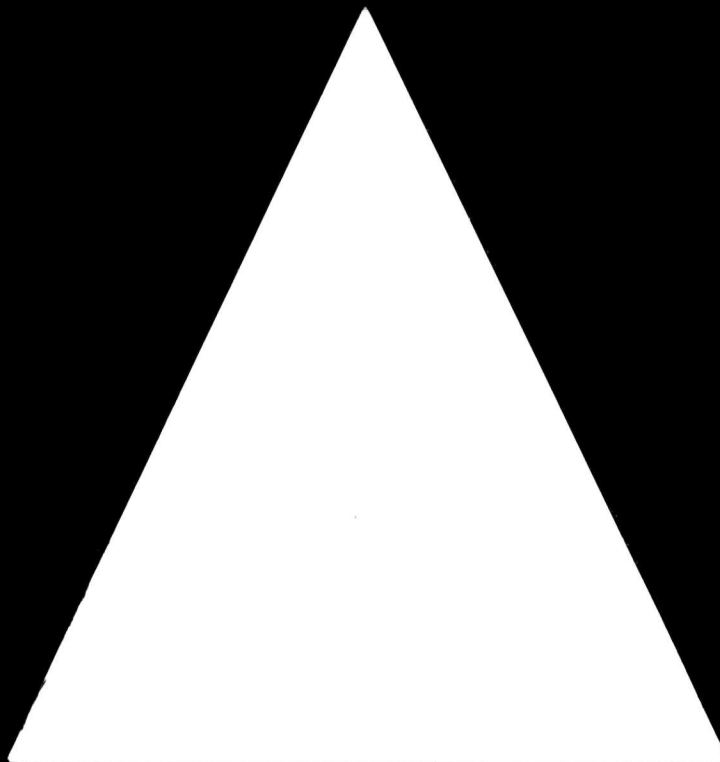


Note.—The blank spaces must be filled.
Note.—Aidavit should not be attested before January 1st, 1907.

eral
here

Ordinary of San County.
Norm.—The blank spaces must be filled.
Norm.—Affidavit should not be attested before January 1st, 1900.

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



STATE OF GEORGIA

County

hereby authorize

of _____ County, to receive and receipt for the pension allowed and that he remit the same to me at _____ by his check or registered mail.

When any hard _____ day of _____

190

Executed in presence of

Ordinary

County.

L. B.

SEAL.

SAID'S testimony that there are serious stated in applications that applicants are in this. It must be said, my word and very little reliance is put on what cited in another stated.

J. B. Robinson, Gen. of Post.

**WIDOW'S
INDIGENT PENSION
1904.**

Name Mary Jane Evans

County Cobb

Widow of Eliza Evans
Oct. 4th 2a 1876

Approved _____ 1904

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

1804

Geo. W. Harrison, State Printer, Atlanta.

9/5/86
11/20-04

POWER OF ATTORNEY.

STATE OF GEORGIA,

County,

I, _____ hereby authorize

of _____ County, to receive and receipt for the pension allowed and that he

remit the same to me at _____ by his check or registered mail.

Witness my hand this _____ day of _____ 190

Executed in presence of

Ordinary,

L. B.

County,

REAL

Pension office 9/18/04.

submit testimony and prove the service stated in application that submitted does not do this. It must be done, how long had they lived apart when husband died in another state.

J. W. Lindsay, Com. of Pems.

WIDOW'S

INDIGENT PENSION

1904.

Name Mary Jane Evans

County Cobb

Witness of the State of Georgia

Appointed 1904

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

1904

John W. Lindsay, Commissioner of Pensions.

9/18/04
11/20-04

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

County,

Cobb County, Miss Mary Jane Evans of said State and County, desiring to avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly, passed 1890, hereby submits her proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (Give State, County and Post Office)
Mary Jane Evans - Under Spring - Cobb County Ga

2. How long and since when have you been a resident of this State? Eighty eight years since 1848

3. When and where were you born? July 31st 1817 Union Plant S. C.

4. When and where was your husband born - state his full name, and when were you and he married? (Attach copy marriage license in every case.) He died in 1855. Maria was 1858 in Standing Co. - Cobb County

5. When and where and in what Company and Regiment did your husband enlist or serve during the war between the States? At Warfield Building Co. - October 1862 Co. 1

6. How long did your husband serve in said Company and Regiment? Six months & was transferred to Co. 1 S. C. & served under General Sherman in 1865

7. When and where did your husband's Company and Regiment surrender and was discharged?

8. Was your husband present at the time and place when his Company and Regiment surrendered?

9. If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause, and by what authority?

10. When and where did your husband die? He died in June 1865 in Richland Co. - He had been dead since he was a young man.

11. Which of the following grounds do you base your application for Pension, viz.: First - Age and Poverty - Second - Infirmary and Poverty - Third - Blindness and Poverty? Age and Poverty - Infirmary and Poverty

12. If you the first ground, state how long you have been in such a condition that you cannot earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind, and when and where you lost your sight? My own infirmity and my husband's made it very hard for me to support myself. My blindness came on me when I was a girl - with the smallpox.

13. What has been your occupation since your husband's death? Nothing but house work - I have not been able from infirmity and blindness to do any work - I am an object of charity.

14. How much can you earn gross, by your own exertion or labor? Nothing - I cannot do any work.

15. What property, real or personal, or income do you have or possess, and its gross value? None.

16. What property, real or personal, did you possess at death of husband or he left you, and of the years 1899, 1900, 1901, 1902, 1903, 1904, and what disposition, if any, by sale or gift, have you made of the same? None.

17. In what counties did you reside in 1899, 1900, 1901, 1902, 1903 and 1904, and what property did you return for taxation? In Cobb County.

18. How have you been supported since death of husband, and especially for 1899, 1900, 1901, 1902, 1903 and 1904? By Charity.

19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income? I do not know.

20. What was your employment during 1899, 1900, 1901, 1902 and 1903 - how much did you receive for each year? I have not been able to work for many years including the above - I have not been able to work for many years including the above - I have not been able to work for many years including the above.

21. Have you a family? If so, who supports such family? Give their means of support? Have they any lands or other property? None - except myself.

22. Have you ever made application for pension before? Yes.

23. How many applications have you made for a pension, and under what class? None.

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

John W. Lindsay Ordinary

of Cobb County.

Applicant's Name: Mary Jane Evans

Georgia
Cobb County.

Personally appeared before me the undersigned, Mr. W. D. Smith, who being duly sworn says, that he made out the application of Mrs Mary Jane Evans for Pension and at the same time made like application for several others, that her answer to Question 5 in said petition was erroneously written "October 1862, Co D 61st Ga Regiment" whereas in point of fact she states, Co 'B' 4th En State Troops, and afterwards served in 56th Ga Regiment.

Deponent states that the error occurred from the fact that he deponent made out several applications at the same time and, in haste confused the fact with the facts appertaining to another application.

Sworn to & subscribed before me this 18th 1906.

John A. Brown
Ordinary

Mr. W. D. Smith.

I certify that Mr. W. D. Smith - deponent in the foregoing affidavit is of good character and his statements are worthy of full faith and credit.
Nov 19th 1906.

John A. Brown
Ordinary

R. E. Croker,
Ordinary Paulding County.

Dallas, Ga.

1906

Georgia Paulding County.
license to John Philip Evans & Mary J. Harris in the Holy Bonds of Matrimony was issued December 29th 1858 dated by the return of Thomas Moody, J. P. they were duly executed December 30th 1858
Recorded Feby 19th 1859.
Miles Edwards. Only.

J. B. Croker. Ordinary of Paulding County hereby certify that the above is a true copy of the Marriage of Philip Evans & Mary J. Harris as appears of Record on Page 206 of the Book of Marriage Records from 1833 to 1865 in this office
Witness my hand and official seal of Office this 13th day of Aug 1906.
R. E. Croker. Only.

Georgia
Leadb County

Personally appeared
before me the undersigned,
George A. Keith who being

duly sworn says on oath that he has
known Elijah Evans and his wife Mary
Jane Evans for eight years - that they lived
together as man and wife until 1902

when said Evans wandered off and abandoned
his said wife and they have lived apart
ever since. Dependent says said Mary

Jane Evans is totally blind and is
peevish and an object of charity.

Sworn to & subscribed

before me this 19th Nov 1906

Geo. F. Keith

Ordinary

I certify that George A. Keith is of trustworthy
character and his statements are worthy of full
faith and credit.
Nov 19th 1906.

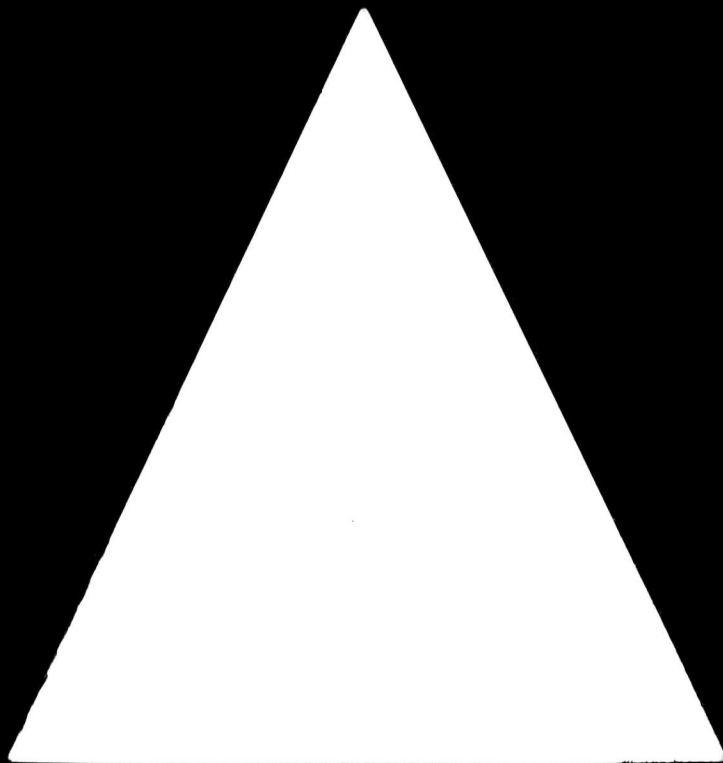
John W. Wray
Ordinary

H. E. Croker,
Ordinary Building County.

Dallas, Ga. Aug 15 - 1906

I, B. E. Croker Ordinary of Building
County here by certify that
W. A. Bagdadale is a Bonifile
Resident of this County and is of
trustworthy character and that his
statements are entitled to full faith
and credit. I do further certify
that before answering the foregoing
questions, said witness took the oath
herein prescribed.

B. E. Croker Ordinary
of said County.



Evatt, J. M.
Cobb Co.

OK Jan 1911

**Confederate
Soldier's Application.**

UNDER ACT 1910.

✓
County Cobb
Name J. M. Evatt
Company K
Regiment 59th
Approved _____

J. W. LINDSEY,
Commissioner of Soldiers

CHAR. F. BYRD, State Printer, Atlanta.

11/10/10

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

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

1. What is your name and where do you reside? (Give County and Post-office.)
J. M. East, Richmond Co. Ga.

2. How long and since when have you been a continuous resident citizen of this State?
All my life 68 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.) May 1862, Richmond Co. Ga. Co. H. 39th Reg. Inf.

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge.) Three years April 26, 1865

6. When and where was your Company and Regiment surrendered or discharged from the Service?
April 26, 1865, Richmond Co. Ga.

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

8. If you were not actually present, state specifically and clearly where you were.
I was present

a. Where was your Command when you left it? Richmond Co. Ga.

b. When did you leave the Command? April 26, 1865

c. For what cause did you leave? Paroled on Richmond, Va. was over

d. By whose authority did you leave?

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

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

g. In what way were you prevented?

h. What effort did you make to return?

i. Were you captured during the war? I was captured a Veryburg

j. If so, when, and where? In what prison were you held and when were you released?
July 1863, Veryburg but was paroled and never sent to prison

k. 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.)
I owned a house and lot in Richmond Co. Ga. valued at \$1000.00. My wife owned a lot in Richmond Co. Ga. valued at \$1000.00. My wife owned a lot in Richmond Co. Ga. valued at \$1000.00. My wife owned a lot in Richmond Co. Ga. valued at \$1000.00.

l. 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

m. What annual or monthly income or earnings of yourself and wife and the source derived have you?
Nothing except from my own labor

n. Are you drawing a pension of any amount from this State or the United States?
No

o. 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 22nd day of September, 1912.

J. M. East Ordinary,
of Richmond County.

Soldier's Application.

UNDER ACT 1910.

Confederate

County

Richmond

Name

J. M. East

Company

H

Regiment

39th

Approved

J. W. LINDSEY,

Commissioner of Pensions

CHAS. F. BIRD, STATE PRINTER, ATLANTA.

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA.

Walker County.

W. A. Weaver of said State and County is hereby presented as a witness in support of the application of J. M. Smith for the pension provided by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded, answers as follows:

1. What is your name and where do you reside? W. A. Weaver

Rock Spring, Walker County, Ga.

2. How long and since when have you known J. M. Smith the applicant?

47 years since May 1862

3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know?

Decatur, Ga. County, Ga.
He lived here with his family 1862, by taking them
from his home at Rock Spring, Ga.

4. When, where and in what Company and Regiment did J. M. Smith enlist during war from 1861 to 1865? (Give date and place).

At Jasper, Ga. Walker County, Ga.

5. How did you obtain your information of this Service?

By being present at the muster of said Co. 1st Regt.

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date).

About 9 years April 26th 1862

7. When and where was his Command surrendered or discharged (give date and place).

At Greensboro N. C. April 26th 1865

8. Were you personally present at the Surrender?

I was.

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

10. Was the applicant personally present with his Command at surrender?

He was.

11. If not where was he and how came him there?

12. When did he leave his Command? Where was his Command when he left it?

Where was his Command

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 present with the Command by General King

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?

Richmond, Va.

He was captured at Richmond, Va. and when released

at Greensboro N. C. April 26th 1865

Sworn to and subscribed before me, this 1st day of Sept. 1912

W. A. Weaver Subst.

W. A. Weaver County

to the testimony of the

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Walker County.

Personally before me some W. A. Weaver who on oath says that they are freeholders residing in said County and we know the property that is now in the use, possession and control of himself and wife and also said W. A. Weaver (Make line be long and value).

W. A. Weaver in Rock Spring in Walker County 1862

W. A. Weaver in January 20th

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov 1906? (State in full by items).

None

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

3. What was the price paid or stated to be paid?

4. What relation is the party to applicant?

5. What disposition was made of the proceeds of the sale?

6. Was the disposition of this property made in good faith and full value?

or was it made to obtain a pension?

Sworn to and subscribed before me, this 1st day of Sept. 1912

W. A. Weaver

J. M. Smith

W. A. Weaver

W. A. Weaver

W. A. Weaver

W. A. Weaver

W. A. Weaver

W. A. Weaver

W. A. Weaver

W. A. Weaver

W. A. Weaver

W. A. Weaver

W. A. Weaver

W. A. Weaver

W. A. Weaver

W. A. Weaver

W. A. Weaver

W. A. Weaver

W. A. Weaver

W. A. Weaver

W. A. Weaver

W. A. Weaver

W. A. Weaver

W. A. Weaver

W. A. Weaver

W. A. Weaver

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Walker County.

J. M. Smith Ordinary of said County, certify that I know

the applicant J. M. Smith for Pension is the person he represents himself to be and resides in

said County. That I also know W. A. Weaver the witness swearing to the

service and W. A. Weaver 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 J. M. Smith shows that W. A. Weaver and wife

value for tax in 1906 \$230 for 1907 \$250 for 1908 \$235

Sworn to and subscribed before me, this 1st day of Sept. 1912

J. M. Smith Ordinary

W. A. Weaver County

W. A. Weaver County

W. A. Weaver County

W. A. Weaver County

W. A. Weaver County

W. A. Weaver County

W. A. Weaver County

GEORGIA, COBB COUNTY.

Received of J.M. GANN, Ordinary, Cobb County, check for One Hundred Dollars, being payment for Burial outfit for T.M. EVATT, Deceased.

This July 9, 1930.

J. F. Collins' Sons
By D. H. Collins

STATEMENT
1/17/30

ACWORTH, GA., 19

Estate of Mr. Thompson M. Evatt,

Acworth, Ga.

In Account With

J. F. Collins' Sons

D. H. Collins

E. L. Collins

L. R. Collins

Furniture, House Furnishings, Stoves, Etc
Funeral Directors and Embalmers

Day Phone 34. Night Phones 45 and 36

1/14/30	Burial outfit -----	\$100.00
---------	---------------------	----------

GEORGIA, COBB COUNTY.

The above and foregoing account is rendered for funeral expenses of THOS. M. EVATT, who died without owning sufficient property to pay this bill.

Sworn to and subscribed before
me, this 17 day of January 1930.

J. F. Collins' Sons
By D. H. Collins
J. M. Gann

County

192

Application for Pension
Due Deceased Pensioner

(UNDER ACT 5919)

(To pay expenses of last illness and funeral)

J. M. Gann Ordinary

for *T. M. Evatt*

Date of Death *January 14-1930*

Amount *Due*

Approved and ordered paid of.

Michael S. 1930

1 Jan. 30 ref.

Ordinary: Fill out above in full and send this bill to Pension Department for approval. If approved, the bill will be paid to the pensioner or his estate. If not approved, the bill will be returned to the pensioner or his estate. Do not keep this application in your files.

Application for Pension Due to a Deceased Pensioner

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

(Under Act Approved August 15, 1904)

GEORGIA, Coker County.

Personally before me, the Ordinary of said County, comes Orin Ewart of said County, who, after being sworn, on oath says that he knew O. M. Ewart of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in Coker County, in this State, on the 11 day of January, 1929, and that pensioner left no widow surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$ 100.00 per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me,
J. M. Ewart Ordinary
Coker County

(Seal of Ordinary)

Ruby Ewart

CERTIFICATE OF ORDINARY

GEORGIA, Coker County.

I, J. M. Ewart Ordinary of said County, do certify that I personally know Ruby Ewart, who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew O. M. Ewart while in life and that this was the same person whose name appears on the Pension Roll of Coker County, and was paid a Pension of one hundred fifty (\$150.00) Dollars in said County for 1929, and I now believe said pensioner to be dead, and that the instructions at the foot of this voucher have been carefully observed in making up this voucher and the bills which are attached hereto.

Given under my hand and official seal, this 17 day of January, 1929.

(Seal of Ordinary)

J. M. Ewart Ordinary
Coker County

INSTRUCTIONS:

1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.

2nd. Each account must be sworn to before the Ordinary, and in the following form. (Do not use the terms: "just, true, due, unpaid," etc.)

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

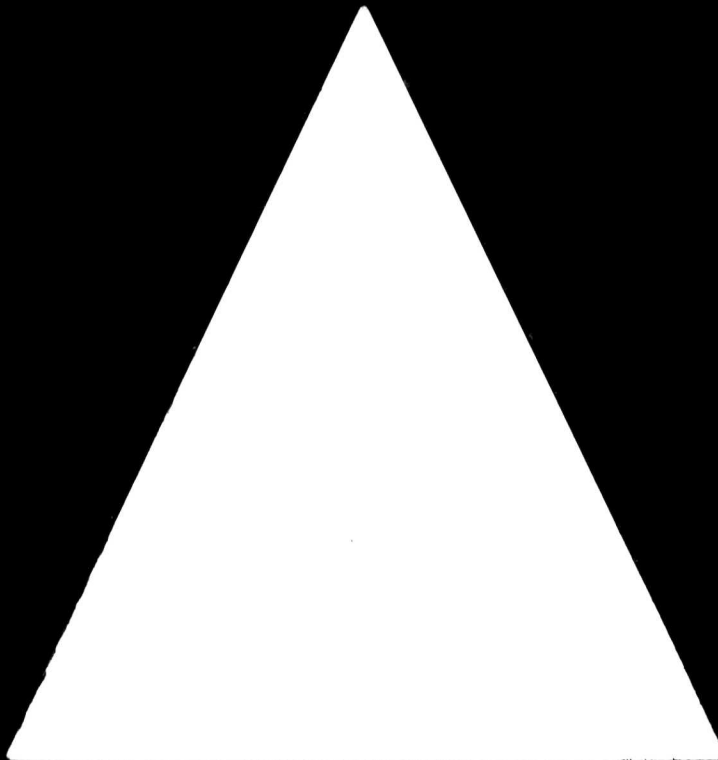
3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.

4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.

5th. Return this application, and attached bills, with your final settlement, to the Pension Department.

6th. Ordinary should see that the back of this blank, when folded, is filled out.

- 4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 5th. Return this application, and attached bills, with your final settlement, to the Pension Department.
- 6th. Ordinary should see that the back of this blank, when folded, is filled out.



Fagan, J. D.
Lobb Co.
recd order 046771

D

No.

Confederate

Soldier's Application.

UNDER ACT 1910.

County

Cobb

Name

J. D. Fagan

Company

Regiment

9th Co. Ball's Line Artillery

Approved

J. W. LINDSEY,

Commissioner of Prisons

CHAR. F. BYRD, State Printer, ALBANY

9/27/10
10/29/10
ENTERED BOSTON OFFICE

Pension Office, 22/14/10.

This Department cannot accept the valuation of property based on the valuation, or approximately thereof, as a rule the actual, salable, cash value will exceed the tax valuation from one half to one third in value. Apply this rule to applicant's tax valuation, and you will be close on to the actual cash value of the property.

C. J. Lindsey, Gen. of Pensions.

Georgia } We the undersigned Citizens
Cobb County } of Said County do swear
that we are acquainted with
the property of J. D. Hagan as listed in said
J. D. Hagan's application for pension
and that the value put on said property
by Geo. D. Cochran and J. B. Wade
Sept 16 1910 is fair full and ample
and said property is not now worth more
than twelve hundred fifty dollars
if that.

W. J. 2/4/10

L. P. Wode
E. B. Sam

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

Col. A. Pagan County.

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

1. What is your name and where do you reside? (Give County and Post-office). *J. D. Pagan, Austin Co. Ga.*
2. How long and since when have you been a continuous resident citizen of this State? *62 years, since June 1848*
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 name and class of Service) *April 1862, Co. A 9th Ga. Battalion, 1st Artillery*
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge). *Until April 9, 1865, 3 years & 3 days*
6. When and where was your Company and Regiment surrendered or discharged from the Service? *April 9, 1865, Approximately Va.*
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? *Approximately at Sumner*
 - b. When did you leave the Command? *April 9, 1865*
 - c. For what cause did you leave? *He surrendered*
 - d. By whose authority did you leave?
 - e. For how long was your leave granted? In what way? *For all time*
 - 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? *Was not captured*
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.)

1. <i>120 acres of land</i>	<i>7,200.00</i>	<i>Wagon & things</i>	<i>25.00</i>
2. <i>Corn</i>	<i>1.00.00</i>	<i>W.F.K. & Co.</i>	<i>25.00</i>
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).

1. <i>120 acres of land</i>	<i>7,200.00</i>	<i>Wagon & things</i>	<i>25.00</i>
2. <i>Corn</i>	<i>1.00.00</i>	<i>W.F.K. & Co.</i>	<i>25.00</i>
12. What annual or monthly income or earnings of yourself and wife and the source derived have you? *None except balance for my son's share - \$100.00 per year*
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

20th day of *August* 1910 } *J. D. Pagan*
J. M. Pagan Ordinary,
 of *Austin* County.

Confederate

Soldier's Application.

UNDER ACT 1910.

County *Col*
 Name *J. D. Pagan*
 Company *A*
 Regiment *9th Ga. Battalion, 1st Artillery*
 Approved

J. W. LINDSEY,

Commissioner of Pensions

STATE OF GEORGIA, DEPARTMENT OF PENSIONS

ENTERED POSTER OFFICE.

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,

Wilkes County.

29 Mc Carley and State and County is hereby presented as a witness in support of the application of John J. Mc Carley 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 when was you married?
29 Mc Carley
Abraham since Apr 4 1862 the applicant?

3. Where does he now reside and since when has he been a bonafide continuing resident in this State and how do you know?
Abraham since Apr 4 1862 he has been

4. When, where and in what Company and Regiment did John J. Mc Carley enlist during war from 1861 to 1865? (Give date and place).
Apr 4 1862 Abraham at 9 1/2 miles

5. How did you obtain your information of this Service?
from a friend of mine

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date).
from Apr 4 1862 to June 1862

7. When and where was his Command surrendered or discharged (give date and place).
Apr 1861 Abraham

8. Were you personally present at the Surrender?
I was

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

10. Was the applicant personally present with his Command at surrender?
yes

11. If not where was he and how came him there?

12. When did he leave his Command? Where was his Command when he left it? for what cause did he leave?

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

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

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

15. Was applicant captured as a prisoner? If so, when and where?

In what prison was he held? and when released?

Sworn to and subscribed before me, this the 19th day of Sept 1910
John J. Mc Carley
of Wilkes County, Georgia

AFFIDAVIT OF TWO FREEHOLDERS

STATE OF GEORGIA,

Wilkes County.

Personally before me comes George D. Cochran and James B. Huggins who on oath says that they are free holders residing in said County and we know John J. Mc Carley 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)

120 acres land value \$1250 Wagon & Huggins 25
1. Milk
2. Corn

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

1908? (State fully by items) no

- When and to whom was it sold or given to?
- What was the price paid or stated to be paid?
- What relation is the party to applicant?
- What disposition was made of the proceeds of the sale?
- Was the disposition of this property made in good faith and full value?

Sworn to and subscribed before me, this the 19th day of Sept 1910
John J. Mc Carley
of Wilkes County, Georgia
Ordinary J. B. Wade

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

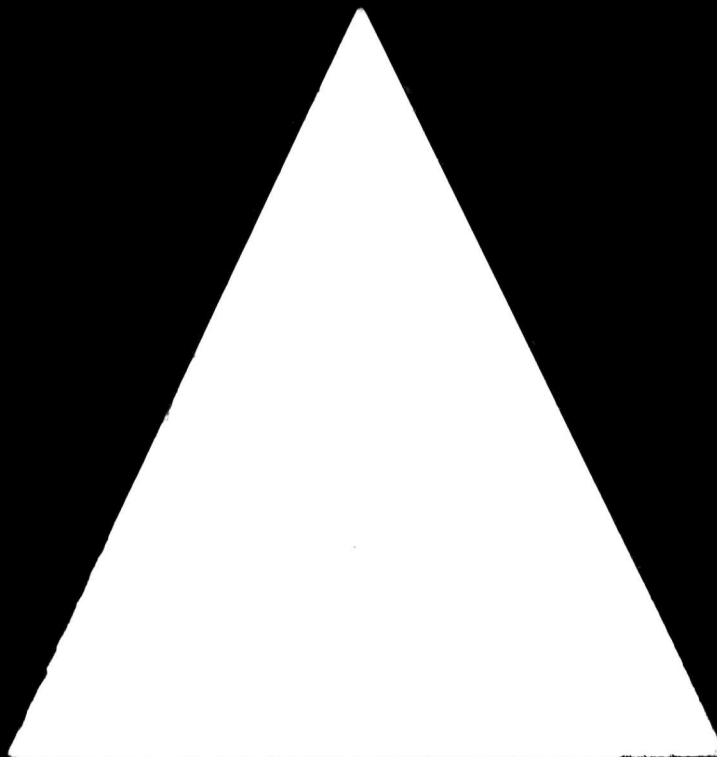
Wilkes County.

I, John J. Mc Carley Ordinary of said County, certify that I know the applicant John J. Mc Carley for Pension is the person he represents himself to be and resides in said County. That I also know George D. Cochran and James B. Huggins the witnesses who are the first holders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Rolls of John J. Mc Carley shows that he and wife value for tax is in 1908 \$1100 for 1909 \$1200 for 1910 \$1400
Sworn under my hand and official seal of office this 19th day of Sept 1910
John J. Mc Carley Ordinary Cobb

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

2 *Case*

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



POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY, }

I, _____ hereby authorize

_____ of _____

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

_____ at _____ by _____

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

Executed in presence of _____ [L.S.]

Executed in presence of _____

John W. Lindsey
No. _____
C. C. B. County
INDIGENT PENSION.
1905

Name *J. L. Hambrough*
County *Chick*
Co. *A. J. Hambrough* Regt. _____
Approved _____ 190 _____

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO _____

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

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

7/21/06

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

County.

J. W. Fuller of said State and County, having been presented as a witness in support of the application of *A. J. Hambrough* for pension under section 1254, Code, and after being duly sworn to answer to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? *J. W. Fuller*
 2. Are you acquainted with *A. J. Hambrough*, the applicant; if so, how long have you known him? *Yes, since June*
 3. Where does he reside, and how long and since when has he been a resident of this State? *Myself, Ever since I know him*
 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? *Yes*
 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? *I was not*
 9. Was applicant present? *I do not know*
 10. If he was not present, where was he? *do not know*
- 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. I live with him

12. What property, effects or income did the applicant possess in 1898, 1897, 1895, 1899, 1900, 1901 and 1902,

and what disposition, if any, did he make of same? *He had some property which he sold*

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

He conveyed what he could to pay his debts

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

He is a farmer and his health is poor

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

Yes, on account of disease

16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902?

He had some property which he sold

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 disabled man and has been disabled since he was made a pensioner

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

He has an affected daughter who is unable to do anything

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

None

Sworn to and subscribed before me, this the

16 day of Sept 1906

J. W. Fuller Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

County.

Personally came before me, *W. J. Pace* and

both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully

A. J. Hambrough, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

That he has dropsy in the legs which renders him entirely unable to perform any labor of any kind and the same is from an old disease of the heart.

and that I have no interest in said pension being allowed:

Sworn to and subscribed before me, this, the

16 day of Sept 1906

W. J. Pace M.D. Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County.

1. *J. W. Fuller* Ordinary, in and for said County, hereby certify

that the applicant, *A. J. Hambrough* resides in said County, and has

been a bona fide resident of this State since the *1st* day of *June* 1898, and that the witness, viz: *J. W. Fuller*

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 me signed.

I further certify that the tax dues of *None* County shows that applicant

owns no real estate in said County, and that he is not a debtor of any person or corporation in said County.

in my opinion the foregoing claim is *valid* made in good faith.

Witness my hand and seal of office, this *16* day of *Sept* 1906

J. W. Fuller Ordinary,

of *Rich* 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 witnesses, and as to the execution of the proof as above set out.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

of _____

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

at _____

by _____

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

[L. S.]

Executed in presence of _____

No. _____

INDIGENT PENSION.

190

Name _____

County _____

Ca. _____

Regt. _____

Approved _____

190

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

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

JOHN W. LINDSEY, Commissioner of Pensions.

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

COUNTY.

I, A. J. Hainbrough of said State and County, desiring to avail himself of the Pension Act (Section 1584, Code), hereby submits his proofs, and after being duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside? (Give State County and post-office). A. J. Hainbrough, Seawater Old County, Ga.
2. How long and since when have you been a resident of this State? all my life
3. When and where were you born? March 23rd 1862, in Atlanta, Ga.
4. When and where and in what company and regiment did you enlist or serve? March 23rd 1862, in Atlanta, Ga. Co. A 9th Ga. Infantry, Anderson, Saylor's.
5. How long did you remain in such company and regiment? April 9th 1865
6. When and where was your company and regiment surrendered and discharged? April 9th 1865
7. Were you present with your company and regiment when it was surrendered? Yes
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? I was present
9. How much can you earn (gross) per annum by your own exertions or labor? nothing
10. What has been your occupation since 1865? Farmer
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? Infirmity & poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? Weak heart, Rheumatism, General Debility & Dropsy of the legs. My health has been steadily failing for 25 years & now I am unable to perform any labor. I have lost my sight and have been blind for 10 years.
13. What property, real and personal, or income, do you possess, and its gross value? about 1 acre of land & household furniture
14. What property, real or personal, did you possess in 1864, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? I owned 20 acres of land until 2 years ago when I had to sell same to pay my Dr. bills and other debts which had accumulated on me
15. In what County did you reside during those years, and what property did you then return for taxation? Cobb
16. How were you supported during the years 1898, 1900, 1901 and 1902? By what bills I owned and out of what bills I owned 2 years ago, what also income of bills, which to
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? nothing
18. What was your employment during 1898, 1899, 1901 and 1902? What pay did you receive in each year? nothing
19. Have you a family? If so, who composes such family? Give their means of support? Have they a home, or other property? Their ages and how employed? Yes, myself & one female daughter I have no more children. I have no other property except what I have in my pockets. I have no other means of support.
20. Are you receiving any pension? If so, what amount and for what disability? no
21. Have you ever made an application for pension before? no
22. How many applications have you ever made and under what class? none

Sworn to and subscribed before me this 12th day of April 1902.

A. J. Hainbrough Ordinary,
County.

Applicant.

Every Question Must Be Answered.

must pay my Dr. bills & to sell my property

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Fulton COUNTY.

E. D. & Mobley of said State and County, having been presented as a witness in support of the application of A. J. Hambrough for pension under section 1254, Code, and after being duly sworn, the answers to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? Atlanta Fulton Ga. E. D. & Mobley
2. Are you acquainted with A. J. Hambrough the applicant; if so, how long have you known him? Yes 44 years
3. Where does he reside, and how long and since when has he been a resident of this State? Superior Ga. 1863 to April 9, 1865
4. Where and in what company and regiment did he enlist, and how do you know? Ever since I knew him
5. Were you a member of the same company and regiment? Resolution October 1863 to April 9, 1865
6. How long did he perform regular military duty? Following knowledge from October 1863 to April 9, 1865
7. When and where was his command surrendered? Appomattox Va. April 9, 1865
8. Were you present when it surrendered? Yes
9. Was applicant present? Yes
10. If he was not present, where was he? He was present
When did he leave his command? He did not leave until Sumner
By what authority he left? the Army Surrendered How do you know all of this? I was there
11. What property, effects or income has the applicant? (Give your means of knowledge.)
12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same?
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom?
14. What is the applicant's occupation and physical condition?
15. Is the applicant unable to support himself by labor of any sort; if so, why?
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902?
17. What portion of his support for these four years was derived from his own labor or income?
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code.
19. Who composes family? What property have they? Children's age and their earning capacity?
20. What interest have you in the recovery of a pension by this applicant?

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

COUNTY.

Personally came before me _____ and

_____, both known to me as reputable physicians

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

_____, applicant for pension under Section 1254, Code, and after

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

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

Sworn to and subscribed before me, this, the

____ day of _____ 190____

Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton COUNTY.

I, John A. Robinson Ordinary, in and for said County, hereby certify that the applicant, _____

resides in said County, and has been a bona fide resident of this State since the _____ day of _____ 190____

and that the witness, viz: E. D. & Mobley

is of trustworthy character, and that these statements are entitled to full faith and credit.

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

I further certify that the tax digest of _____ County shows that applicant

returned for taxation in his name in 1896 _____ Dollars of

property, and in 1900 _____ Dollars of property; in 1901

Dollars of property; in 1902

Dollars of property.

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

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

John A. Robinson Ordinary,
of Fulton County.

NOTE.

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

Sworn to and subscribed before me, this the

____ day of _____ 190____

Ordinary.

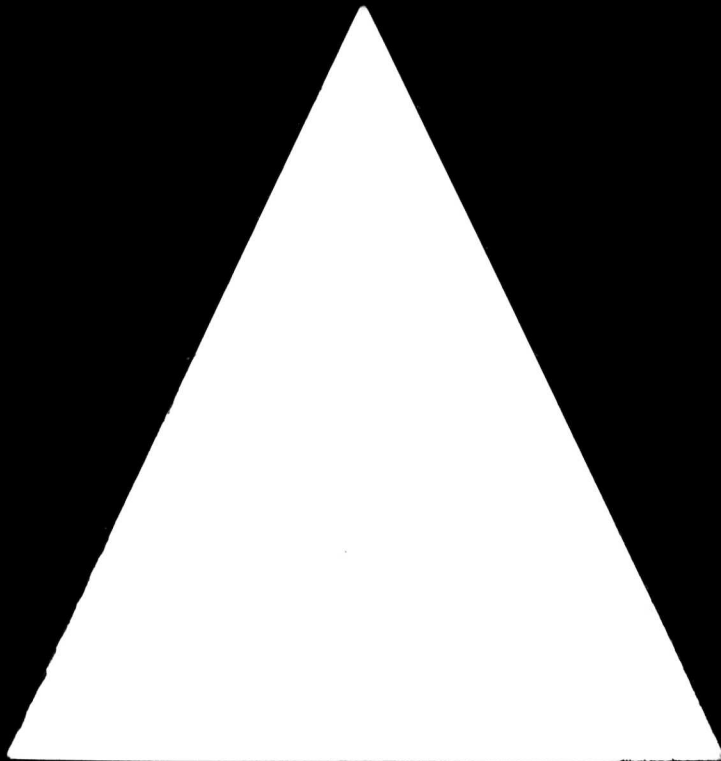
Witness.

Georgia - } Amendment of A. J. Fambrough
Cobb County } to Application for Pension

Personally appeared before me A. J. Fambrough
who being duly sworn deposed and said, that he
was a Member of 9th Co. Batt. of Artillery. That said Batt.
was an independent organization gotten up by
A. Loyden of Atlanta Ga. that said Command
was tendered to, and accepted by the Confederate
States, that he belonged to Co. A, that the larger
portion of said Company was captured at
Cumberland Gap Tenn. that affiant with others
were detailed to carry out the horses at said Gap
to prevent capture, that after the surrender of
said Gap the remaining portion, of which affiant
was one, was transferred to heavy Artillery in Gen.
Lee's Army where affiant remained until the
9th day of April 1865. Affiant never at any time
belonged to Evans Brigade but was in the Artillery
service during the whole time affiant is
unable to give the names of different Batteries to
which he was attached as he was changed
several times. A. J. Fambrough
Subscribed and sworn to before me
this November 16th 1906

John W. Tracy
Ordinary
Cobb County
Ga

John F. W. W. W.
Ordinary
Cobb County
Ga



POWER OF ATTORNEY.

STATE OF GEORGIA,

County,

Know all Men by these Presents, That I,

Julia Fambrough
of Cobb County,

do hereby appoint

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

27

day of

January 1891

[L. S.]

Executed in the presence of us:

Abraham
McDaniel

DIRECTIONS.

If allowed, send amount by

me at

to

and oblige

Fambrough Julia
Cobb County
1891.
a q BateNo. 4008
4008

Widows' Pension

PAID TO—

Mrs. Julia Fambrough
of
Cobb COUNTY.

\$100.00.

Warrant Issued

1891

AND HANDED TO

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA,

Cobb County.

Know all Men by these Presents, That I,

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

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

27 day of *January*, 189*2*. [L. S.]

Executed in the presence of us:

Al. J. L. L.
W. B. L. L.

DIRECTIONS.

If allowed, send amount by

me at

, and oblige

to



Warrant Issued

\$100.00.

1891

Myrna Ga.
Cobb County.

Widow's Pension

210.00
4008

1891
Cobb County

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. *Julia Hambrough*, who being sworn according to law, says under
oath that she is the widow of *John S. Hambrough*, who was a soldier in
the service of the Confederate States, and served as a member of Company *A*, of the

9th Battalion Regiment of *Georgia* Volunteers; that he enlisted in said

service on or about the day of *April*, 186*3*, and was in the

Confederate Army up to *October*, 186*3* That while in the

Army, he was on the *first* day of *October*, 186*3* (See Note No. 1)

while in said service at Columbus, Georgia, State of Tennessee, he was taken prisoner by the Federal Army, and taken to Camp Douglass Prison in the State of Tennessee - that on or about October 15th 1863 he died while in said Prison from some disease caused by cold and exposure.

I further assert and swear that my said husband served as Major, 1st Regt. and that from news paper information and from information given by his comrades I learned that he died. I know that he never returned home nor has

Dependent 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 *6th* day of *May*, 18*41*, and that she has resided in Georgia continuously since the

15th day of *August*, 18*23*; 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.

Dependent, as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February

15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this, the day of *January*, 189*2*

Julia Hambrough
Myrna Ga.

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

and

Mrs. Julia F. Farnborough

State of Georgia

Company

That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the

reason of and service in the Army, he lost his life as follows:

In person came before me, the undersigned Ordinary

in and for said County, witnesses E. Lann

(each known to said Attesting Officer as truthful,

reliable and reputable citizens) who severally say under oath, that, from their own personal knowledge,

Mrs. Julia F. Farnborough of the County of Cobb,

State of Georgia is the widow of John S. Farnborough, who was a soldier in

Company of the Georgia Volunteers.

That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the

day of April 1863 That while in said service, or by

That on or about the 1st day of October 1863, he was taken prisoner at Cumberland Gap, State of Tennessee, by the Federal Army, and was taken to Camp Douglass Prison, in the State of Illinois. That on or about the 15th of October 1863, while in said prison he died from disease caused by fever, cold and exposure, contracted while in the Army and in said prison.

Our opportunity for knowing the facts stated in reference to death of applicant's husband were

as follows: - We were members and comrades in the same Company with said John S. Farnborough and were captured at the same time and were in prison with said deceased when he died.

We further swear that Mrs. Julia Farnborough was the wife of said soldier during the service, and that she has not intermarried since his death, and that she resides in

County of the State of Georgia.

Sworn to and subscribed before me, this, the

27th day of January 1892

Ordinary.

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

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

Form No. 3.

State of Georgia

County of Cobb

State of Georgia, hereby certify that I am acquainted with Mrs. Julia Farnborough

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

27th

day of

January 1892

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 of their County and testify. The attestation of a Justice of the Peace or Notary will not answer.

If proofs must be made out of the State, the witnesses must be sworn before a Judge of a Court of Record under seal, and the witnesses must be certified to as reliable, and that their signatures are genuine.

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

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

By order of the Governor.

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

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

Form No. 2.

STATE OF GEORGIA, County of *Loose*

I, *John S. Stone* Ordinary in and for said County of *Loose* State of Georgia, hereby certify that I am acquainted with Mrs. *Julia F. Hambrough* the applicant for a pension in this case, and know, from my own knowledge, (or from positive proof presented to me by reputable witnesses), that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of *John S. Hambrough* 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, *31st* day of *January* 1893.

John S. Stone Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, County of *Loose*

KNOW ALL MEN BY THESE PRESENTS, That I, *John S. Stone*

County, in said State, do hereby appoint of *John S. Stone* 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 *31st* day of *January* 1893.

Executed in the presence of us: *John S. Stone*

DIRECTIONS.

Send amount by *John S. Stone* to *John S. Stone* and oblige

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

Form No. 2.

STATE OF GEORGIA, County of *Loose*

I, *John S. Stone* Ordinary in and for said County of *Loose* State of Georgia, hereby certify that I am acquainted with Mrs. *Julia F. Hambrough* the applicant for a pension in this case, and know, from my own knowledge (or from positive proof presented to me by reputable witnesses), that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of *John S. Hambrough* 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, *1st* day of *July* 1894.

John S. Stone Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, County of *Loose*

KNOW ALL MEN BY THESE PRESENTS, That I, *John S. Stone*

County, in said State, do hereby appoint of *Monetta G. Galt* 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 *1st* day of *July* 1894.

Executed in the presence of us: *John S. Stone*

DIRECTIONS.

Send amount by *John S. Stone* to *John S. Stone* and oblige

Widow's Pension, *John S. Stone* 1893.

PAID TO *John S. Stone* for year ending February 15th, 1893.

Warrant Issued *John S. Stone* 1893.

AND HANDED TO *John S. Stone*

Widow's Pension, *John S. Stone* 1894.

PAID TO *John S. Stone* for year ending February 15th, 1894.

Warrant Issued *John S. Stone* 1894.

AND HANDED TO *John S. Stone*

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally comes Mrs.

Julia Hambrough

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 15 August 1823 That she is the Widow of

John S. Hambrough who was a Soldier in Company
 "A" of the 9th Battalion Regiment of Georgia
 Volunteers, that he enlisted in said Regiment on or about the month of April
 1862 and served in the Army up to 15 October 1863 That he lost his
 life on the 15 day of October 1863 (State here

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

That the said deceased
 soldier served in the Confed-
 erate Army as above stated
 that he was taken prisoner at
 Cumberland Gap Tenn. and
 was taken to Camp Douglas
 Illinois, and while there he
 died on 15 October 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 1844 that Georgia is her home and she resided in this State 23d day of December,
 1890, and has not lived in any other State or locality since that date. I have been allowed a
 pension for the year ending February 15th, 1892, and now apply for the allowance provided by
 law for the year ending February 15th, 1893.

Sworn to and subscribed before me, this

30th day of Aug. 1893.

Jul. Stone Ordinary.

Post-office

Amory Ga.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally comes Mrs.

Julia Hambrough

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 August 1823 That she is the Widow of

J. S. Hambrough who was a Soldier in Company
 "A" of the 9th Battalion Regiment of Georgia
 Volunteers, that he enlisted in said Regiment on or about the month of April
 1862 and served in the Army up to 15 October 1863 That he lost his
 life on the 15 day of October 1863 (State here

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

That while in the Confederate
 Army at or about Cumber-
 land Gap Tenn he was
 captured and taken prisoner
 to Camp Douglas, Ills.
 and there died, from cold
 and exposure on 15 October
 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 1844; that Georgia is her home and she resided in this State 23d day
 of December, 1890, and has not lived in any other State or locality since that date. I have
 been allowed a pension for the year ending February 15th, 1893, and now apply for the
 allowance provided by law for the year ending February 15th, 1894.

Sworn to and subscribed before me, this

15th day of Aug. 1894.

Jul. Stone Ordinary.

Post-office

Amory Ga.

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

Form No. 3.

STATE OF GEORGIA, County of Cobb

I, *Julia Stone*, Ordinary in and for said County of State of Georgia, hereby certify that I am acquainted with Mrs. *Julia Hambrough* 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 *J. S. Hambrough* deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1894.

In Witness Whereof, I have hereto set my hand and affixed the seal of my office, this, the *16th* day of *July*, 1895.

{ SEAL }

Ordinary.

POWER OF ATTORNEY.

Form No. 3.

STATE OF GEORGIA, County of Cobb

KNOW ALL MEN BY THESE PRESENTS, That I, *Julia Hambrough*

County of said State, do hereby appoint of *Manietta Stone* 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 hereto set my hand and seal, this *26th* day of *July*, 1895. *Julia Hambrough* [L. S.]

Executed in the presence of us:

DIRECTIONS.

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

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

Form No. 3.

STATE OF GEORGIA, County of Cobb

I, *Julia Stone*, Ordinary in and for said County of State of Georgia, hereby certify that I am acquainted with Mrs. *Julia Hambrough* 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 *J. S. Hambrough* deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1895.

In Witness Whereof, I have hereto set my hand and affixed the seal of my office, this the *3rd* day of *July*, 1896.

{ SEAL }

Ordinary.

POWER OF ATTORNEY.

Form No. 3.

STATE OF GEORGIA, County of Cobb

Julia Hambrough authorize *Julia Stone* of *Manietta Stone* to receive and receipt for the pension and heron and request that he remit same to *me by him*

IN WITNESS WHEREOF, I have hereto set my hand and seal, this day of *July*, 1896.

Executed in the presence of *Julia Hambrough* [L. S.]

Ed Hambrough

1896.

No. 3544

WIDOW'S PENSION,

for year ending February 15th, 1896.

PAID TO

Julia Hambrough

or

Julia Stone County of *Cobb*

WARRANT ISSUED

1896.

AND HANDED TO

W

ONE OF THE CLERKS OF THE COURT.

1895.

FOR THOSE HEREINFORER PAID.

No. 444

WIDOW'S PENSION,

for year ending February 15th, 1895.

PAID TO

Julia Hambrough

or

Julia Stone County of *Cobb*

WARRANT ISSUED

24 July 1895.

AND HANDED TO

W

ONE OF THE CLERKS OF THE COURT.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Cobb*

Personally Comes Mrs.

Julia Hambrough

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 *August 1873* That she is the Widow of *J. S. Hambrough* who was a Soldier in Company *9th* of the *1st* *Regiment* *Vol.* Volunteers, that he enlisted in said Regiment on or about the month of *April* 1863 and served in the Army up to *October* 1863 That he lost his life on the *15th* day of *October* 1863 (State here

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

That while in the Confederate Army in the year 1863 he was captured by the Federals at or near Cumberland Gap Tenn. and was taken to actual prison at Camp Douglass Ills. where he died from cold and exposure on the 15th day of October 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 1844 that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this

day of *July* 1895.

Post-office *Amysville*

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Cobb*

Personally Comes Mrs.

Julia Hambrough

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 *August 1873* That she is the Widow of *J. S. Hambrough* who was a Soldier in Company *9th* of the *1st* *Regiment* *Vol.* Volunteers, that he enlisted in said regiment on or about the month of *April* 1863 and served in the Army up to *October* 1863 That he lost his life on the *15th* day of *October* 1863 (State here

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

was taken prisoner at Cumberland Gap Tenn. and taken to Camp Douglass Ills. where he died from disease and exposure contracted on the trip

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1844 that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension 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

day of *July* 1895.

Ordinary.

Post-office

Amysville

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

Form No. 2.

STATE OF GEORGIA, County of *Cobb*

I, *John Brown* Ordinary in and for said County of

John Brown State of Georgia, hereby certify that I am acquainted with Mrs. *Julia Hambrough* 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 *J. S. Hambrough* deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1896.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this *9th* day of *July* 1897.

SEAL

Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, *Cobb* County.

I, *Mrs. Julia Hambrough* hereby authorize *John Brown* of *Minetta 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 *9th* day of *July* 1897.

Executed in the presence of

John Brown

Form No. 2.

POWER OF ATTORNEY.

State of Georgia, *Cobb* County.

I, *Julia Hambrough* hereby authorize *John Brown* of *Minetta 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 *18th* day of *July* 1898.

Executed in the presence of

Julia Hambrough

Wambrough Julia
Cobb County
FOR THOSE HERETOFORE PAID.
1897.
No. *2479*
WIDOW'S PENSION,
for year ending February 15th, 1897.
PAID TO
Mrs. Julia Hambrough
OF
Cobb County.
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT ISSUED
7/16
PAID HANDED TO
John Brown
1897.

Wambrough Julia
Cobb County
For Those Heretofore Paid.
1898.
No. *2484*
WIDOW'S PENSION,
For year ending February 15th, 1898.
PAID TO
Mrs. Julia Hambrough
OF
Cobb County.
Widow of *J. S. Hambrough*
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT ISSUED
7/18
PAID HANDED TO
John Brown
1898.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

Julia Hambroughwho 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 August 23 1863 That she is the Widow ofA. J. Hambrough who was a Soldier in Companyof the 9th Battalion Regiment of Yn.Volunteers, that enlisted in said regiment on or about the month of April1863 and served in the Army up to October 1863 That he lost hislife on the 15th day of October 1863 (State here

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

That while in the Federal Prison at Camp Douglass Ills. he was attacked with cold and exposure and died in Prison at said Prison on the 15th October 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 1841

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

9th day of Feb 1897.

Ordinary.

Julia Hambrough

Post-office

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

Julia Hambroughwho, 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 August 1823 That she is the Widow ofA. J. Hambrough who was a Soldier in Companyof the 9th Ball. Regiment of Ga.Volunteers, that he enlisted in said regiment on or about the month of April1863 and served in the Army up to October 1863 That he lost hislife on the 15th day of Oct 1863 (State here

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

That while in the said service he was captured at Cumberland Gap Tenn. and taken to Camp Douglass Ills. where he died from cold and exposure on Oct. 15th 63.

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 1841I 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

18th day of Feb 1898.M. H. Stone Ordinary.

Post-Office.

State of Georgia,

Cobb County.I, J. L. StoneOrdinary of said County, certify that I am well acquainted with Mrs. Julia Hambrough 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 18th day of Feb 1823Given under my official signature and seal this 18th day of Feb 1898.

Official Seal.

Ordinary of

Cobb County.

POWER OF ATTORNEY.

State of Georgia.

Cobb County.

I, Julia Hambrough hereby authorize Will Stone
of Marietta 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

day of Feb 1899.

1899.

Julia Hambrough [L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb County.

I, Julia Hambrough hereby authorize Will Stone
of Marietta 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

day of Feb 1900.

Julia Hambrough [L. S.]

Executed in presence of

P. J. Hamby

Hambrough, Julia
Cobb County
For Those Heretofore Paid.

1899.

NO. 3261

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAID TO
Mrs Julia Hambrough

Cobb County
Widow of J. S. Hambrough

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

2/8
AND HANDLED TO

Julia

GEO. W. JOHNSON, STATE PRINTER, ATLANTA.

Hambrough, Julia
Cobb County
To Those Heretofore Paid.

1900.

NO. 1485

WIDOW'S PENSION,

For year ending February 15th, 1900.

PAID TO
Mrs Julia Hambrough

Cobb County
Widow of J. S. Hambrough

JNO. W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

2/16
AND HANDLED TO

Mrs

GEO. W. JOHNSON, STATE PRINTER, ATLANTA.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

Julia Fambrough

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.

August1863 That she is the Widow ofJ. S. Fambrough

who was a soldier in Company

A. of the 9th Batt.Regiment of Georgia

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

April1863 and served in the Army up toOctober1863 That he lost hislife on the 15thday of October1863 (State here

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

That while in the Con-
federate Army at Cumberland
Jenn. the deceased
husband contracted cold
and became sick - he was
then taken prisoner and died
at Camp Douglas Ills. Oct. 15th 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 1841.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, 1900.

Sworn to and subscribed before me, this

1stday of Feb.

1899.

Ordinary.

Post-Office.

Julia Fambrough
Myron A. Ha

State of Georgia,

County of CobbI J. W. Stone

Ordinary of said County, certify that I am well acquainted

with Mrs. Julia Fambrough 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 Aug.1863

Given under my official signature and seal this

1stday of Feb.

1899.

Ordinary of

Cobb

County.

Official
Seal.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

Julia Fambrough

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.

August1863 That she is the Widow ofJ. S. Fambrough

who was a soldier in Company

A. of the 9th Batt.Regiment of Georgia

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

April1863 and served in the Army up toOctober1863 That he lost hislife on the 15thday of October1863 (State here

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

That while in the Confederate Army
at Cumberland Gap Tenn. the deceased
husband contracted cold and became
sick - he was then taken prisoner
and died at Camp Douglas Ills.
Oct. 15th 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 1841.I have been allowed a pension as a resident of Cobb County for the year endingFebruary 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

14thday of July

1900.

Ordinary.

Post-Office.

Julia Fambrough
J. W. Stone

State of Georgia,

County of CobbI J. W. Stone

Ordinary of said County, certify that I am well acquainted

with Mrs. Julia Fambrough 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 August1863

Given under my official signature and seal, this

14thday of July

1900.

Ordinary of

Cobb

County.

Official
Seal.

STATE OF GEORGIA.

Jas M Gamu

STATE OF GEORGIA,

J M Gann

1901.

No. 129

WIDOW'S PENSION,

For year ending February 15th, 1901.

PAID TO
Mrs. Julia Hornbough
OF
Hornbough County.
Widow of

JOHN W. LINDSEY,

Commissioner of Prisons

WARRANT ISSUED

Jan. 15 - 1901.

AND HANDED TO

Country

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

To Those Heretofore Paid.

1902.

No. 2758

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Ms. Julia Hancock
OF
W. H.

Widow of

Co. _____ Regiment _____

JOHN W. LINDSEY.

Commissioner of Pension

WARRANT ISSUED

1902

AND HANDED TO

Ordry

... ..

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

Julia Fambrough

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.

August 1823

That she is the Widow of

J. N. Fambrough

who was a soldier in Company

of the 9th Batt

Regiment of

Georgia

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

April1863 and served in the Army up toOctober1863

That he lost his

life on the

15th

day of

October1863

(State here

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

While in the
Confederate Army at Cumberland Gap.
In the deceased husband contracted the
and became sick. He was then taken
prisoner and died at Camp Douglas
Ills Oct 15th 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 1841

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 Jan

1901.

Ordinary.

Post Office

Julia Fambrough

State of Georgia,

Cobb County.

Ordinary of said County, certify that I am well acquainted

with Mrs. Julia Fambrough who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the

all her lifeday of 18Given under my official signature and seal, this the 7th day of Jan 1901.

Ordinary of

County.

Official Seal.

John Astrey

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES MRS.

Julia Fambrough

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

continuously ever since

August 1823

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

That she is the Widow of

J. N. Fambrough

who was a soldier in Company

of the 9th Batt

Regiment of

Georgia

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

April1863, and served in the Army up toOctober1863

That he lost his

life on the

15th

day of

October1863

(State here

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

That while in
the Confederate Army at Cumberland Gap.
When the deceased husband contracted
Cold and became sick he was then taken
prisoner and died at Camp Douglas Ills
Oct 15th 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 1841

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

4th day of Jan

1902.

Ordinary.

Post Office

Julia Fambrough

State of Georgia,

Cobb County.

Ordinary of said County, certify that I am well

acquainted with Mrs. Julia Fambrough 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 4th day of Jan 1902.

Official Seal.

Ordinary of

County.

John Astrey

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

I, *Julia Lambrough*, hereby authorize
John Anthony of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
_____ at _____

In Witness Whereof, I have hereunto set my hand and seal, this *3rd*
day of *January* 1903. *Julia Lambrough* [L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

I, *Julia Lambrough*, hereby authorize
John Anthony of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
_____ at _____

In Witness Whereof, I have hereunto set my hand and seal, this *2*
day of *Jan* 1904. *Julia Lambrough* [L. S.]

Executed in presence of

Lambrough Julia
Cobb County

To Those Heretofore Paid

1903.

No. *202*

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO
Mrs. Julia Lambrough

OF
J. S. Lambrough County,

Widow of
H. J. Lambrough Co. *W. H. Lambrough*

JOHN W. LINDSEY,

Comptroller of Pensions.

WARRANT ISSUED

1/25 1903.

AND HANDED TO

Body

U. S. DEPARTMENT OF THE INTERIOR, BUREAU OF LANDS, ALABAMA.

Lambrough Julia
Cobb County

TO THOSE HERETOFORE PAID.

1904.

No. *2574*

WIDOW'S PENSION

FOR

YEAR ENDING DECEMBER 31, 1904.

PAID TO

Mrs. Julia Lambrough

Cobb County,

Widow of *J. S. Lambrough*

Co. *W. H. Lambrough*

JOHN W. LINDSEY,

Comptroller of Pensions.

WARRANT ISSUED

1/25 1904.

AND HANDED TO

Body

U. S. DEPARTMENT OF THE INTERIOR, BUREAU OF LANDS, ALABAMA.

Approved Pensions

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES MRS.

Julia Hambrough

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 August 1863. That she is the Widow ofJ. S. Hambrough who was a soldier in Companyof the 9th Regt Regiment of GeorgiaVolunteers, that he enlisted in said regiment on or about the month of April1863, and served in the Army up to October 1863. That he lost hislife on the 15th day of October 1863. (State here

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

the Confederate Army. That while inat Cumberland Gap Tenn. he becamesick and became sick in thetaken prisoner and died at Camp Douglasthe 15th 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 1864.

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 3 day of January 1903. John A. Purdy Ordinary. Post Office Anyama

State of Georgia, Cobb County, I, John A. Purdy

Ordinary of said County, certify that I am well

acquainted with Mrs. Julia Hambrough, 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 1stday of January 1864.Given under my official signature and seal, this 3 day of January 1903.John A. PurdyOrdinary of Cobb County.

Official Seal.

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

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES MRS.

Julia Hambrough

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 August 1863. That she is the Widow ofJ. S. Hambrough who was a soldier in Companyof the 9th Regt Regiment of GeorgiaVolunteers, that he enlisted in said regiment on or about the month of April1863, and served in the Army up to October 1863. That he lost hislife on the 15th day of October 1863. (State here

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

While in the Confederate Armyat Cumberland Gap Tenn. he becamesick and became sick in thetaken prisoner and died at Camp Douglasthe 15th 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 1864.

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 January 1904. John A. Purdy Ordinary. Post Office Anyama

State of Georgia, Cobb County, I, John A. Purdy

Ordinary of said County, certify that I am well

acquainted with Mrs. Julia Hambrough, who made the above affidavit and

am satisfied that the facts therein stated are true, and I know she is the individual she represents

herself to be, and that she has continuously resided in this State since the

day of January 1864.Given under my official signature and seal, this 1 day of January 1904.John A. PurdyOrdinary of Cobb County.

Official Seal.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, Julia Lambrough, hereby authorize
John W. Lindsey of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
_____ at _____.

In Witness Whereof, I have hereunto set my hand and seal, this 4
day of July 1905.

Julia Lambrough [L. S.]

Executed in presence of

John W. Lindsey

Lambrough, Julia
Colt County
To These Hereofore Paid.

1905.

No. 248

WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAY TO
Mrs. Julia Lambrough

OF

Colt County,

Widow of _____

Co. _____ Regiment _____

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

123 1906.

AND HANDED TO

July

This warrant is valid only when countersigned by the Commissioner of Pensions.

FOR WIDOWS HEREOFORE ALLOWED PENSIONS

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES MRS.

Julia Hambrough

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 1833 That she is the Widow of

J. S. Hambrough who was a soldier in Company
A of the 9th Regt Regiment of Co

Volunteers, that he enlisted in said regiment on or about the month of April
1862, and served in the Army up to October 1863 That he lost his
 life on the October day of October 1863 (State here

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

Died in Camp Chase, while
a prisoner

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
 soldier, and that she has never married since his death aforesaid, and that she became his wife in
 the year 18 41

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 4 day of January 1905.
John H. H. H. Ordinary.

Post-Office

Julia Hambrough

State of Georgia,

County of CobbI, John H. H. H.

Ordinary of said County, certify that I am well
 acquainted with Mrs. Julia Hambrough 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 4 day of January 1905.

Official
 Seal.

Ordinary of

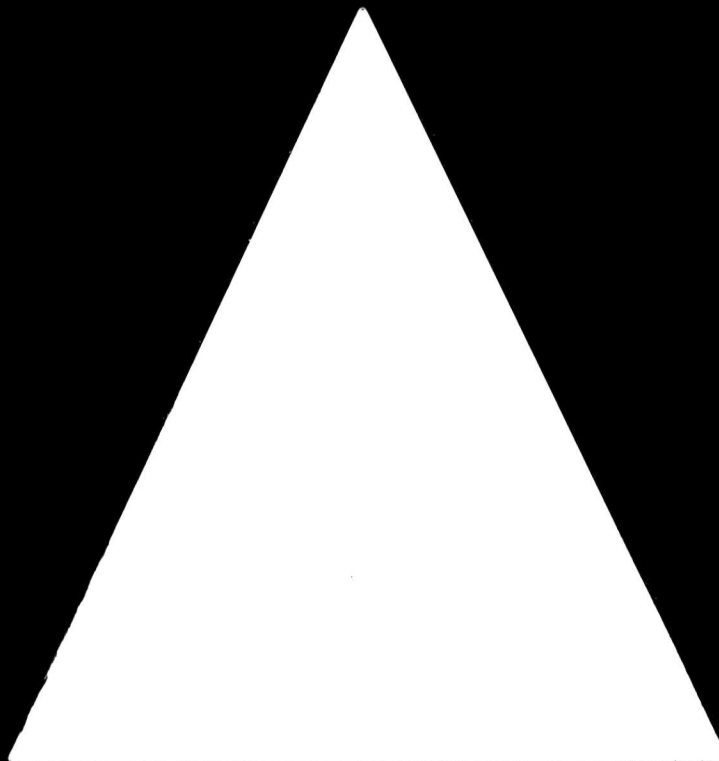
Cobb County.

NOTE.—All blank spaces must be filled.
 Vouched and Attested and Subscribed before me, this 1st day of January 1905.

11, 1901.

Ordinary of WPA County.

NOTE.—All blank spaces must be filled.
Vouches for ALL RECEIPTS and DEBIT after January 1st, 1905.



POWER OF ATTORNEY, STATE OF GEORGIA.

Know all Men by these Presents, That I,
County,
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
aforesaid.

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

[L. S.]

Executed in the presence of us:

DIRECTIONS.

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



Samuel Elizabeth
Georgia Co.
Cobb County
1891
a widow's pension

No. *47*

Widows' Pension

PAID TO

Mrs. E. E. H. H. H.

OF

Cobb

COUNTY.

\$100.00.

Warrant Issued

1891

AND HANDED TO

Geo. W. Harvill, State Printer Atlanta.

P.O.
Training Station

Form No. 5.

County.

Know all Men by these Presents, That I,

428

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 aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of 189

Executed in the presence of us:

[1..5.]

DIRECTIONS

If allowed, send amount by

me at

, and oblige,

ic



Widows' Pension

PAID TO

Malcolm Livingston

50

COUNTY

UNITY

1000

Warrant Issued

AND HANDED TO

1891

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA.

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

County of Albany in and for the County of Albany
 Mrs. Elizabeth George A. Penn, who being sworn according to law, says under
 oath that she is the widow of Thomas J. Penn who was a soldier

the service of the Confederate States, and served as a member of Company A, of the 1st Regiment of State Troops. He volunteered; that he enlisted in said service on or about the day of August 1862, and was in the Army up to 1st September 1864. That while in the Army, he was on the day of August 1864. (See Note No. 1)

Thos^{ts} Penn died 1st September 1864 at Rock Hospital in Upson County Ga of Phenuemoria caused from Exposure in the Army.

He was in water service on the
tugboat near Atlanta during the war,
and on August 1864, he & his crew
were attacked with dysentery & fever.
He was taken to the hospital and finally
moved to a hospital at Johnson's Creek.
As soon as he died on October 1st.

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 24th day of September 1854, and that she has resided in Georgia continuously since the 15 day of May 1847; that Georgia is her home, and was such on the 23d day of December, 1890, and since said date she has not lived in any other State or locality. Deponent, as the widow of said deceased soldier's 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
8th day of April 1891.
M. 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.

In person came before me, the undersigned Ordinary

County of Fulton in and for said County, witnesses
J. M. Hall & J. J. Hall & Sarah J. Hall
 and Rebecca Hornell (each known to said Attesting Officer as truthful,
 reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge,
 Mrs. Elizabeth Georgia A. Fenn, of the County of Cobb
 State of Georgia, is the widow of Thomas J. Fenn who was a soldier in
 Company A of the first Regiment of State Troops Volunteers.
 That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or
 about the first day of August 1862. That while in said service, or by
 reason of said service in the Army, he lost his life as follows:

Died of Pneumonia at
Rock Hospital upon County, Georgia in
the year 1864 - 8 and disease
contracted by him in August
while on Hood's retreat from Atlanta
to Jonesboro having been taken from
the tent and carried to the
Hospital at that place

Said witness Rebecca Hornell swears,
to all herein except the marriage,
that she is his widow & not re-
married

We further swear that Mrs. Elizabeth Georgia A. Fenn 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 8th day of April 1891:
J. M. Hall
J. J. Hall
Sarah J. Hall
Rebecca Hornell
 Ordinaries.

The Ordinary of Fulton will please certify as to
 witnesses, W. H. Stone Ordinary, Cobb Co.

Form No. 3.

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

STATE OF GEORGIA.

County of Cobb

I, W. H. Stone Ordinary

in and for said County of Cobb

State of Georgia, hereby certify that I am acquainted with Mrs. Elizabeth A. Fenn
 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, 1860, 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

8th day of April 1891.

W. H. Stone Ordinary.
 I do not certify as to witnesses.
 I hereby certify that the statements made
 in the foregoing certificate as to the witnesses
 are true and correct, my hand and official
 seal this 8th day of April 1891.

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 "Instructions" 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.

Affidavit for Three Witnesses.

Form No. 9.

STATE OF GEORGIA,

In person came before me, the undersigned Ordinary
 and for said County, witnesses
 County of Hull J. M. Stone and J. Hall Sarah J. Hall
 and Hebe Howell (each known to said Attesting Officer as truthful,
 reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge,
 Mrs. Elizabeth Georgia A. Freeman, of the County of Cobb
 State of Georgia, is the widow of Thomas J. Freeman, who was a soldier in
 Company A of the first Regiment of State Troops Volunteers,
 That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or
 about the first day of August 1862. That while in said service, or by
 reason of said service in the Army, he lost his life as follows:

Died of Pneumonia at
Rock Hospital upon County Georgia in
the year 1864 - said disease
contracted by him in August
while on Hood's retreat from Atlanta
to Jonesboro having been taken from
the Union and carried to the
Hospital at that place

Said witness Hebe Howell swears
to all herein except the marriage,
that she is his widow & not re-
married

We further swear that Mrs. Elizabeth Georgia A. Freeman 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
8th day of April 1891.

J. M. Stone
Ordinary.

J. J. Hall
Attest

The Ordinary of Hull will please certify as to
 witnesses, J. M. Stone Ordinary Cobb Co.

Form No. 11.

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

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. Elizabeth A. Freeman
 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
8th day of April 1891.

SEAL

J. M. Stone

Ordinary.

I do not certify as to witnesses
I hereby certify that the statements made
in the foregoing certificate as to the witnesses
are true and correct and my hand and official
seal this 8th day of April 1891

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, *J. M. Stone* Ordinary in and for said County of *Cobb* State of Georgia, hereby certify that I am acquainted with Mrs. *E. G. A. Fenn* 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 *Geo. J. Fenn* 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, *8th* day of *July*, 1893.

Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, County of *Cobb*

KNOW ALL MEN BY THESE PRESENTS, That I, *Mrs. E. G. A. Fenn*

County in said State, do hereby appoint of *J. M. Stone* 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 *5th* day of *July*, 1893.

Executed in the presence of us:

Geo. W. Fleming
E. G. A. Fenn

DIRECTIONS.

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

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

Form No. 2.

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. G. A. Fenn* 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 *Geo. J. Fenn* 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, *1st* day of *July*, 1894.

Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, County of *Cobb*

KNOW ALL MEN BY THESE PRESENTS, That I, *Mrs. E. G. A. Fenn*

County in said State, do hereby appoint of *J. M. Stone* 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 *1st* day of *July*, 1894.

Executed in the presence of us:

Geo. W. Fleming
E. G. A. Fenn

DIRECTIONS.

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

Geo. W. Fleming, State Printer, Atlanta.

Warrant Issued

AND HANDED TO

1893

for year ending February 15th, 1893.

Widow's Pension,

PAID TO

OF

County.

1893.

FOR THOSE HERETOFORE PAID

Geo. W. Fleming

Geo. W. Fleming, State Printer, Atlanta.

WARRANT ISSUED

1894.

PAID TO

OF

County.

for year ending February 15th, 1894.

WIDOWS' PENSION,

No. 783

1894.

FOR THOSE HERETOFORE PAID.

Geo. W. Fleming

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally comes Mrs.

E. G. A. Fenn

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

Feb'y.

1846

That she is the Widow of

Thos. J. Fenn

of the

1st

who was a Soldier in Company

Regiment of Georgia State

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

August

1864 and served in the Army up to

August

1864

That he lost his

life on the

day of August 1864 (State here

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

That while in the service of the Confederate States as above stated, at or near Atlanta Ga. in August, 1864, he was attacked with Chronic Dysentery and cold, was sent to the Hospital in Upton Co. Ga.

where he died with said disease about last of August or Sept. 1864. The undersigned, being the nurse at Hospital, Dependent 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, 1892, and now apply for the allowance provided by law for the year ending February 15th, 1893.

Sworn to and subscribed before me, this

5th day of Feb'y 1893.

Jill Fenn Ordinary.

E. G. A. Fenn

Post-office Smyrna Ga.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally comes Mrs.

E. G. A. Fenn

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

Feb'y.

1846

That she is the Widow of

Thos. J. Fenn

of the

1st

who was a Soldier in Company

Regiment of Georgia

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

August

1864 and served in the Army up to

August

1864

That he lost his

life on the

day of Sept 1864 (State here

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

That while in the Confederate Army at Atlanta, Ga. he was attacked with fever and sent to the Hospital at The Rock in Upton County Ga. and then he died of said disease in September 1864

Dependent 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

15th day of Feb'y 1894.

Jill Fenn Ordinary.

E. G. A. Fenn

Post-office Smyrna Ga.

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

Form No. 2

STATE OF GEORGIA, County of Cobb
 I, Wm. L. Stone Ordinary in and for said County of
Cobb State of Georgia, hereby certify that I am acquainted with Mrs.
E. G. A. Fann the applicant for a pension in this case, and
 know from my own knowledge (or from positive proof presented to me by reputable wit-
 nesses), that she resides in this County, and that she resided in the State of Georgia on
 December 23, 1860, and has not lived out of the State since that date. That she is the
 widow of Thos. J. Fann deceased, and as such has heretofore
 been allowed a pension for the year ending February 15th, 1864.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office,
 this, the 10 day of July, 1895.
Wm. L. Stone Ordinary.

POWER OF ATTORNEY.

Form No. 3

STATE OF GEORGIA, Cobb County.

KNOW ALL MEN BY THESE PRESENTS, That I, Thos. J. Fann

County in said State, do hereby appoint
 of Marietta 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 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
 day of July, 1895. E. G. A. Fann [L. S.]

Executed in the presence of:

Wm. L. Fleming

DIRECTIONS.

Send amount by _____ to
 me at _____, and oblige

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

Form No. 2

STATE OF GEORGIA, County of Cobb
 I, Wm. L. Stone Ordinary in and for said County of
Cobb State of Georgia, hereby certify that I am acquainted with Mrs.
E. G. A. Fann the applicant for a pension in this case, and
 know from my own knowledge (or from positive proof presented to me by reputable witnesses), that she
 resides in this County, and that she resided in the State of Georgia on December 23, 1860, and has not lived
 out of the State since that date. That she is the widow of Thos. J. Fann
 deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1865.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this
 the 10 day of July, 1895.
Wm. L. Stone Ordinary.

POWER OF ATTORNEY.

Form No. 3

STATE OF GEORGIA, Cobb County.

I, Thos. J. Fann hereby authorize Wm. L. Stone
 of Marietta Ga to receive and receipt for the pension paid hereon and request
 that he remit same to me by him 10

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
 day of July, 1895. E. G. A. Fann [L. S.]

Executed in the presence of

Wm. L. Fleming

1896.

No. 3585

WIDOW'S PENSION,

for year ending February 15th, 1896.

E. G. A. Fann

widow of Thos. J. Fann County.

WARRANT ISSUED

1896.

AND HANDLED TO

Wm. L. Fleming

Geo. W. Davidson, State Printer.

Fann, E. G. A.

Cobb Co.

FOR THOSE HERETOFORE PAID.

1895.

No. 445-

WIDOW'S PENSION.

for year ending February 15th, 1895.

E. G. A. Fann

widow of Thos. J. Fann County.

WARRANT ISSUED

24 July 1895.

AND HANDLED TO

Wm. L. Fleming

Geo. W. Davidson, State Printer.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cobb

Personally Comes Mrs.

E. G. A. Fenn

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

1846 That she is the Widow of

who was a Soldier in Company

Regiment of

5th

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

August

1864 and served in the Army up to

August

1864 That he lost his

life on the

day of Sept.

1864 (State here

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

That while in the Confederate Army in the year 1864, he contracted a disease of the bowels and also Pneumonia Fever, was sent to the hospital at "The Rock," Upson County, Ga. where he died with said disease in Sept. 1864.

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 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, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this

1st day of July 1895.

E. G. A. Fenn

Post-office

Any ma Ya

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cobb

Personally Comes Mrs.

E. G. A. Fenn

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

1846 That she is the Widow of

who was a Soldier in Company

Regiment of

5th

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

August

1864 and served in the Army up to

August

1864 That he lost his

life on the

day of Sept.

1864 (State here

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

That while in the Confederate Army near Atlanta, Ga. he contracted the Pneumonia Fever, was sent to the hospital at "The Rock," Upson County, Ga. and died there with said disease Sept. 1864.

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

10th day of July 1896.

E. G. A. Fenn

Post-office

Any ma Ya

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

STATE OF GEORGIA, County of Cherokee

Ordinary in and for said County of

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

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 Mrs. J. H. Hearn deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1896.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this
the 10th day of July, 1807.

Ordinary

POWER OF ATTORNEY.

STATE OF GEORGIA.

County

I, W. H. A. Howard hereby authorize Wm. L. Brown
of Marionette Ga. to receive and receipt for the payment paid hereon and request
that he remit same to Wm. L. Brown

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

day of July 1867 to Geo. W. Fennell

 $\frac{1}{2} \log 2$

Executed in the presence of

Exacted in the presence of

J. M. Fleming

THINOTI'S DIMENSION

for year ending February 15th, 1897.

W. E. D. A. H. H. H.

OF
[Signature]
County.

RICHARD JOHNSON,

Commissioner of Pensions

WARRANT ISSUED

1897.

HANDLED TO

W. C. W. HARRISON, STATE PRINTER, ATLANTA

POWER OF ATTORNEY.

State of Georgia

County

I, Mrs. J. E. H. H. H. hereby authorize M. J. H.
of Marquette, Mich. to receive and receipt for the pension paid hereon and request
that he remit same to me by check

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

day of July 1898

1898

Executed in the presence of

WIDOW'S PENSION,

For year ending February 15th. 1898.

PAID TO

PAID TO
Mrs. E. A. Fern

County

Wendy Xiang

RICHARD JOHNSON

Commissioner of Pensions

WARRANT ISSUED

869

AND HANDED TO

QEO W HARRISON STATE PRINTER ATLANTA

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

E. G. A. Glenn

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 1846 That she is the Widow of Thos. J. Glenn who was a Soldier in Company 1st Regiment of Vol. Volunteers, that enlisted in said regiment on or about the month of August 186 7 and served in the Army up to August 186 4 That he lost his life on the 1st day of August 186 4 (State here full particulars of the husband's death, when, where and from what cause.)

That while in the Army in 1864 he took pneumonia fever - was taken to "The Rock" Hospital Upson Co. Ga. and died of said disease Sept 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1857 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 1st day of July 1897.

Ordinary.

Post office

E. G. A. Glenn
Impressville

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

E. G. A. Glenn

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 1846 That she is the Widow of Mrs. J. Glenn who was a Soldier in Company 1st Regiment of Vol. Volunteers, that he enlisted in said regiment on or about the month of August 186 7 and served in the Army up to August 186 4 That he lost his life on the 1st day of August 186 4 (State here full particulars of the husband's death, when, where and from what cause.)

That while in the Army in Fall of 1864 he contracted pneumonia fever from which he died in Sept. 1864 at The Rock Upson County Ga.

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1857

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 4th day of July 1898.

State of Georgia,

Cobb County.

I J. M. Stone Ordinary of said County, certify that I am well acquainted with Mrs. E. G. A. Glenn 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 1846

Given under my official signature and seal this 4th day of July 1898.

Official Seal.

Ordinary of

Cobb County.

POWER OF ATTORNEY.

State of Georgia,

Cobb County.

Mrs. E. G. A. Starn hereby authorize Mr. Stone
of Marietta 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 1st

day of July 1899. E G A Starn [S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

Mrs. E. G. A. Starn hereby authorize Mr. Stone
of Marietta 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 3rd

day of July 1900. E G A Starn [L. S.]

Executed in presence of

T. J. Hamby

Mrs. E. G. A. Starn
Cobb County
For Those Heretofore Paid.

1899.

NO. 3262

WIDOW'S PENSION,

For year ending February 15th, 1899.

Mrs. E. G. A. Starn

Cobb County
Widow of Mr. E. G. A. Starn

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

2/8

PAID HAND TO

Starn

1899.

GEORGE W. JOHNSON, STATE PRINTER, ATLANTA

Mrs. E. G. A. Starn
Cobb County
To Those Heretofore Paid.

1900.

NO. 1986

WIDOW'S PENSION,

For year ending February 15th, 1900.

Mrs. E. G. A. Starn

Cobb County,
Widow of Mr. E. G. A. Starn

JNO. W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

Feb 16

AND HAND TO

Starn

1900.

GEORGE W. LINDSEY, STATE PRINTER, ATLANTA

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cobb

Personally Comes Mrs.

E. G. A. Glenn

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.

1846 That she is the Widow of

who was a soldier in Company

A. of the

Regiment of GeorgiaVolunteers, that he enlisted in said regiment on or about the month of August1862 and served in the Army up to August 1864 That he lost hislife on the Sept. day of 1864 (State here

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

That the said deceased Soldier died at the Rock Hospital in Upson Co. Ga with Pneumonia Fever in Sept. 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1854.

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, 1900.

Sworn to and subscribed before me, this

15 day of Feb. 1899.

Ordinary.

E. G. A. Glenn

Post-Office

Smymna Ga

State of Georgia,

County.

J. W. Stone

Ordinary of said County, certify that I am well acquainted

with Mrs. E. G. A. Glenn 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 Feb. 1846day of Feb. 1899.

Given under my official signature and seal this the

Ordinary of

Cobb

County.

Official
Seal.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cobb

Personally Comes Mrs.

E. G. A. Glenn

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.

1846 That she is the Widow of

who was a soldier in Company

A of the

Regiment of GeorgiaVolunteers, that he enlisted in said regiment on or about the month of August1862 and served in the Army up to August 1864 That he lost hislife on the Sept. day of 1864 (State here

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

That the said deceased Soldier died at the Rock Hospital in Upson Co. Ga with pneumonia fever in Sept. 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1854.

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

3rd day of Feb. 1900.

Ordinary.

Post-Office

E. G. A. Glenn

State of Georgia,

County.

J. W. Stone

Ordinary of said County, certify that I am well acquainted

with Mrs. E. G. A. Glenn 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

3rd day of Feb. 1846

Given under my official signature and seal, this the

3rd day of Feb. 1900.

Ordinary of

Cobb

County.

Official
Seal.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County, }
E. G. A. Gamm hereby authorize
John Lindsey of *Marietta*
 to receive and receipt for the pension paid hereon and request that he remit same to
me at *his office*

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *8*
 day of *Jan'y*, 1901. *E. G. A. Gamm* [L. S.]

Executed in presence of

Gas M. Gamm

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County, }
E. G. A. Gamm hereby authorize
John Lindsey of _____
 to receive and receipt for the pension paid hereon, and request that he remit same to
 _____ at _____

In Witness Whereof, I have hereunto set my hand and seal, this *10*
 day of *Jan*, 1902. *E. G. A. Gamm* [L. S.]

Executed in presence of

J. M. Gamm

Hevin, Elizabeth S. A.
Cobb Co.

To Those Heretofore Paid.

1901.

No. *126*

WIDOW'S PENSION,

For year ending February 15th, 1901.

PAID TO
Mrs. E. G. A. Gamm

County, *Cobb*

Widow of

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED *7*

Jan. 15 - 1901.

AND HANDED TO

John Lindsey
 Gen. W. HARRISON WILLIAMS, ALA.

Hevin, Elizabeth S. A.
Cobb Co.

To Those Heretofore Paid.

1902.

No. *226*

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO
Mrs. E. G. A. Gamm

County, *Cobb*

Widow of

Co. _____

Regiment _____

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1902

AND HANDED TO

Hevin
Oray
 GEN. W. HARRISON WILLIAMS, ALA.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

E. A. Fenn

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 Feb'y 1846. That she is the Widow of Mrs. J. Fenn who was a soldier in Company A of the 1st Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of August 1862 and served in the Army up to August 1864. That he lost his life on the day of Sept 1864. (State here

particulars of the husband's death, when, where and from what cause) That the said deceased soldier died at the Cook Hospital in Union County Ga with Pneumonia fever in Sept 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1844

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 8th day of Jan'y 1901. E. G. Fenn. John Aubrey Ordinary. Post Office

State of Georgia,

Cobb County.

John Aubrey Ordinary of said County, certify that I am well acquainted

with Mrs. E. A. Fenn 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 1846

Given under my official signature and seal, this the 8th day of Jan'y 1901.

Official Seal.

Ordinary of Cobb County.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES MRS.

E. A. Fenn

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 Feb'y 1846. That she is the Widow of Thos J Fenn who was a soldier in Company A of the 1st Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of August 1862, and served in the Army up to August 1864. That he lost his life on the day of Sept 1864. (State here

particulars of the husband's death, when, where and from what cause) That said deceased soldier died at the Cook Hospital in Union Co Ga with Pneumonia fever in Sept 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1844

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 9th day of Jan'y 1902. E. G. Fenn. John Aubrey Ordinary. Post Office Anywhere Ga

State of Georgia,

Cobb County.

John Aubrey

Ordinary of said County, certify that I am well acquainted with Mrs. E. A. Fenn 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 1846

Given under my official signature and seal, this the 9th day of Jan'y 1902.

Official Seal.

Ordinary of Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, E. G. A. Fenn, hereby authorize
John A. Fenn of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
_____ at _____

In Witness Whereof, I have hereunto set my hand and seal, this 6th
day of January 1903. E. G. A. Fenn
man [L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, E. G. A. Fenn, hereby authorize
John A. Fenn of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
_____ at _____

In Witness Whereof, I have hereunto set my hand and seal, this 8th
day of Jan. 1904. E. G. A. Fenn
man [L. S.]

Executed in presence of

1903.

No. 203

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. E. G. A. Fenn

OF

Cobb County,

Widow of Thos. J. Fenn

Co. A 1st Regiment Ga. Vol.

JOHN W. LINDSEY,

(Commissioner of Pensions)

WARRANT ISSUED

1/13 1903.

AND HANDED TO

Only

TO THOSE HERETOFORE PAID.

1904.

No. 255

WIDOW'S PENSION

FOR

YEAR ENDING DECEMBER 31, 1904

PAID TO

Mrs. E. G. A. Fenn

OF

Cobb County,

Widow of Thos. J. Fenn

Co. A 1st Regiment Ga. Vol.

JOHN W. LINDSEY,

(Commissioner of Pensions)

WARRANT ISSUED

1/13 1904.

AND HANDED TO

Only

TO THOSE HERETOFORE PAID.

ALLOWED PENSIONS

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES MRS.

E. G. A. Funn

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 February 1860. That she is the Widow of Thos. J. Funn who was a soldier in Company A of the 1st Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of August 180 2 and served in the Army up to August 180 4. That he lost his life on the day of Sept 180 4. (State here particulars of the husband's death, when, where and from what cause.)

Soldier dies at the Brook Hospital, in
Epson Co. Ky with Remontion's fever
on Sept 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 180 4

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, E. G. A. Funn
this 6 day of Jan 1903. John A. Funn
John A. Funn Ordinary. Post Office Anyona

State of Georgia,

Cobb County.

John A. Funn
Ordinary of said County, certify that I am well acquainted with Mrs. E. G. A. Funn, 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 6th day of Jan 1903.

Official
Seal.

John A. Funn
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.

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES MRS.

E. G. A. Funn

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 Thos. J. Funn 1860. That she is the Widow of Thos. J. Funn who was a soldier in Company A of the 1st Regiment of GA Volunteers, that he enlisted in said regiment on or about the month of August 180 2, and served in the Army up to August 180 4. That he lost his life on the day of Sept 180 4. (State here particulars of the husband's death, when, where and from what cause.)

Soldier dies at the Brook Hospital at the
Post in Epson Co Ky with Remontion's
fever

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 180 4

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, E. G. A. Funn
this 6th day of Jan 1904. John A. Funn
John A. Funn Ordinary. Post Office Anyona

State of Georgia,

Cobb County.

John A. Funn
Ordinary of said County, certify that I am well acquainted with Mrs. E. G. A. Funn, 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 6th day of Jan 1904.

Official
Seal.

John A. Funn
Ordinary 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.

E. A. Fenn

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 1846 That she is the Widow of Thos J. Fenn who was a soldier in Company A of the 1st Regiment of Artillery Volunteers, that he enlisted in said regiment on or about the month of August 1862, and served in the Army up to August 1864. That he lost his life on the Sept day of 1864 (State here particulars of the husband's death, when, where and from what cause.)

That he died of disease
Soldier died at the Rock Hospital

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1854

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 12 day of Jan 1905.
John A. Fenn Ordinary.

E. A. Fenn

Post-Office

State of Georgia,

County of Cobb

Ordinary of said County, certify that I am well

acquainted with Mrs. E. A. Fenn 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 12 day of Jan 1905.

Official Seal.

Ordinary of

County

NOTE.—All blank spaces must be filled.

Voucher and Affidavit must bear date after January 1st, 1905.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES MRS.

E. J. A. Fenn

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 1846 That she is the Widow of Thos J. Fenn who was a soldier in Company A of the 46th Regiment of Artillery Volunteers, that he enlisted in said regiment on or about the month of August 1862, and served in the Army up to August 1864. That he lost his life on the Sept day of 1864 (State here particulars of the husband's death, when, where and from what cause.)

Died in Hospital

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

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 17 day of Jan 1906.
John A. Fenn Ordinary.

E. J. A. Fenn
Post Office

State of Georgia,

County of Cobb

Ordinary of said County, certify that I am well

acquainted with Mrs. E. J. A. Fenn 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 17 day of Jan 1906.

Official Seal.

Ordinary of

County

NOTE.—All blank spaces must be filled.

Voucher and Affidavit must bear date after January 1st, 1906.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

hereby authorize

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

In Witness Whereof, I have hereunto set my hand and seal, this 5 day of January 1907.

Executed in presence of

Jenn. Elizabeth G.

Att. General

1907.

No. 147

WIDOW'S PENSION

For Year ending Dec. 31, 1907.

PAID TO

Mrs. E. G. A. Hume

OF

Widow of J. R. Hume

Co. A. 1st Regiment S. C. Artillery

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1907.

AND HANDED TO

John W. Lindsey, State Printer, Albany.

STATE OF GEORGIA

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of _____

PERSONALLY COMES Mrs.

Elizabeth A. Gunn

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 _____ That she is the Widow of

J. J. Gunn who was a soldier in Company
A of the State Troops Regiment of _____

Volunteers, that he enlisted in said regiment on or about the month of _____
 186____, and served in the Army up to _____ 186____. That he lost his
 life on the _____ day of _____ 18____. (State here

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

Died at The Cook Hospital

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

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 5 day of May 1907.
John H. Hixson Ordinary.

Post Office _____

State of Georgia,

Cobb

County.

Ordinary of said County, certify that I am well
 acquainted with Mrs. E. J. A. Gunn, 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 May 1894.

Given under my official signature and seal, this the 5 day of May 1907.

Official
 Seal

Ordinary of Cobb County.

NOTE.—All blanks must be filled.

Vouchers and Affidavits must bear date after January 1st, 1907.

AFFIDAVIT TO ME MADE BY THE WIDOW.

STATE OF GEORGIA,
COUNTY OF COBB.

In person came before me, the under
signed, Ordinary in and for the Coun-
ty of Cobb, Mrs. Elisabeth Georgia

A. Fenn who, being sworn according to law, says under oath that she is the widow of Thomas J. Fenn, who was a soldier in the service of the Confederate States, and served as a member of Company "A" of the 1st Regiment of State Troops Volunteers; that he enlisted in said service on or about the 1st day of August 1862, and was in the army up to the 1st of September 1864. That while in the Army, he was on the ---day of August 1864. (See note No.1)-- Thomas J. Fenn died September 1st 1864 at Rock Hospital in Upson County Ga., of pneumonia caused from exposure in the army. He was ~~active~~ service in the trenches near Atlanta during the months of July and August 1864, and while there was attacked with pneumonia fever, was taken to the Hospital and finally moved to a Hospital, Rock Hospital, Upson Coun- ty Ga., where he died 1st of September 1864.

Deponent further swears that she was the wife of the 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 24th day of September 1864, and that she has resided in Georgia continuously since the 15th day of May 1847, that Georgia is her home, and was such on the 23rd day of December 1890, and since that 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 23rd. 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,) Signed,
the 8th day of April 1891.)
Signed, J. M. Stone, Ordinary) Elisabeth G. A. Fenn.

Note 1

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

1891.
NO 271.

WIDOWS' PENSION?
---paid to---
Mrs. E. G. A. Fenn,
of
Cobb County

\$100.00.

WARRANT ISSUED
.....1891.
And handed To

F. O.
Vining Station, Ga.

AFFIDAVIT FOR THREE WITNESSES.

STATE OF GEORGIA,

County of Fulton

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

County, witnesses J.W Hall, J.T Hall, Sarah J. Hall, and Albert Howell (each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say under oath, that from their own personal knowledge, Mrs. Elisabeth Georgia A Penn, of the County of Cobb, State of Georgia, is the widow of Thomas J. Penn, who was a soldier in Company "A" of the 1st Regiment of State Troops Volunteers. That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the 1st day of August 1862. That while in said service, or by reason of said service in the Army, he lost his life as follows-- Died of pneumonia at Rock Hospital Upon County Georgia, in the year 1864. Said disease contracted by him in August while on Hood's retreat from Atlanta to Jonesboro having been taken from the weather and carried to the Hospital at that place.

Said witness Albert Howell swears to all herein, except the marriage: that she is his widow and not re-married.

We further swear that Mrs. Elisabeth Georgia Ann Penn 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 8th day of April 1891.

(Signed) W.L Calhoun, Ordinary.

Signed, J.W Hall
" J. T Hall
" S.J Hall
" Albert Howell

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

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. Elisabeth G.A Penn 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 23rd. 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 8th day of April 1891.

Signed, J.M Stone, Ordinary.

Seal

I do not certify as to witnesses
J.M Stone, Ordinary

I hereby certify that the statements made in the foregoing certificate as to the witnesses are true.
Given under my hand and Official seal this, April 10th 1891.

signed, W.L Calhoun, (Seal)
Ordinary of Fulton County

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 an-

answer.

Fill out Power of Attorney authorizing some one who can call at the 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

Geo. W. Lindsey,
Commissioner of Pensions.
Atlanta, Ga.

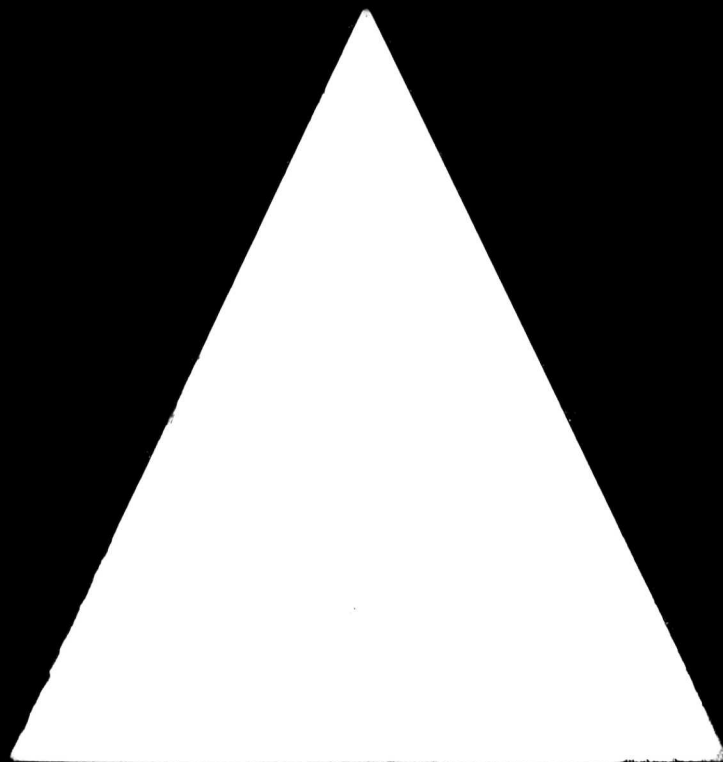
pension Office,
Feb., 25th 1914.

Georgia Fulton County.

I, J. W. Lindsey, Commissioner of Pension of the State of Georgia, do certify that there is no Official seal, and no way to authenticate the records and files of this Office, except by his Official Signature, and that the seven foregoing pages, with the backing thereon, contain a true and exact copy of the original pension application made by Mrs. E.O.A. Fennel of the County of Cobb, together with the testimony attached thereto, upon which she was allowed the Widows' Pension as provided by law to be paid by the State of Georgia for the year 1891 up to the year 1910 when she went to the State of Alabama to reside.

Witness my hand and Official signature
this, the 25th day of Feb. 1914.

J. W. Lindsey
Commissioner Of Pensions.



POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I,

herby authorize

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

at

by

Witness my hand and seal this

day of

1897.

Executed in presence of

Pension Office 7/11/1897

Supremacy as stated by the
Physicians does not indicate
that applicant is unable to
support himself -

Richard Johnson
Comptroller

INDIGENT PENSION

1897.

Name

R. P. Fisher

County

Pobb

Approved

1897.

WARRANT HANDED TO

Geo. W. Hammond, STATE PRINTER, ATLANTA.

67 Fisher, R. P.
Cobb County

10/8/97

3/16/97

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

1897.

Executed in presence of

Presum. Officer 11/11/1897
Infirmity as stated by the
physician does not interfere
with applicant's inability to
support himself -
R. P. Fisher
Camp Prison

INDIGENT PENSION

1897.

Name

R. P. Fisher

County

Cobb

Approved

1897.

WARRANT HANDLED TO

W. W. HARRISON, STATE PRINTER, GEORGIA.

16/16/97

16/9/97

STATE OF GEORGIA,

County.

R. P. Fisher 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)
R. P. Fisher Marietta Cobb Co Ga
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State?
Marietta Cobb Co Ga since March 1893
3. When and where were you born?
April 1st 1835 Cobb Co Ga
4. When and where and in what company and regiment did you enlist or serve?
April 1st 1863 15th Regt Ala Cavalry 1863
5. How long did you remain in such company and regiment?
until the end of the war
6. For how long a period did you discharge regular military duty?
1863-1865
7. When, where and under what circumstances were you discharged from service?
discharged at the end of the war 1865
8. What is your present occupation?
Farmer
9. How much can you earn (gross) per annum by your own exertions or labor?
1000
10. What has been your occupation since 1865?
Farming
11. Upon which of the following grounds do you base your application for pension, viz: first "age and poverty," second "infirmity and poverty" or third "blindness and poverty"?
Age and poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight?
After war for the last 3 years no 63 years old and no longer able to work
13. What property, effects or income do you possess and its gross value?
nothing
14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any, did you make of same?
none
15. In what County did you reside during those years and what property did you then return for taxation?
Cobb County the property returned
16. How were you supported during the years 1895 and 1896?
by the State
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income?
nothing
18. What was your employment during 1895 and 1896? What pay did you receive in each year?
nothing
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead?
yes 1 wife 2 sons 1 daughter
20. Are you receiving any pension, if so, what amount and for what disability?
no

Sworn to and subscribed before me this the

day of

March 1897.)

J. H. Ponder

Ordinary

R. P. Fisher

Applicant.

of

Cobb

County.

Every Question MUST be Answered

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.

~~Witness of said~~
Greene has } I James H. McWhorter ordinary
is and for said County hereby
certify that the witness V. L. Fisher is of
trustworthy character and that his statements
are entitled to full faith and credit
I further certify that before answering
the foregoing questions the witness
took the oath herein prescribed and that
the full text of the affidavits was read
to the witness before same was signed

Witness my hand and seal of office
this the 17th day of February 1897

James H. McWhorter ordinary
of Greene County

POWER OF ATTORNEY.

STATE OF GEORGIA

I, R. P. Fisher of Cobb County, hereby authorize J. M. Thom of Marionetta Ga.

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

by me by him

Witness my hand and seal this 17 day of July 1899.

Executed in presence of

R. P. Fisher (L. S.)

POWER OF ATTORNEY.

STATE OF GEORGIA.

I, R. P. Fisher of Cobb County, hereby authorize J. M. Thom of Marionetta Ma.

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

by him

Witness my hand and seal, this 29 day of Jan 1900.

Executed in presence of

R. P. Fisher [L. S.]

(For These Already Enrolled)

No. 3047

INDIGENT

SOLDIER'S PENSION,

1899.

Name R. P. Fisher
County Cobb

WARRANT ISSUED

724 1899

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDLED TO

J. M. Thom

Geo. W. Harrison, State Printer, Atlanta.

No data

R. P. Fisher, R. P.

Cobb Co.

CODE SEC. 1284.

(For These Already Enrolled.)

No. 4327

INDIGENT

SOLDIER'S PENSION,

1900.

Name R. P. Fisher
County Cobb

WARRANT ISSUED

7th 1900.

JOHN. W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

him

Geo. W. Harrison, State Printer, Atlanta.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Personally appears R.P. Fisher 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 County and State, and has resided in said State continuously ever since the 5th day of Novr 1834; that he is 64 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 2 yrs in 4th Battery Lumpkin's Artillery; that his physical condition is as follows: And 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 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 1899. I have heretofore as a resident of Cobb county been allowed a pension for the year 189

Sworn to and subscribed before me, this, the

17th day of July 1899.

Ordinary

R.P. Fisher
Ponder Springs

State of Georgia,

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

Given under my official signature and seal, this 17th day of July 1899.

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,

Personally appears R.P. Fisher 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 County and State, and has resided in said State continuously ever since the 5th day of Novr 1834; 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 2 years in 4th Battery Lumpkin's 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 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 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

R.P. Fisher

State of Georgia,

I, J.W. Stoue Ordinary of said County, do certify that I am well acquainted with R.P. Fisher the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, R. P. Fisher hereby authorize John Lindsey
of Marietta

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

by ch me at Bowdoin Springs

Witness my hand and seal, this 14th day of January 1901.
R. P. Fisher [L. S.]

Executed in presence of

Jas M Gam

Fisher, R. P.
Cobb Co

CODE SECTION 174
(For These Already Enrolled.)

No. 212

To Jan 1901
INDIGENT

SOLDIER'S PENSION.
1901.

Name R. P. Fisher
County Cobb

WARRANT ISSUED
Jan 15 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Lindsey
Geo. W. Harrison, State Printer, Atlanta

no data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears *R P Fisher* 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 *5* day of *Nov* 18 *82*; that he is *46* 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 *2 years* in company *B*, of *12th* Regiment of *Georgia* *Artillery*; that his physical condition is as follows: *On account of decay 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 *14* day of *January* 1901. *R P Fisher*
John Awtrey Ordinary.

STATE OF GEORGIA,

Cobb County.

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

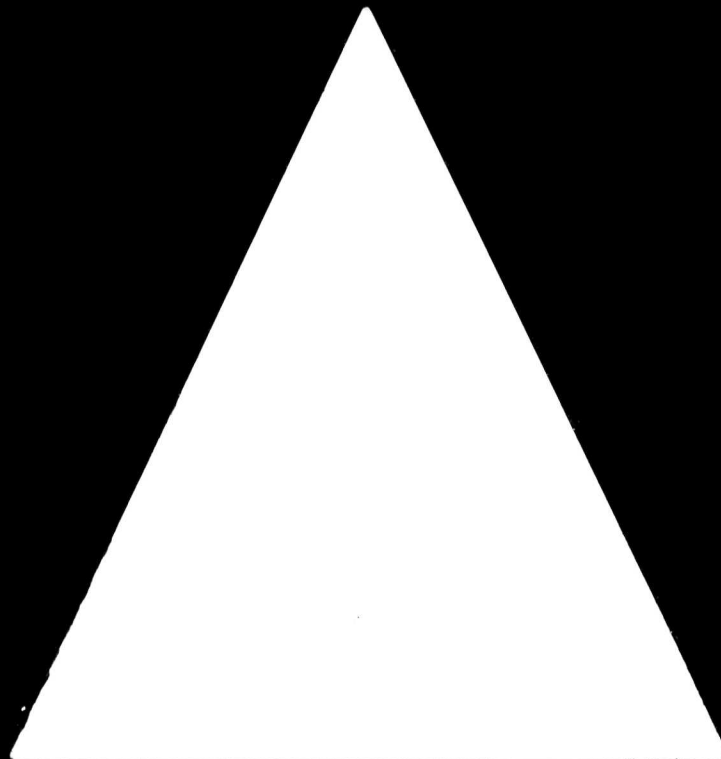
Given under my official signature and seal, this *14* day of *January* 1901.



John Awtrey
Ordinary County.

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

N o r s . — The blank spaces must be filled.
N o r s . — Affidavit should not be accepted before January 1st, 1901.
JANUARY 1st, 1901



STATE OF GEORGIA,

Book County, South Carolina

Courtesy, in said State, do hereby appoint William 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 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
9th day of April 1891

Executed in the presence of us :
W. A. H. K. *M. A. K.*
 [L. s.]

Executed in the presence of us:
Wm. C. Brown
Wm. Stone Ordway

If allowed, send amount by _____, and oblige.

Come at _____ to _____



Flin Sarah
Colb County
1891.

No. 1258

Widows' Pension

—PAID TO—

Mrs. Sarah Flin
 —OF—
 Cobb COUNTY.

\$100.00.

Warrant Issued

1891

AND HANDED TO

Geo. W. Harrison, State Printer Atlanta

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA.

Know all Men by these Presents, That I, *John* County, *Cobb*

County, in said State, do hereby appoint *William Flier*

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 *7th* day of *April*, 1891.

Executed in the presence of us:

Wm. Brown
Wm. Stone Ordinary

If allowed, send amount by

me at

, and oblige,

to



Widow's Pension

PAID TO

William Flier

1000 COUNTY.

\$1000.00.

Warrant Issued

AND HANDLED TO

1891

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA.

In person came before me, the undersigned Ordinary

County of *Cobb*

in and for the County of *Cobb*

Mrs. *Sarah Flier*, who being sworn according to law, says under oath that she is the widow of *Thomas M. Flier*, who was a soldier in the service of the Confederate States, and served as a member of Company *A* of the

46th Regiment of Volunteers; that he enlisted in said service on or about the *10* day of *Sept*, 1863, and was in the Army up to *30th* day of *July*, 1864. That while in the Army, he was on the *10* day of *Sept*, 1864. (See Note No. 1)

On or about the first of June 1864 he taken measles and was sent to the Hospital at Madison Ga. He remained in the Hospital at Madison till July 30, 1864. When he died from said sickness on the 30th day of July 1864. I was the Relaps of Measles and that said Measles 1000 contracted while in the Army.

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 *10* day of *March*, 1864, and that she has resided in Georgia continuously since the day of *March*, 1864; that Georgia is her home, and was such on the 23d day of December, 1890, and since said date she has not lived in any other State or locality. Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February 15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this, *10* day of *Sept*, 1891.

Wm. Stone Ordinary.

Sarah Flier mark

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

John
Cobb County
10th 1891.

10th

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 *J. A. Arrington*
Mary E. Arrington

(each known to said Attesting Officer as truthful,

reliable and reputable citizens) who severally say under oath, that, from their own personal knowledge,

Mrs. *Sarah H. H. H.* of the County of *Cobb*

State of Georgia, is the widow of *Thomas H. H.*, who was a soldier in

Company *1st* of the *1st* Regiment of *Volunteers*.

That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or

about the *10* day of *Sept* 1863

That while in said service, or by

reason of said service in the Army, he lost his life as follows:

*He was carried
to Hospital at Madison
Ga. and remained
there till early 1864 at
which time he died from
the effects of said illness*

We further swear that Mrs. *Sarah H. H.* 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

17th day of *April* 1891.

J. W. Stone
Ordinary.

John A. Arrington
George Arrington
Mary E. Arrington
mak

Form No. 3.

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

STATE OF GEORGIA,

County of *Cobb*

I, *J. W. Stone* Ordinary

in and for said County of *Cobb*

State of Georgia, hereby certify that I am acquainted with Mrs. *Sarah H. H.*

the applicant for a pension in this case, and know, from my own knowledge, or from positive proof

presented to me by reputable witnesses, that she resides in this County, and that she resided in the

State of Georgia on December 23d, 1890, and has not lived out of the State since that date. I also

certify that the witnesses whose testimony she presents to sustain her claim are known to me to be

truthful witnesses, entitled to full faith and credit as such. I am fully satisfied that this claim is made in

good faith, and that I have caused the applicant and the witnesses to read or hear read the proofs they sign.

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

17th day of *April* 1891.

J. W. Stone
SEAL

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. 8.

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. *Sarah Ellen* 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 *Mrs. M. Allen* 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, *3rd* day of *Jan*, 1893.

Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, County of Cobb

KNOW ALL MEN BY THESE PRESENTS, That I, *Sarah Ellen* of *Cobb* County, in said State do hereby appoint *J. M. Stone* 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 *3d* day of *Jan*, 1893.

Executed in the presence of us:

M. H. Hallenstid
W. B. Hallenstid
W. B. Hallenstid

DIRECTIONS.

Send amount by *W. B. Hallenstid* to me at *W. B. Hallenstid* and oblige *Sarah Ellen*

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

Form No. 8.

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. *Sarah Ellen* 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 *Mrs. M. Allen* 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 *10th* day of *Jan*, 1894.

Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, County of Cobb

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

In WITNESS WHEREOF, I have hereunto set my hand and seal, this *10th* day of *Jan*, 1894.

Executed in the presence of us:

J. M. Fleming
W. B. Hallenstid

DIRECTIONS.

Send amount by *W. B. Hallenstid* to me at *W. B. Hallenstid*, and oblige *Sarah Ellen*

FOR THESE HERETOFORE PAID.

1894.

No. 784

WIDOWS' PENSION,

for year ending February 15th, 1894.

PAID TO *Mrs. Sarah Ellen*

OF *Cobb* COUNTY.

WARRANT ISSUED

713 1894.

AND NAMED *J. M. Stone*

OF *Cobb* COUNTY.

FOR THESE HERETOFORE PAID.

1893.

No. 736

WIDOWS' PENSION,

for year ending February 15th, 1893.

PAID TO *Mrs. Sarah Ellen*

OF *Cobb* COUNTY.

Warrant Issued

76 1893

AND HANDED TO *J. M. Stone*

OF *Cobb* COUNTY.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally comes Mrs.

Sarah Flin

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

1864 That she is the Widow of

Thos. M. Flin

who was a Soldier in Company

of the 42^d Regiment of

Georgia

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

September

1862 and served in the Army up to

1864 That he lost his

life on the 3^d day of July

1864 (State here

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

That the said deceased Soldier served in the Army as above stated and while in said service at Madison Ga. was attacked with a brown fever and died on the 3^d day of July 1864

Said deceased Soldier was a private in the 42^d Regiment of Georgia Volunteers and was killed in the battle of Atlanta on the 22^d day of July 1864. The said deceased Soldier was a native of Georgia and was a member of the Georgia Militia. The 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, 1892, and now apply for the allowance provided by law for the year ending February 15th, 1893.

Sworn to and subscribed before me, this

13th day of July, 1893.

x Sarah Flin

Post-office Acworth Ga.

M. Hallinshead Ordinary.

Notary Public and official

Justice of the Peace for the County of Cobb

Sworn to and subscribed before me

the 32^d day of July 1893. M. Starn

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally comes Mrs.

Sarah Flin

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

October 1864 That she is the Widow of

Thos. M. Flin

who was a Soldier in Company

of the 42^d Regiment of

Georgia

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

Sept.

1862 and served in the Army up to

1864 That he lost his

life on the 3^d day of July

1864 (State here

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

That while in the Confederate Army in the State of Georgia, he contracted measles and chronic bronchitis in June 1864 and was sent to Black's Hospital at Milledgeville Ga. at which place he died with lung disease on 3^d day of July 1864. Deponent swears that she was the wife of said deceased soldier during his service in the

army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 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

10th day of July, 1894.

M. Starn Ordinary.

Sarah Flin

Post-office Acworth Ga.

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

Form No. 2.

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. Sarah F. Lin, 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 Thos. M. Lin deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1894.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 23rd day of May, 1895.

Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

KNOW ALL MEN BY THESE PRESENTS, That I, Sarah F. Lin

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

In Witness Whereof, I have hereunto set my hand and seal, this 23rd day of May, 1895.

Executed in the presence of us:

W. L. M. Stone

DIRECTIONS.

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

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

Form No. 2.

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. Sarah F. Lin, 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 Thos. M. Lin 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 24th day of May, 1896.

Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

I, Sarah F. Lin hereby authorize J. M. Stone of Minetta Ya to receive and receipt for the pension paid person and request that he remit same to me by him

In Witness Whereof, I have hereunto set my hand and seal, this 29th day of May, 1896.

Executed in the presence of

G. M. Fleming

Form No. 2.

1895.

No. 446

WIDOW'S PENSION

for year ending February 15th, 1895.

PAID TO Sarah F. Lin

WIDOW'S PENSION

WARRANT ISSUED

AND HANDS TO

1895.

No. 3576

WIDOW'S PENSION

for year ending February 15th, 1895.

PAID TO Sarah F. Lin

WIDOW'S PENSION

WARRANT ISSUED

AND HANDS TO

1895.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

Sarah Flin

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 Oct 1864 That she is the Widow of

Thos. M. Flin who was a Soldier in Company 42nd of the Yaz Regiment of

Volunteers, that he enlisted in said Regiment on or about the month of Sept 1864 and served in the Army up to July 1864 That he lost his life on the 3rd day of July 1864 (State here

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

That while in the Confederate Army in 1864 he contracted Measles - was sent to Hospital at Madison Ga and died there of said disease on the 3rd day of July 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 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, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this

17th day of Jan 1895.

J. B. Smith Ordinary.

Sarah Flin

Post-office Kennesaw Ga

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

Sarah Flin

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 Oct 1864 That she is the Widow of

Thos. M. Flin who was a Soldier in Company 42nd of the Yaz Regiment of

Volunteers, that he enlisted in said regiment on or about the month of Sept 1864 and served in the Army up to July 1864 That he lost his life on the 3rd day of July 1864 (State here

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

That while in the Confederate Army, he contracted the measles with which disease he died on the 3rd day of July 1864.

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

17th day of Jan 1896.

J. B. Smith Ordinary.

by Sarah Flin + Sarah Flin Post-office Kennesaw Ga

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

Form No. 2.

STATE OF GEORGIA, County of Cobb

I, Sarah Hlin Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. Sarah Hlin 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 Thos M. Hlin deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1899.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this 10th day of July 1897.

Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA.

I, Sarah Hlin County of Cobb hereby authorize Minetta Hlin to receive and receipt for the pension and hereon and request that he remit same to me by him

In Witness Whereof, I have hereunto set my hand and seal, this 14th day of July 1897. Sarah Hlin

Executed in the presence of

G. M. Hlin

Form No. 2.

POWER OF ATTORNEY.

State of Georgia, Cobb County.

I, Sarah Hlin hereby authorize Minetta Hlin to receive and receipt for the pension and hereon and request that he remit same to me by him

In Witness Whereof, I have hereunto set my hand and seal, this 14th day of July 1898.

Executed in the presence of

Sarah Hlin

STATE OF GEORGIA.

I, Sarah Hlin County of Cobb hereby authorize Minetta Hlin to receive and receipt for the pension and hereon and request that he remit same to me by him

In Witness Whereof, I have hereunto set my hand and seal, this 14th day of July 1897. Sarah Hlin

Executed in the presence of

G. M. Hlin

WARRANT ISSUED
AND HANDLED TO
1897.

RICHARD JOHNSON,
Commissioner of Pensions.

PAID TO
Widow of Sarah Hlin
County of Cobb

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

No. 3649
1897.

FOR THOSE HERETOFORE PAID
Sarah Hlin
County of Cobb

Hlin Sarah
County of Cobb

For Those Heretofore Paid.

1898.
NO. 37406

WIDOW'S PENSION,
For year ending February 15th, 1898.

PAID TO
Sarah Hlin

County of Cobb
Widow of Thos M. Hlin

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED
July 8
AND HANDLED TO
1898.

W. W. MARRISON, STATE PRINTER, ATLANTA.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

Sarah Flinn

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

1864 That she is the Widow of

who was a Soldier in Company

of the 42nd Regiment of

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

1864 and served in the Army up to

life on the 3rd day of July

1864 That he lost his

life on the 3rd day of July

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

That by relapse of measles he was sent to Madison Hospital, Madison Ga. from which disease he died on July 3rd 1864.

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier,

and that she has never married since his death aforesaid, that she became his wife in the year 1854

that Georgia is her home and she resided in this State 23d day of December, 1890, and has not

lived in any other State or locality since that date. I have been allowed a pension as a resident of

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

10th day of July 1897.

Ordinary.

Post-office

Sarah Flinn
October P.O.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

Sarah Flinn

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

1864 That she is the Widow of

A Thos. M. Flinn who was a Soldier in Company

of the 42nd Regiment of

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

1864 and served in the Army up to

life on the 3rd day of July

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

That he contracted the measles in summer 1864 which resulted in chronic diarrhoea from which he died on July 3/64

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1854

I have been allowed a pension as a resident of 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 7th day of July 1898.

State of Georgia, Cobb County.

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

Given under my official signature and seal this the 7th day of July 1898.

Official Seal.

Ordinary of Cobb County.

POWER OF ATTORNEY.

State of Georgia.

Cobb County.

I, Sarah Flin hereby authorize

of Marietta 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

day of July 1899.

Sarah Flin [L. S.]

Executed in presence of

mk

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb County.

I, Sarah Flin hereby authorize

of Marietta 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

day of July 1900.

Sarah Flin [L. S.]

Executed in presence of

T. J. Hamby

Flin, Sarah
Cobb County
For Those Heretofore Paid

1899.

NO 2763

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAID TO

Mrs Sarah Flin

County

Cobb
Marietta Ga.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

7/8

PAID TO

mk

GEORGE W. HARRISON, STATE PRINTER, ATLANTA

Flin, Sarah (ms)

Cobb County

TO THOSE HERETOFORE PAID.

1900.

NO. 1267

WIDOW'S PENSION,

For year ending February 15th, 1900.

PAID TO

Mrs Sarah Flin

or

Cobb

County,

Marietta Ga.

JNO. W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

July 16

AND PAID TO

mk

NO. W. HARRISON, STATE PRINTER, ATLANTA

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

Sarah Thlin

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.

October18 64 That she is the Widow ofThomas W. Thlin

who was a soldier in Company

A. of the 42ndRegiment of GeorgiaVolunteers, that he enlisted in said regiment on or about the month of September1862 and served in the Army up toJuly1864 That he lost hislife on the 23rdday of July1864 (State here

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

That the deceased husband
died on the 23rd day of July
1864 in the hospital at
Madison Ga. of Chronic
Diarrhoea

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 1854I 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, 1900.

Sworn to and subscribed before me, this

day of July, 1899,

Ordinary.

Sarah Thlin

Post-Office

Tennesseaw Ga

State of Georgia,

County, CobbI J. W. Stone

Ordinary of said County, certify that I am well acquainted

with Mrs. Sarah Thlin

who made the above affidavit and am satisfied

that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she

has continuously resided in this State since the

day of October, 1864

Given under my official signature and seal this the

day of July, 1899.{ Official
Seal }

Ordinary of

Cobb

County.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

Sarah Thlin

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.

October18 64 That she is the Widow ofThomas W. Thlin

who was a soldier in Company

A. of the 42ndRegiment of GeorgiaVolunteers, that he enlisted in said regiment on or about the month of September1862 and served in the Army up toJuly1864 That he lost hislife on the 23rdday of July1864 (State here

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

That the deceased husband died
on the 23rd day of July 1864 in the
hospital at Madison Ga. of
chronic diarrhoea

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 1854I 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

day of July, 1900.

Ordinary.

Sarah Thlin

Post-Office

State of Georgia,

County, CobbI J. W. Stone

Ordinary of said County, certify that I am well acquainted

with Mrs. Sarah Thlin

who made the above affidavit and am satisfied

that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she

has continuously resided in this State since the

day of Oct, 1864

Given under my official signature and seal, this the

day of July, 1900.{ Official
Seal }

Ordinary of

Cobb

County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Colt County.

I, *Sarah Flinn*, hereby authorize
John A. Flinn of *Maricetta* *Colt*
to receive and receipt for the pension paid hereon and request that he remit same to
hand at *Maricetta*

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of *3rd* 1901.

Sarah Flinn [L. S.]

Executed in presence of

James M. Gann

POWER OF ATTORNEY.

STATE OF GEORGIA,

Colt County.

I, *Sarah Flinn*, hereby authorize
John A. Flinn of *Maricetta*, Ga.
to receive and receipt for the pension paid hereon, and request that he remit same to
my hand at *Maricetta*, Ga.

In Witness Whereof, I have hereunto set my hand and seal, this *1st*
day of *Jan* 1902.

Mrs Sarah Flinn [L. S.]

Executed in presence of

J. M. Gann

Flinn, Sarah
W. C. Flinn
To Those Heretofore Paid.

1901.

No. *128*

WIDOW'S PENSION,

For year ending February 15th, 1901.

Mrs Sarah Flinn

of *Colt* County.

Widow of

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

Jan 15 1901,

AND HANDLED TO

Gutney

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

Flinn, Sarah
Colt County
To Those Heretofore Paid.

1902.

No. *227*

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

Mrs Sarah Flinn

of *Colt* County.

Widow of

Co. *Regiment*

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

File 1902

AND HANDLED TO

Ord

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

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

Sarah Almon

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 October 1864. That she is the Widow of Thomas M. Almon who was a soldier in Company A of the 42nd Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of September 1862 and served in the Army up to July 1864. That he lost his life on the 23rd day of July 1864. (State here

particulars of the husband's death, when, where and from what cause) That the deceased husband died on the 23rd day of July 1864 in the hospital at Madison Ga of Chronic Diarrhea

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death, aforesaid, and that she became his wife in the year 1854

I have been allowed a pension as a resident of Cobb County for the year ending February 15th, 1902, and now apply for the pension provided by law for the year ending February 15th, 1901.

Sworn to and subscribed before me, this 3rd day of January 1901. Mrs. Sarah Almon Ordinary. Post Office Kennesaw

State of Georgia,

Cobb County. I, John Awtry Ordinary of said County, certify that I am well acquainted with Mrs. Sarah Almon, 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 3rd day of January 1901.

Given under my official signature and seal, this the 3rd day of January 1901.

Official
Seal.

Ordinary of Cobb County.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES MRS.

Sarah Almon

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 October 1864. That she is the Widow of Thomas M. Almon who was a soldier in Company A of the 42nd Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of September 1862, and served in the Army up to July 1864. That he lost his life on the 23rd day of July 1864. (State here

particulars of the husband's death, when, where and from what cause) That the deceased husband died on the 23rd day of July 1864 in the hospital at Madison Ga. of Chronic Diarrhea.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1854

I have been paid a pension as a resident of 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 2nd day of January 1902. Mrs. Sarah Almon Ordinary. Post Office Kennesaw, Ga

State of Georgia,

Cobb County. I, John Awtry Ordinary of said County, certify that I am well acquainted with Mrs. Sarah Almon, 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 3rd day of January 1901.

Given under my official signature and seal, this the 2nd day of January 1902.

Official
Seal.

Ordinary of Cobb County.

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

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

at

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

day of _____ 1903.

sarah, Fline [L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY. }

I, *Sarah Fline* hereby authorize

of

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

at

In Witness Whereof, I have hereunto set my hand and seal, this *18th* day of *January* 1904.

Executed in presence of

sarah Fline [L. S.]

Fline, Sarah
Cobb County
To Those Heretofore Paid

1903.

No. *204*

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. Sarah Fline
Cobb County, Georgia

Widow of

Co. _____ Regiment _____

JOHN W. LINDSEY,

(Commissioner of Pensions)

WARRANT ISSUED

1903.

1/23

AND HANDED TO

body

Fline, Sarah
Cobb County
TO THOSE HERETOFORE PAID.

1904.

No. *217*

WIDOW'S PENSION

FOR

YEAR ENDING DECEMBER 31, 1904.

PAID TO

Mrs. Sarah Fline
Cobb County, Georgia

Widow of *John W. Lindsey*

Co. *A* Regiment *42*

JOHN W. LINDSEY,

(Commissioner of Pensions)

WARRANT ISSUED

1904.

1/25

AND HANDED TO

body
Geo. W. Harrison, State Printer, Alabama.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA

PERSONALLY COMES MRS.

County of Cobb

Sarah Flinn

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 1864. That she is the Widow of Thomas M. Flinn who was a soldier in Company A of the 42 Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of September 1862, and served in the Army up to July 1864. That he lost his life on the 23 day of July 1864. (State here particulars of the husband's death, when, where and from what cause.)

That the deceased husband died on 23 day of July 1864 in the Hospital at Macon Ga of Chronic Dysentery

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 1874

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 18 day of July 1903. Sarah Flinn Ordinary. Post-Office Kennesaw

State of Georgia

County of Cobb

I, John H. Harty Ordinary of said County, certify that I am well acquainted with Mrs. Sarah Flinn, 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 18 day of July 1903.

Official Seal.

Ordinary 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.

Form No. 1.

STATE OF GEORGIA

PERSONALLY COMES MRS.

County of Cobb

Sarah Flinn

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 Oct 1864. That she is the Widow of Thomas M. Flinn who was a soldier in Company A of the 42 Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of September 1862, and served in the Army up to 33 July 1864. That he lost his life on the 23 day of July 1864. (State here particulars of the husband's death, when, where and from what cause.)

That the deceased husband died on the 23 day of July 1864 in the Hospital at Macon Ga of Chronic Dysentery

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 1874

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, 1904.

Sworn to and subscribed before me, this 18 day of July 1904. Sarah Flinn Ordinary. Post-Office Kennesaw

State of Georgia

County of Cobb

I, John H. Harty Ordinary of said County, certify that I am well acquainted with Mrs. Sarah Flinn, 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 May years

Given under my official signature and seal, this the 18 day of July 1904.

Official Seal.

Ordinary of Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

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

In Witness Whereof, I have hereunto set my hand and seal, this 15
day of January, 1905.

Sarah Ellen [L. S.]
Executed in presence of
J. M. [unclear]

Sarah Ellen
Cobb County
To Those Hereafter Paid.

1905.
No. 377

WIDOW'S PENSION,
For year ending Dec. 31, 1905.

PAID TO
Mrs. Sarah Ellen
OF
Cobb County,

Widow of _____
Co. _____ Regiment _____

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED 1/13 1905

AND HANDED TO [Signature]

This warrant is valid only when presented to the proper authorities for the purpose of receiving the pension.

FOR WIDOWS HEREAFTER ALLOWED PENSIONS

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES MRS.

Sarah M. Fillion

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 October 1864. That she is the Widow of
Thos M Fillion who was a soldier in Company
A of the 42 Regiment of Ca

Volunteers, that he enlisted in said regiment on or about the month of
186 4, and served in the Army up to July 1864. That he lost his
life on the day of July 1864. (State here
particulars of the husband's death, when, where and from what cause.)

Died in Hospital at Madison Ga

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
soldier, and that she has never married since his death aforesaid, and that she became his wife in
the year 18 54

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 15 day of July 1905.
John M. Heston Ordinary.

Post-Office Summit

State of Georgia,

County, CobbI, John Heston

Ordinary of said County, certify that I am well

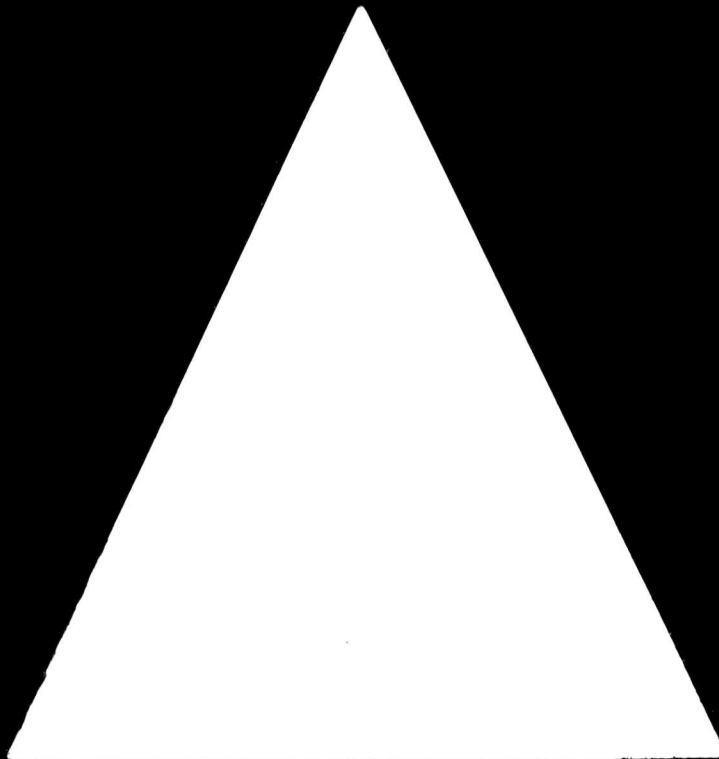
acquainted with Mrs. Sarah M. Fillion, Who made the above affidavit and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
herself to be, and that she has continuously resided in this State since the
day of 18

Given under my official signature and seal, this the 15 day of July 1905.

Official
Seal.Ordinary of Cobb County.

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

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



NOTES.

1. In order to avoid unnecessary delays to applicants, and to enable all parties interested to understand the laws granting allowances to disabled soldiers, as well as the rules adopted by the Governor touching the payments provided, the following suggestions are submitted :
2. 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 *cause of disability*. If applicant claims disability from disease contracted in the service, a full and careful *medical* and *sanitary* history of the disease should be given, tracing the disability by positive proofs to the present time.
3. The law makes no allowance for an arm or leg, unless the arm or leg has been rendered *substantially and essentially useless*.
4. 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 to any of the ordinary pursuits of life."
5. If the papers are returned for correction and amendments are *added* to any of the affidavits, the amendments must be made *under oath* before an officer, and the proofs must show that the amendments have been duly sworn to.
6. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.
7. The Ordinaries of the several counties are specially requested to call the attention of the physicians and applicants to these points.
8. No payments can be made for any past year.

W. H. HARRISON,
Chas. E. Dupl.

Florence, B. W.
Cott Co
Florence, W. B.
1890.

No. *2709*
APPLICATION FOR ALLOWANCE

FOR
Disabled Arm
 Applicant, *R. N. Harmon*
 County, *Wabash*
 Amount, *50*
 Date of Warrant, *Apr 7*

Entered on record
Apr 7 1890
W. N. Harmon
 SECRETARY REVOLUTE DEPARTMENT.

WARRANT HANDED TO
R. C. Irvine
 W. J. Campbell, State Printer, Constitution Job Office, Atlanta.

STATE OF GEORGIA,

County.

PERSONALLY came

citizens of _____ county, in said State,
 who being duly sworn, say that they are well acquainted with
 and know, from having been with him in the army, 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 disabled applicant, as
 stated by him; the said applicant is a bona fide citizen of this State, and resides in
 _____ county, and we are well satisfied that all the
 statements in his affidavit are true.

Sworn to and subscribed before me, this _____
 day of _____ 1890.

NOTE. Above affidavit must be made by three citizens who personally know of the service of applicant and can state of their
 own knowledge precisely how he is disabled, and what disabled him.
 NOTE 2. The attesting officer must see that each witness reads, or has read to him the affidavit he signs.

STATE OF GEORGIA,

County.

PERSONALLY comes before me _____ Ordinary of said county,
 _____ and _____ both known to
 me as reputable physicians of said county, who, being severally sworn, say on oath that
 they have carefully examined _____ and after such
 examination say that the applicant has been injured as follows: *He was shot
 through left arm just above the elbow the
 bones were crushed, the entire muscles were
 torn away and destroyed, parts of the bones
 came out, the arm was drawn crooked
 and rendered stiff, the skin has grown
 to the bone, the arm has largely
 atrophied, the muscles are entirely destroyed
 there is practically no use and
 is substantially and essentially
 useless.*

Sworn to and subscribed before me, this _____
 day of _____ 1890.

ORDINARY.

NOTE. The physicians will state fully the extent of the wound, and then give facts to show the extent of the disability result-
 ing therefrom.
 NOTE 2. - If claim is for disability resulting from disease, state how the disease is known to result from the service as a soldier.
 Also state how long physicians have known and treated applicant.

STATE OF GEORGIA,

County.

I, _____ 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 he is disabled, as he claims, and I know he is the individual
 he represents himself to be, and that he resides in this county. I also certify that the
 foregoing witnesses 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 _____ day of _____ 1890.

Ordinary

County.

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 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 _____ 1890.

Executed in the presence of us:

 J. D. Power

DIRECTION.

If allowed, send amount by _____
 me at _____

and oblige,

STATE OF GEORGIA,

I, J. M. Stone County, Cobb Ordinary of said County, do certify that I am well acquainted with B. W. Florence 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 Asst. Secy 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 14th day of July, 1891.

Ordinary Cobb County:

STATE OF GEORGIA,

I, J. M. Stone County, Cobb Ordinary of said county, do certify that I am well acquainted with B. W. Florence 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 15th day of July, 1891.

Ordinary Cobb County.

Application for Allowance

No. 899

FOR THE YEAR ENDING OCTOBER 31, 1891.

Applicant B. W. Florence
County, Cobb
Amount, \$50.00
Date of Warrant, July 14
Entered on record, 7/14 1891
MANAGER HANDED TO Asst. Secy
FOR THE PAYMENT OF PENSION.

SOLDIER'S PENSION

1892.

FOR THE YEAR ENDING OCTOBER 31, 1892.

Name B. W. Florence
County Cobb
Disability Disarm
Amount, \$ 50
Entered on record Met 3 1892.
W. H. HARRISON, AGENT.
No Asst. Secy
FOR THE PAYMENT OF PENSION.

STATE OF GEORGIA

For Applicants Heretofore Allowed Pensions

STATE OF GEORGIA

For Applicants Heretofore Allowed Pensions

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

PERSONALLY appears

B. W. Florence

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 *April* 1877;

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 *12* of *1st* Regiment

of *9th* Volunteers

Stephen's Brigade; that whilst engaged

in such military service at the battle of

Kennesaw in the State

of *Georgia* on the

day of *June* 1864, he was

wounded as follows:

He was shot through the leg arm just above the elbow, the bone was broken, large pieces of bone came out, the arm is stiff, muscles atrophied, the arm is crooked; it is practically & substantially useless & has been since the injury.

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

dollars, for

1870

Sworn to and subscribed before me, this, the

B. W. Florence

14 day of

July 1891.

J. M. Stone, Ordinary

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

Know all Men by these Presents, That I,

B. W. Florence

of *Cobb* County, State of Georgia, do hereby appoint

of *W. B. Colay*

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

14 day of

July 1891.

B. W. Florence

[L. S.]

Executed in the presence of us:

J. M. Stone, Ordinary

Send money to me as follows, by

to

P. O.

County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

PERSONALLY appears

B. W. Florence

of *Cobb* 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 *April* 1877;

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 *12* of *1st* Regiment

of *9th* Volunteers

Stephen's Brigade; that whilst engaged

in such military service at the battle of

Kennesaw in the State

of *Georgia* on the

day of *June* 1864, he was wounded as follows:

Arm above elbow, the bone was broken, large pieces of bone came out, the arm is stiff, muscles atrophied, the arm is crooked; it is practically & substantially useless & has been since the injury.

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

dollars, for

1870

Sworn to and subscribed before me this, the

B. W. Florence

14 day of

July 1891.

J. M. 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,

Cobb County.

Know all Men by these Presents, That I,

B. W. Florence

of *Cobb* County, State of Georgia, do hereby appoint

of *W. B. Colay*

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

14 day of

July 1891.

B. W. Florence

[L. S.]

Executed in the presence of us:

J. M. Stone, Ordinary

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 *B. W. Florence* of *Cobb* County, State of Georgia, do hereby appoint

of *Marcella G. Staley* 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 *18* day of *July*, 1893.

Executed in the presence of us: *B. W. Florence*
Chas. M. Fleming
J. E. Pomeroy

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, *B. W. Florence*

County, State of Georgia, do hereby appoint of *Minette G. Staley* 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 *13* day of *March*, 1894.

Executed in the presence of us: *B. W. Florence*
J. M. Stone
Oney

DIRECTIONS

Send money to me as follows, by _____ to _____ P. O. _____ County, Georgia.

Cobb Co

Florence B. W.
1893.

No. <i>578</i>
Application for Allowance
<i>For the Year Ending October 31, 1892.</i>
<i>Dig. com</i>
<i>Applicant B. W. Florence</i>
<i>Cobb</i>
County
Amount, <i>50</i>
Date of Warrant, <i>3/18</i>
Entered on record, <i>3/18</i>
<i>Warrant</i>
<i>Staley</i>
<i>Oney</i>

Florence B. W.
Oney

(For These Already Enrolled.)

No. *579*

Soldier's Pension.
1894.

Name <i>B. W. Florence</i>
County <i>Cobb</i>
Disability <i>D. & A. Arm</i>
Amount, \$ <i>50</i>
<i>3/13</i>
1894.
W. H. HARRISON,
Secretary Executive Department.

WARRANT HANDSD TO
A. S. Staley
Oney

For Applicants Heretofore Allowed Pensions.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County, }
 PERSONALLY appears *B. M. Florence* 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 *1877*; 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 *2*, of *11th* Regiment
 of *Georgia* Volunteers *Stephen*'s Brigade; that whilst engaged in
 such military service at the battle of *Kennesaw* in the State
 of *Georgia*, on the *24th* day of *June*, 1864, he was
 wounded as follows: *was shot through left arm
 just above elbow, breaking said arm.
 severely said arm has been rendered
 substantially and essentially useless.*

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

144 dollars, for a year.
 Sworn to and subscribed before me, this, the *18th* day of *March*, 1893. *B. M. Florence*

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

STATE OF GEORGIA,

Cobb County, }
 I, *J. M. Stone*, Ordinary of said County,
 do certify that I am well acquainted with *B. M. Florence* the
 applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his
 said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the in-
 dividual he represents himself to be, and that he resides in this County.

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

Given under my official signature and seal, this *18th* day of *March*, 1893.
J. M. Stone
 Ordinary *Cobb* County.

BOHEM CE VIOBIEA

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County, }
 PERSONALLY appears *B. W. Florence* *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 *17th*
 day of *April*, 1837; 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 *7*, of *1st* Regiment
 of *Georgia* Volunteers *Stephen*'s Brigade; that whilst engaged in
 such military service at the battle of *Kennesaw* in the State
 of *Georgia*, on the *27th* day of *June*, 1864, he was
 wounded as follows: *By gunshot, left arm
 left arm just above the elbow
 breaking the bones & muscles
 thereby causing said deponent
 to be practically incompetent
 to perform the ordinary vocations
 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 allowance to which he is
 entitled for the year ending October 26, 1894. I have heretofore been allowed a pension of
350 dollars, for the year 1893.

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

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

Given under my official signature and seal, this *13th* day of *March*, 1894.
J. M. Stone
 Ordinary *Cobb* County.



POWER OF ATTORNEY.

STATE OF GEORGIA,

Colt County.

KNOW ALL MEN BY THESE PRESENTS, That I, *B. W. Harrison*

of

County, State of Georgia, do hereby appoint

of *McMullen*

Y. S. Clark

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 *Mar* 1895.

Executed in presence of us

W. L. Stone
Eng

DIRECTIONS.

Send money to me as follows, by

to

County, Georgia.

P. O.

B. W. Harrison, B. W.

Clark

(For Those Already Enrolled.)

No. *371*

SOLDIER'S PENSION.

1895.

Name

County

Disability

Amount, \$ *50.00*

3/4

1895.

RICHARD JOHNSON,

Secretary Executive Department.

RECEIVED, HANDS TO

Y. S. Clark

Geo. W. Harrison, State Printer

W. L. Stone

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears *B. W. Florence* *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 18³⁷ that he enlisted in the military service of the Con-

federate States (or of the State of) during the war between the States, and served as a *Private* in Company *2*, of *15*th *Infantry* Regiment of *4a* Volunteers, *Jackson*'s Brigade; that whilst engaged in such military service at the battle of *Kennerly* in the State of *Ga.* on the *1st* day of *June* 186², he was wounded as follows:

Left Arm between elbow and shoulder breaking the bones, tearing the muscles &c. whereby deponent is rendered practically incompetent to perform the ordinary manual avocations 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 allowance to which he is entitled for the year ending October 26th, 1895. I have heretofore been allowed a pension of *50* dollars, for the year 189⁴.

Sworn to and subscribed before me, this, the

day of *March* 1895.

B. W. Florence

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,

Wm. Stone Ordinary of said County, do certify that I am well acquainted with *B. W. Florence* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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* 1895.



Wm. Stone Ordinary *Cobb* County.

Audited April 7 1890

COMPTROLLER GENERAL

5000

Maimed Soldiers.

Voucher No 2709

Amount \$ 50

Paid to B. M. Horner

For Arm disabled

Apr 7 1890

Included in warrant No.
issued to Treasurer

18

WARRANT CLERK.

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

R. L. Brown

Audited _____ 1891.

COMPTROLLER GENERAL.

Florence S. M.
Duphret

1891.

Maimed Soldiers.

Voucher No. 599

Amount \$ 30

Paid to B. M. Horner

For Arm di

July 14 1891.

Included in warrant No.
issued to Treasurer.

1891.

WARRANT CLERK.

Geo. W. Harrison, State Printer, Atlanta.

A. S. Blair

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

No. *2709*
Atlanta, Ga. April 7 1890

Mr. *B. W. Florence* 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 Act,
approved, Dec. 24, 1888, and the same having been examined and allowed for

Arm disabled
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, 18*90*

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. N. Harrison GOVERNOR.

CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty Dollars,
per above voucher, this

1 of *April* 18*90*.
R. C. Irvine

1891.
No. *899*
STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga. Dec'y 14 1891.

Mr. *B. W. Florence* 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
Arm dis'
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 the voucher and return same to
Executive Department for warrant.

By the Governor,



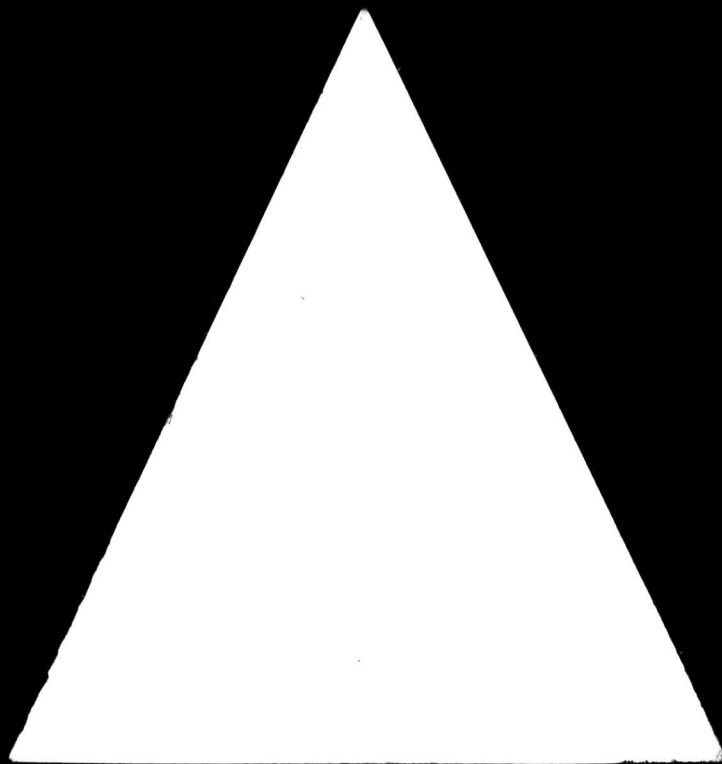
W. N. Harrison GOVERNOR.

Sec'y EXECUTIVE DEPARTMENT.

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

Fifty 00/100 Dollars,
per above voucher, this *14* of *Dec'y* 1891.

*B. W. Florence per
A. S. Selay his
att'y in fact*



POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb County.

Know all Men by these Presents, That I,

Elizabeth Florence
of Cobb County, Ga.
do hereby appoint
John Matthews
of Cobb County, Ga.

my true and lawful attorney in fact, for
me and in my name, to receive and receipt for whatever amount of money I may be entitled
to from the State of Georgia 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 June, 1891.

Executed in the presence of us:

Elizabeth Florence,
Will Storey, Edw. J. Fleming

DIRECTOR.

If allowed, send amount by

me at

and oblige,

to



Lorence Elizabeth
Cobb County
1891.
Alabama

No. 3177

Widows' Pension

—PAID TO—

Elizabeth Florence
OF
Cobb County.

\$100.00.

Warrant Issued

1891

AND HANDED TO

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA.

Know all Men by these Presents, That I,

County, in said State, do hereby appoint
Elizabeth Florence
of Sanders Springs Ga.
Kirk Mathews
 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
5th day of *June*, 189*1*

Executed in the presence of us:

Wm. H. Fleming
Wm. H. Storey

DIRECTIONS.

If allowed, send amount by

me at

and oblige.



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. *Elizabeth Florence*, who being sworn according to law, says under
 oath that she is the widow of *Ezekiel Florence*, who was a soldier in
 the service of the Confederate States, and served as a member of Company
33rd Regiment of *Alabama* Volunteers; that he enlisted in said

service on or about the *18th* day of *March*, 186*4*, and was in the

Army up to *72nd* day of *July*, 186*4*. That while in the

he was shot in the head, and
 killed instantly, on the battle
 field, at the battle near Atlanta
 Ga. on said date.

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 *11*th
 day of *December*, 18*59*, and that she has resided in Georgia continuously since the
29th day of *March*, 186*4*, 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

5th day of *June*, 189*1*. *Elizabeth Florence*
Wm. H. Storey
 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 shown positively to have resulted from the service of the soldier in the Army
 and not from any other cause.

Widow's Pension

PAID TO—

Elizabeth Florence

Cobb County

\$100.00.

Warrant Issued

AND HANDED TO

1891

Affidavit for Three Witnesses

Form No. 9.

STATE OF GEORGIA,

County of *Bolton*

Wm. H. Jernigan and *H. R. Thine* and *Wm. H. Jernigan* each known to said Attesting Officer as truthful, reliable and reputable citizens, who severally say under oath, that, from their own personal knowledge, Mrs. *Elizabeth Florence* of the County of *Cobb* State of Georgia is the widow of *Ernest Clarence*, who was a soldier in Company *C* of the *3rd* Regiment of *Ala* Volunteers. That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the *1st* day of *March* 1862. That while in said service, or by reason of said service in the Army, he lost his life as follows:

On the 22nd day of July 1864 on the right line at Atlanta Ala he was shot in the head and killed instantly, in the fighting around Atlanta.

The said Wm. H. Jernigan, D. C. to Camp and J. D. Jernigan swear only that the said Elizabeth Florence has not remarried since the death of her said husband Ernest Florence

We further swear that Mrs. *Elizabeth Florence* was the wife of said soldier during the service, and that she has not remarried since his death, and that she resides in

County of the State of Georgia.

Sworn to and subscribed before me, this, the

10th day of *May* 1891.

Notary Judge
Sumner and Elizabeth
Wm. H. Jernigan
D. C. to Camp
J. D. Jernigan
who have all been sworn
to be true and correct
before me this 10th day of May 1891

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

Form No. 11.

STATE OF GEORGIA,

County of *Cobb*

State of Georgia, hereby certify that I am acquainted with Mrs. *Elizabeth Florence* 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. ~~That the witnesses whose testimony she presents to sustain her claim are known to me to be~~ ~~substantial 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

10th day of *June* 1891.

SEAL

J. M. Stone
Ordinary.

Form No. 1.

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, J. M. Stone Ordinary in and for said County of
Cobb State of Georgia, hereby certify that I am acquainted with Mrs.
Elizabeth Florence 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
Edwin Florence deceased, and as such has heretofore been allowed a
 pension for the year ending February 15th 1892.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the
6th day of February 1893.

Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, County of Cobb
 Know ALL MEN BY THESE PRESENTS, That I, Elizabeth Florence
 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
 day of Feb. 1893. Elizabeth Florence [L. S.]

Executed in the presence of us:

J. A. Hargrave
Geo M. Fleming

DIRECTIONS.

Send amount by _____ to
 me at _____, and oblige

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

Form No. 2.

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.
Elizabeth Florence 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 Edwin Florence 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 27th day of January 1894.

(Seal)

Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, County of Cobb
 Know ALL MEN BY THESE PRESENTS, That I, Elizabeth Florence
 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 27th
 day of January 1894.

Executed in the presence of us:

William Hollostraw
Wm. Matthews

DIRECTIONS.

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

Widow's Pension.

for year ending February 15th, 1893.

PAID TO—

Elizabeth Florence

Cobb County.

Warrant Issued

1893

AND HANDED TO

J. M. Stone

Ordinary, Cobb County, Georgia.

1893.

27. 707

Elizabeth Florence
Cobb County
 FOR THESE MONIES PAID.

Widow's Pension
Elizabeth Florence
Cobb County
1893.
27. 707
Warrant Issued
1893
AND HANDED TO
J. M. Stone
Ordinary, Cobb County, Georgia.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Cobb*

Personally comes Mrs.

Elizabeth Florence

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 *27th March*, 1862 That she is the Widow of*Ezekiel Florence*

who was a Soldier in Company

C. of the*33rd*

Regiment of

Alabama

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

March

1862 and served in the Army up to

July 22nd

1864 That he lost his

life on the

22nd

day of

July

1864 (State here

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

That the said Soldier Husband while in the Confederate Army as above stated was killed at Atlanta Ga. on July 22nd 1864.

That the said applicant was born and raised in Ga. that she and her husband moved to Alabama January 1861 - in March 1862 her husband enlisted in the Army and then applicant came back to Ga. and has lived here ever since continuously.

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 1857; that Georgia is her home and she resided in this State 23d day of December,

1890, and has not lived in any other State or locality since that date. I have been allowed a

pension for the year ending February 15th, 1892, and now apply for the allowance provided by

law for the year ending February 15th, 1893

Sworn to and subscribed before me, this

6th day of July

1893.

Elizabeth Florence

Ordinary.

Post-office *Powder Springs*
Ga.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Cobb*

Personally comes Mrs.

Elizabeth Florence

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 *March*, 1862 That she is the Widow of*E. Florence*

who was a Soldier in Company

C. of the*33rd*

Regiment of

Alabama

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

March

1862 and served in the Army up to

July 22nd

1864 That he lost his

life on the

22nd

day of

July

1864 (State here

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

Said E. Florence was killed in battle at the Battle of Atlanta on 22nd day of July 1864.

Deponent swears that she was the wife of said deceased soldier during his service in the

army as a soldier, and that she has never married since his death aforesaid, that she became

his wife in the year 1857; that Georgia is her home and she resided in this State 23d day

of December, 1890, and has not lived in any other State or locality since that date. I have

been allowed a pension for the year ending February 15th, 1893, and now apply for the

allowance provided by law for the year ending February 15th, 1894.

Sworn to and subscribed before me, this

23rd day of July

1893.

Elizabeth Florence

Ordinary.

Post-office *Powder Springs*
Ga.

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

Form No. 1.

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. Elizabeth Florence the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to me by reputable witnesses), that she resides in this County, and that she resided in the State of Georgia on December 23, 1860, and has not lived out of the State since that date. That she is the widow of E. Florence deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1864.
 In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, 30 day of Jan 1895.
J. M. Stone Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, County of Cobb
 KNOW ALL MEN BY THESE PRESENTS, That Mrs. Elizabeth Florence of Cobb County in said State, do hereby appoint J. M. Stone of Marionetta Ga my true and lawful attorney in fact, for me, and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.
 IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 30 day of Jan 1895. Elizabeth Florence [L. S.]

Executed in the presence of us:

Uriah Matthews [L. S.]

DIRECTIONS.

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

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

Form No. 1.

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. Elizabeth Florence the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to me by reputable witnesses), that she resides in this County, and that she resided in the State of Georgia on December 23, 1860, and has not lived out of the State since that date. That she is the widow of E. Florence deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1864.
 In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this 27 day of Jan 1896.
J. M. Stone Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, County of Cobb
 I, Elizabeth Florence hereby authorize J. M. Stone of Marionetta Ga to receive and receipt for the pension paid heretofore, and request that he remit same to me by J. M. Stone
 IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 27 day of Jan 1896.

Executed in the presence of

Uriah Matthews [L. S.]
N. P. & Co.

1896.

No. 3527

WIDOW'S PENSION,

for year ending February 15th, 1896.

PAID TO

Elizabeth Florence

OF

Cobb County.

widow of E. Florence

WARRANT ISSUED

27

1896.

AND HANDED TO

at

FOR THOSE HERETOFORE PAID.

FOR THOSE HERETOFORE PAID.

1895.

No. 447

WIDOW'S PENSION.

for year ending February 15th, 1895.

PAID TO

Elizabeth Florence

widow of E. Florence

Cobb County.

WARRANT ISSUED

24

1895.

AND HANDED TO

at

FOR THOSE HERETOFORE PAID.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

Elizabeth Florence

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 March 1862

That she is the Widow of E. Florence who was a Soldier in Company 33^d of the Ala. Regiment of

Volunteers, that he enlisted in said Regiment on or about the month of March 1862 and served in the Army up to July 1864 That he lost his life on the 22nd day of July 1864 (State here

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

Said E. Florence was killed dead on the battle field in the battle near Atlanta on 22nd day of July 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1859 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 3rd day of July 1895.

Elizabeth Florence
Post-office Powder Springs Ga

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

Elizabeth Florence

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 March 1862

That she is the Widow of E. Florence who was a Soldier in Company 33^d of the Ala. Regiment of

Volunteers, that he enlisted in said regiment on or about the month of March 1862 and served in the Army up to July 1864 That he lost his life on the 22nd day of July 1864 (State here

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

Said E. Florence was shot and killed on the battle field near Atlanta on 22nd day of July 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1859 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 2nd day of July 1896.

Elizabeth Florence
Post-office Powder Springs Ga

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

Form No. 2.

STATE OF GEORGIA, County of Cobb
 I, J. M. Stone Ordinary in and for said County of
Elizabeth Florence
 State of Georgia, hereby certify that I am acquainted with Mrs.
 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 31, 1890, and has not
 lived out of the State since that date. That she is the widow of E. Florence
 deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1896.
 In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this
 the 23rd day of Jan 1897.
J. M. Stone Ordinary

POWER OF ATTORNEY.

STATE OF GEORGIA, County of Cobb
 I, Elizabeth Florence hereby authorize J. M. Stone
 of Minetta to receive and receipt for the pension paid heron and request
 that he remit same to me by him
 In Witness Whereof, I have hereunto set my hand and seal, this
 day of Jan 1897.
Elizabeth Florence
 Executed in the presence of
Uriah Mathews 1897

POWER OF ATTORNEY.

State of Georgia, County of Cobb
 I, Mr. E. Florence hereby authorize J. M. Stone
 of Minetta to receive and receipt for the pension paid heron and request
 that he remit same to me by him
 In Witness Whereof, I have hereunto set my hand and seal, this
 day of Jan 1898.
Elizabeth Florence
 Executed in the presence of
Uriah Mathews 1898

Form No. 3

Florence Elizabeth
Cobb County
 For Those Heretofore Paid
 1898.
 NO.
265
 WIDOW'S PENSION,
 For year ending February 15th, 1898.
 PAID TO
Mr. Elizabeth Florence
Cobb County,
 Widow of Elizabeth Florence
 RICHARD JOHNSON,
 Commissioner of Pensions.
 WARRANT ISSUED
2/15
 PAID HANDED TO
[Signature]
 REG. W. HARRISON, STATE PRINTER, ATLANTA.

Florence Elizabeth
Cobb County
 FOR THOSE HERETOFORE PAID.
 1897.
 No. 2650

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

PAID TO
Mr. Elizabeth
Cobb County,
 Widow of Elizabeth
 RICHARD JOHNSON,
 Commissioner of Pensions.

WARRANT ISSUED
2/16
 PAID HANDED TO
[Signature]
 1897.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

Elizabeth Florence

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

Cobb
March
1862

1862 That she is the Widow of

E. Florence

who was a Soldier in Company

of the 33rd Regiment ofAla.
March

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

1862 and served in the Army up to

July
22nd
July

1864 That he lost his

life on the

22nd
July

1864 (State here

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

E. Florence was shot down
on the battle field near Atlanta Ga
on the 22nd day of July 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier,

and that she has never married since his death aforesaid, that she became his wife in the year 1859

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

23
day of
July

1897.

Elizabeth Florence

Ordinary.

Post-office

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

Elizabeth Florence

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

Cobb
March
1862

1862 That she is the Widow of

E. Florence

who was a Soldier in Company

of the 33rd Regiment ofAlabama
March

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

1862 and served in the Army up to

July
22nd
July

1864 That he lost his

life on the

22nd
July

1864 (State here

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

The above named E. Florence was killed on
the battle field near Atlanta Ga
on the 22nd day of July 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1859

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

27
day of
July

1898.

Ordinary.

Post-Office

Elizabeth Florence

State of Georgia,

Cobb County.

County.

Ordinary of said County, certify that I am well acquainted

with Mrs. Elizabeth Florence 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

1862

Given under my official signature and seal this

15
day of
July

1898.

Official Seal.

Ordinary of

Cobb County.

POWER OF ATTORNEY.

State of Georgia.

Cobb County.

I, Elizabeth Florence hereby authorize J. W. Stoue
of Marietta, 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 1st

day of Febry 1899. Elizabeth Florence [L. S.]

Executed in presence of

Urick Mathews

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb County.

I, Elizabeth Florence hereby authorize J. W. Stoue
of Marietta, 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 3rd

day of February 1900. Elizabeth Florence [L. S.]

Executed in presence of

Urick Mathews
400 Cobb County Ga

Florence, Elizabeth
Cobb County
For Those Heretofore Paid.
1899
Urick Mathews
NO. 3580
WIDOW'S PENSION,
For year ending February 1st, 1899.
Mrs Elizabeth Florence
Cobb County
Widow of E. Florence
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT ISSUED
2/16
AND HANDLED TO
JUL 23
GEO. W. HARRISON, STATE PRINTER, ATLANTA

Florence, Elizabeth
Cobb County
For Those Heretofore Paid.
1900.
NO. 3477
WIDOW'S PENSION,
For year ending February 1st, 1900.
PAID TO
Mrs Elizabeth Florence
or
Cobb County
Widow of E. Florence
JNO. W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
JUL 23 1900,
AND HANDLED TO
JUL 23
GEO. W. HARRISON, STATE PRINTER, ATLANTA

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

Elizabeth Florence

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~~ resided in said State continuously ever since March 1862 That she is the Widow of

who was a soldier in Company E. Florence of the 33rd Regiment of Alabama Volunteers, that he enlisted in said regiment on or about the month of March 1862 and served in the Army up to July 1864 That he lost his

life on the 22nd day of July 1864 (State here full particulars of the husband's death, when, where and from what cause.)

The said Mr. E. Florence was killed dead on battlefield by being shot by the enemy near Atlanta, Ga. on the 22nd day of July 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1859.

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, 1900.

Sworn to and subscribed before me, this 3rd day of Feb'y 1899, J. M. Stone Ordinary. Post-Office Pondor Springs

State of Georgia,

Cobb County.

Ordinary of said County, certify that I am well acquainted with Mrs. Elizabeth Florence 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 22nd day of March 1862

Given under my official signature and seal this the 3rd day of Feb'y 1899.

Official Seal.

Ordinary of Cobb County

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

Elizabeth Florence

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~~ resided in said State continuously ever since March 1862 That she is the Widow of

who was a soldier in Company E. Florence of the 33rd Regiment of Alabama Volunteers, that he enlisted in said regiment on or about the month of March 1862 and served in the Army up to July 1864 That he lost his

life on the 22nd day of July 1864 (State here full particulars of the husband's death, when, where and from what cause.)

That the said E. Florence was killed dead on the battlefield by being shot by enemy near Atlanta, Ga. on the 22nd day of July 1864.

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1859.

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 3rd day of Feb'y 1900, J. M. Stone Ordinary. Post Office Pondor Springs, Ga.

State of Georgia,

Cobb County.

Ordinary of said County, certify that I am well acquainted with Mrs. Elizabeth Florence 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 22nd day of March 1862

Given under my official signature and seal, this the 3rd day of Feb'y 1900.

Official Seal.

Ordinary of Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County, }
I, *Elizabeth Florence* hereby authorize
John Aubrey of *Monetta*
to receive and receipt for the pension paid hereon and request that he remit same to
me at *Monetta*

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *12*
day of *January* 1901. *Elizabeth Florence* [L. S.]

Executed in presence of

Uriah Mathews
N P Cobb Co Ga

To Those Heretofore Paid.

1901.

No. *180*

WIDOW'S PENSION,

For year ending February 15th, 1901.

PAID TO
Mrs. Elizabeth Florence

Cobb County,
Widow of *E. Florence*

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1901,

Jan 18
AND HANDLED TO
Aubrey

One W. Harrison House Printer, Atlanta, Ga.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County, }
I, *Elizabeth Florence* hereby authorize
John Aubrey of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
_____ at _____

In Witness Whereof, I have hereunto set my hand and seal, this *13*th
day of *Jan* 1902. *Elizabeth Florence* [L. S.]

Executed in presence of

J. M. Baum

To Those Heretofore Paid.

1902.

No. *228*

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. Elizabeth Florence

Cobb County,
Widow of _____

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1902

AND HANDLED TO
Ordway

One W. Harrison House Printer, Atlanta, Ga.

Florence, Elizabeth
Cobb Co

Florence, Elizabeth
Cobb County

NOT ALLOWED PENSIONS

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

Elisabeth Florence

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 March 1862. That she is the Widow of E. Florence who was a soldier in Company C of the 33rd Regiment of Alabama

Volunteers, that he enlisted in said regiment on or about the month of March 1862 and served in the Army up to July 1864. That he lost his life on the 22nd day of July 1864. (State here

particulars of the husband's death, when, where and from what cause) That the said E. Florence was killed dead on battlefield by being shot by enemy near Atlanta Ga on the 22 day of July 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1859.

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 12th day of January 1901. Elizabeth Florence Ordinary. Post Office Roads Springs

State of Georgia,

County of Cobb

Ordinary of said County, certify that I am well acquainted

with Mrs. Elisabeth Florence 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 18 day of 18.

Given under my official signature and seal, this the 22nd day of January 1901.

Official
Seal.

Ordinary of Cobb County.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES MRS.

Elisabeth Florence

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 March 1862. That she is the Widow of E. Florence who was a soldier in Company C of the 33rd Regiment of Alabama

Volunteers, that he enlisted in said regiment on or about the month of March 1862, and served in the Army up to July 1864. That he lost his life on the 22nd day of July 1864. (State here

particulars of the husband's death, when, where and from what cause) That the said E. Florence was killed dead on battlefield by being shot by enemy near Atlanta Ga on the 22 day of July 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1859.

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 13th day of Jan 1902. Elizabeth Florence Ordinary. Post Office Roads Springs

State of Georgia,

County of Cobb

Ordinary of said County, certify that I am well

acquainted with Mrs. Elisabeth Florence 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 18 day of 18.

Given under my official signature and seal, this the 13th day of Jan 1902.

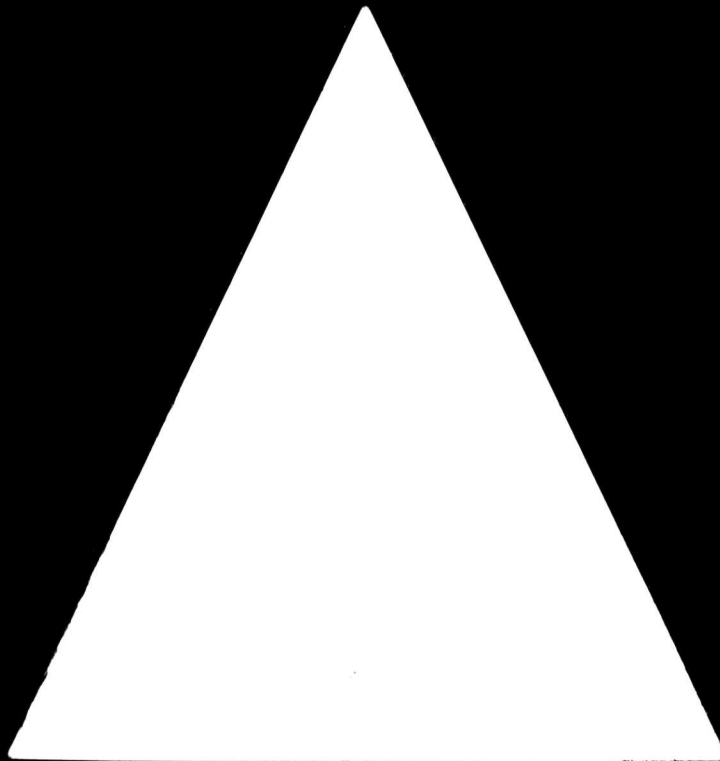
Official
Seal.

Ordinary of Cobb County.

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

County.

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



ORDINARY'S CERTIFICATE

STATE OF GEORGIA.

Albion COUNTY }

I, *J. M. Leagill*

Ordinary of said County, do certify that I

know Mrs. *Mary A. Ford*

the applicant for this pension, and that she is the

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

on the _____ day of _____ 19____

That I also know *Oliver Ford*

witness as to marriage, and I also know

that both of the foregoing were duly sworn by me before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this *11th* day of *Oct* 19*17*.

(SEAL)

J. M. Leagill Ordinary.

County: *Albion*

NOTES: 1. Before any application for pension the Ordinary shall receive applicant and the witness in the following words: "You do solemnly swear that you will true and faithfully answer the questions asked you and the evidence you shall give will be the truth. So help you God." 2. The applicant shall be sworn in the following words: "I do solemnly swear that I am the person named in the application for pension, and that I am a bona fide continuing resident of the County of _____ State of Georgia, and that I am entitled to a pension under the Act of July 11, 1910, as amended by the Act of 1913." 3. All affidavits must be made before the Ordinary of the County of _____ Georgia. 4. Only widows who married prior to first January, 1861, are entitled to a pension. 5. The applicant shall submit a true and correct copy of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation. 6. Widows of Deceased Pensioners must use the Blue Application Blank and state and prove full term of husband's service—women in order to prove of service and was so required to do so.

Widow's Application

To Be Put on Roll in Her Own Right When Husband Was on the Indigent Roll or Put on Under Act of July 11, 1910—As Amended by Act of 1913.

County *Albion*
Name *Mary A. Ford*
Widow of *A. R. Ford*
Company *A*
Regiment *5th Co. Infantry*
Approved _____

J. W. Lindsay
Commissioner of Pensions

Byrd Printing Co., State Printers, Atlanta.

10-30-1919

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

Spalding COUNTY.

I, J. M. Salligill Ordinary of said County, do certify that I know Mrs. Nancy L. Ford the applicant for this pension, and that she is the person she represents herself to be, and that she is a bona fide continuing resident of Said County and was on the _____ day of _____ 19____.

That I also know Oliver Ford witness as to marriage, and I also know _____ that both of the foregoing were duly sworn by me before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 17 day of Sept 1924.

(SEAL) J. M. Salligill Ordinary.
Chandler County.

- NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the county of residence.
4. Only widows who married prior to first January, 1881, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because he made no proof of service and was not required to do so.

Widow's Application

To Be Put on Roll in Her Own Right When Husband Was on the Indigent Roll or Put on Under Act of July 11, 1910—As Amended by Act of 1919.

No. 54
County Spalding
Name Nancy Ford
Widow of A. L. Ford
Company A
Regiment 54
Approved _____

J. W. LINDSEY,
Commissioner of Pensions

Byrd Printing Co., State Printers, Atlanta.

10-30-1919

Ford, Nancy (Mrs.)

1924

Application for Pension Due Deceased Pensioner

(UNDER ACT 1904)

(To pay expenses of last illness or funeral)

J. M. Salligill Ordinary
For Mrs. Nancy Ford
of Spalding County

Old or New Class 1
Died January 30 1924
Amount \$ 100.00

Approved and ordered paid.

1921.

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

Texas Printing Co., Atlanta, Ga.

WIDOW'S AFFIDAVIT

STATE OF GEORGIA,

Cobb COUNTY

Personally before me comes Nancy C. Ford of said County, who, after being duly sworn, says that she is the widow of Lemuel A. Ford to whom, in the County of Pike State of Ga she was married on the 3rd day of Oct 1864, and that she remained his wife, and resided with him to the date of his death in July 29 1919 and that she has not since his death remarried. At the time of his death he was a resident of Cherokee County, in said State of Georgia, and he was on the Indigent Pension Roll of the State and paid a pension of \$40 in Cherokee County for 1919 per annum, on account of being a soldier in Company N. 54th Regiment Infantry (Volunteers or State Militia) and she is now a bona fide resident citizen of said County of Cobb and she has so continuously resided since all her life day of 19

Sworn to and subscribed before me, this 16th day of Sept 1919

J. M. Lamm Ordinary
Cobb County

(SEAL)

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

STATE OF GEORGIA,

Cobb COUNTY

Personally before me comes Oliver F. Fisher known to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. Nancy C. Ford who made the foregoing affidavit, is the lawful widow of Lemuel A. Ford who died in Cherokee County in said State of Georgia on 29th day of July 1919 and that she has not since remarried. That she became the wife of L. A. Ford on the 3rd day of Oct 1864 and that she and he had resided together as man and wife continuously since 18 day of 18 and that the Lemuel A. Ford was the same man who was on the pension roll of said State State Ga from Cherokee County when he died.

Sworn to and subscribed before me, this 2nd day of April 1919

J. M. Lamm Ordinary
Cobb County

(SEAL)

Oliver F. Fisher
State of Georgia, Cobb County.
I hereby certify that Nancy C. Ford is a bona-fide citizen of this county and her statement is entitled to full faith and credit.

J. M. Lamm ordinary.
Cobb Co., Ga.

Application for Pension Due to a Deceased Pensioner

(Under the Act of August 15, 1904)

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

GEORGIA,

Cobb County.

Personally before me, the Ordinary of said County, comes J. A. Ford of said County, who, after being sworn, on oath says that he knew Nancy Ford of said County, and that said pensioner was on the Pension Roll of Cobb County at the time of death, which occurred in Cobb County, in this State, on the 30th day of January 1924, and that a Pension of One hundred Dollars was due pensioner and unpaid at the time of pensioner's death. That he left no widow or dependent children surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$44.75 nor sworn statement fully and completely itemized, hereto attached.

Sworn to and subscribed before me

this 5th day of July 1924 J. M. Lamm Ordinary
Cobb County.

AFFIDAVIT OF ORDINARY

GEORGIA,

Cobb County.

I, J. M. Lamm Ordinary of said County, do certify that I personally know J. A. Ford, who is a resident citizen of said County and that said person is of a truthful and trustworthy character, entitled to full faith and credit.

I also knew Nancy Ford while in life and that this was the same person whose name appears on the widow's Pension Roll of Cobb County, and was paid a Pension of 100 Dollars in said County for 1923, and I now believe said pensioner to be dead.

Given under my hand and official seal, this 24th day of April 1924
(SEAL) J. M. Lamm Ordinary.
Cobb County.

INSTRUCTIONS:
1st. For use in all cases where pensioner died after January 1st, had not been out of State longer than twelve months, and died without owning sufficient property to pay such expenses. The widow of a soldier, if she is living, has prior claim over these expenses, and must make application on valid claim.
2nd. Require those claiming accounts for expenses of last illness, and expenses of funeral, to make out their account in fully itemized form, giving each item and the value of it, and such data.
3rd. Running accounts cannot be paid—only those connected with the last illness, just before death when pensioner grew worse to die.
4th. Each account must be sworn to before the Ordinary, and in the following form: (Do not use the terms: "just, true, due, unpaid," etc.)
"The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of _____ who died without owning sufficient property to pay this bill."
5th. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached thereto to this blank, after this blank has been properly completed as indicated.
6th. The completed voucher, this blank and the bill, must be sent to the Pension Office for approval and no money must be paid out until so approved.
7th. The Ordinary signs pay-roll as Ordinary, for the pension and then disburses the money himself and takes receipts.
8th. Accept no bills for funeral until you write the Pension Office, stating the circumstances in very great detail.
9th. Pensioner's children, or children-in-law, must not charge the State for doing any what the law and common humanity demand of them.
10th. Return this application, and attached bills, with your final settlement to the Pension Office.
11th. Ordinary must see that the back of this blank, when folded, is filled out.
12th. Funeral expenses of deceased "new" pensioners covering all or part of both the 1920 and 1921 pensions require two separate sets of this voucher and bills—one set to be filed in the Pension Office with the pension papers of each year.

Statement
ACWORTH, GA. Jan 30 1924
M. J. G. Gadsden
In Account with

J. F. Collins & Son
Furniture, House Furnishings, Stoves, Etc.
FUNERAL DIRECTORS & EMBALMERS

Casket	60.00
Body	25.00
Embalming	15.00
Decor. & Service	10.00
1st Floor	25
Gr. Digging Grave	3.00
	<u>93.25</u>

Personally appeared
before me E. L. Collins
of the firm of J. F. Collins & Son
the above account is just and
is paid.
J. F. Collins
J. F. Collins & Son
Cott. Co. Ga.

93 25
11 50
104 75

FROMER OFFICE 11
RESIDENCE 11
ACWORTH, GA. Jan 11 1924
Mr. Nancy Ford
Acworth Ga.

In Account With
E. M. BAILEY, M. D.

FOR PROFESSIONAL SERVICES From Oct 1923 to Jan 27 1924

Personally appeared before me
E. M. Bailey who on oath says 11.50
the above acct is just and
is paid.
J. F. Collins & Son to M. Bailey
Cott. Co. Ga.

PAID ON ACCOUNT

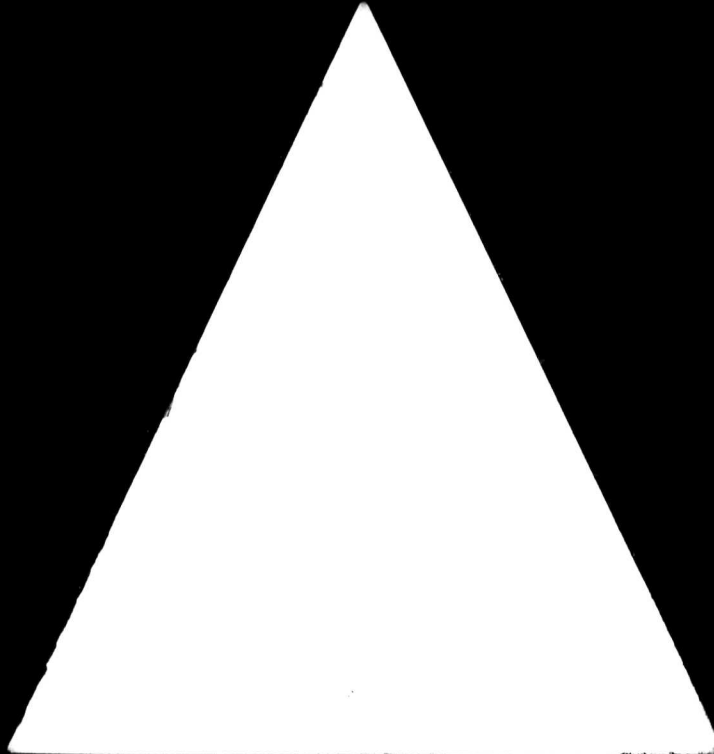
BALANCE DUE

Received Payment

James R. McHenry
Statement Received Monthly and
Paid to the Government.
James R. McHenry

BALANCE DUE \$ _____

Received Payment _____



Power of Attorney.

STATE OF GEORGIA.

Chas. W. Hall }
County.

John Lindsey hereby authorize
to receive and receipt for the pension allowed, and request that he remit same to
at *his office* by *hand*
Witness my hand and seal, this *27th* day of *August* 1901
J. W. Lindsey [L. S.]

Executed in presence of

No. *1*

INDIGENT PENSION,

~~1900.~~

1901

Name *J. W. Lindsey*

County *Cobb*

Co B-23 Ga

Approved _____ 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

7-9-1901

Power of Attorney.

STATE OF GEORGIA,

Cook County, }
John H. Foster hereby authorize
me at his office by hand
 Witness my hand and seal, this 7th day of March 1900.
 Executed in presence of J. R. Foster [L. R.]

Questions for Applicant.

STATE OF GEORGIA,

Cook County, }
John H. Foster of said State and County, desiring
 to avail himself of the Pension Act (Section 1254, Code), hereby submits his proofs, and after being duly
 sworn true answers to make to the following questions, depose and answers as follows:
 1. What is your name and where do you reside? Give State, County and post office.
J. H. Foster, Reside in Cook County, near Marietta.
 2. How long and since when have you been a resident of this State? At my life.
 3. When and where were you born? Union County, Ga. Aug 14th, 1838.
 4. When and where and in what company and regiment did you enlist or serve? Enlisted at Big Shanty,
Ga., August 1861. Co. B. 23rd Ga. Vols.
 5. How long did you remain in such company and regiment? until the close of the
war, nearly 4 years.
 6. When and where was your company and regiment surrendered and discharged?
At Appomattox, Va. April 9th 1865.
 7. Were you present with your company and regiment when it was surrendered? I was not.
 8. If not present, state specifically and clearly where you were, when you left your command, for what
 cause and by whose authority? I was taken prisoner at Petersburg Va. June 15th
1864. Was taken to Elmira N.Y. & kept prisoner until close of war.
 9. How much can you earn (gross) per annum by your own exertions or labor? very little.
 10. What has been your occupation since 1865? Farming when able.
 11. Upon which of the following grounds do you base your application for pension, viz: first, "age and
 poverty," second, "infirmity and poverty," or third, "blindness and poverty"? 1st & 2nd
 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? For the last
4 years have not been able to work sufficiently to earn a support
and I have had chronic lung trouble for many years, causing me that wound
on my chest during at Petersburg Virginia, June 15th. All these things render me
unable to work any of my own property.
 13. What property, real or personal, do you possess, and its gross value? very little.
just a little household goods.
 14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898 and 1899 and
 what disposition, if any, by sale or gift, have you made of same? In 1894 I owned two horses
& cows. Since then on acct of inability to labor have gradually run down
until now have nothing but little household goods.
 15. In what County did you reside during those years, and what property did you then return for taxation?
In Cook County. I gave on the property registered along as long as had it.
 16. How were you supported during the years 1897 and 1900? Primarily by the help of my son
who has since married.
 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? My son who has since married took my support. I contributed very little.
 18. What was your employment during 1897 and 1900? What pay did you receive in each year?
Worked a little on the farm when able. Received no pay.
 19. Have you a family? If so, who composes such family? Give their means of support? Have they
 a homestead? Yes, one little boy and 3 daughters. They have no homestead
and no means of support. My children children are all
renters.
 20. Are you receiving any pension? If so, what amount and for what disability? None.
 21. Have you ever made an application for pension before? Yes.
 22. How many applications have you ever made and under what class? one - indigent -

Every Question MUST be Answered.

Sworn to and subscribed before me this the 7th day of March 1900.
John H. Foster Applicant.
Cook County.

INDIGENT PENSION.

1900.

1901

Name John H. Foster
 County Cook
Co B. 23rd Ga
 Approved 1900.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO

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

7-19-1901

Foster, J. H.
Cook Co

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Cobb COUNTY,

H B Morris of said State and County, having been presented as a witness in support of the application of J R Foster for pension under Section 1254, Code, and after being duly sworn true answers to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? H B Morris Cobb Co
2. Are you acquainted with J R Foster, the applicant; if so, how long have you known him? Since August 1861
3. Where does he reside, and how long and since when has he been a resident of this State? Cobb Co. Two hundred and thirty three years
4. When, where and in what company and regiment did he enlist, and how do you know? In August 1861 Cobb Co. Co. B 23rd Regt.
5. Were you a member of the same company and regiment? Same Regiment
6. How long did he perform regular military duty? From 1861 to the summer of 1865
7. When and where was his command surrendered? I think they were surrendered at Appomattox
8. Were you present when it surrendered? I was not. I captured in June 1864
9. Was applicant present? He was, but he was with me in prison
10. If he was not present, where was he? He had been captured in June 1864 and came to Union
- When did he leave his command? June 1864 For what cause? He was captured
- By what authority he left? As stated above How do you know all of this? I was with him when we were captured together and remained in prison together until the war was over
11. What property, effects or income has the applicant? (Give your means of knowledge.) I do not
12. What property, effects or income did the applicant possess in 1868, 1869, 1870 and 1871, and what disposition, if any, did he make of same? I do not know
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? I do not know
14. What is the applicant's occupation and physical condition? Former. He is old and has been wounded and is now out
15. Is the applicant unable to support himself by labor of any sort, if so, why? I think so because of age, bad health and worn out
16. How was he supported during the years 1868 and 1869? Do not know
17. What portion of his support for these two years was derived from his own labor or income? I do not know
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? He is old has been wounded and is worn out
19. What interest have you in the recovery of a pension by this applicant? None

Sworn to and subscribed before me, this 28th day of Feb, 1904, at John Aubrey Ordinary.

H B Morris Witness.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cobb COUNTY,

Personally came before me, J T Gault M D and J R Foster, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully J R Foster, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows: Has chronic rheumatism, chronic sciatica, old, a general worn out

They 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 27th day of July, 1904, at John Aubrey Ordinary.

J T Gault M D

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb COUNTY,

I, John Aubrey, Ordinary in and for said County, hereby certify that the applicant J R Foster resides in said County, and has been a bona fide resident of this State since the 1st day of Janu, 1864, and the witnesses, viz: H B Morris, Charles Foster M D and J T Gault M D 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 digests of Cobb County show that applicant returned for taxation in his name in 1869 170 Dollars of property, and in 195 Dollars of property.

In my opinion the foregoing claim is made in good faith. Witness my hand and seal of office, this 27th day of March, 1904, at John Aubrey Ordinary, 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.

STATE OF GEORGIA,

Witness my hand and seal, this 6th day of Jan 6th 1902.
J. R. Hapler [L. S.]

Executed in presence of

J M Garner

STATE OF GEORGIA.

STATE OF GEORGIA,
County. }
I, Gott
J. K. Foster hereby authorize
John Dwyer of Marion
to receive and receipt for the pension allowed and request that he remit same to
him at this office
by none

Witness my hand and seal, this 1 day of July 1903.
J. R. Foster [L. S.]
 Executed in presence of

Executed in presence of

CODE SECTION 12A.
(FOR THOSE ALREADY ENROLLED.)

No. 105

INDIGENT

SOLDIER'S PENSION 1902.

Name J. R. Hood
County Colh
Co. B Regiment 23

WARRANT ISSUED

11/16 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

W. W. Harrison, State Printer, Atlanta.

no data

Ester, J. H.
Cobb County

CODE SECTION 154.
(FOR THOSE ALREADY ENROLLED.)

No. 461

INDIGENT

SOLDIER'S PENSION 1903.

Name *J. Foster*
County *Robt*
Co. *B* Regiment *23*

WARRANT ISSUED 11/23 1903

JOHN W. LINDSEY,
Commissioner of Prisons.

WARRANT HANDED TO

Gao Haxi'an 高希贤

10

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears

J. R. Hostler

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 _____ 1886; 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 *4 years* in Company *B*, of *28*th Regiment of *En Vols*; that his physical condition is as follows: *Owing to age, infirmities, 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 1

Sworn to and subscribed before me, this the

_____ day of *January* 1902

Ordinary.

J. R. Hostler

STATE OF GEORGIA,

Cobb County.

I, *John A. Hester* Ordinary of said County, do certify that I am well acquainted with *J. R. Hostler* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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.

Cobb 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,

Cobb County.

Personally appears

J. R. Hostler

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 _____ 1888; 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 *4 years* in Company *B*, of *28*th Regiment of *En Vols*; that his physical condition is as follows: *from infirmities of poverty cannot 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

1st day of *Jan* 1903.

Ordinary.

J. R. Hester

STATE OF GEORGIA,

Cobb County.

I, *John A. Hester* Ordinary of said County, do certify that I am well acquainted with *J. R. Hostler* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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.

Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

I, J. K. Foster 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 1 day of Jan 1904.

Executed in presence of

J. K. Foster [L. S.]

CODE SECTION 1254

(FOR THOSE ALREADY ENROLLED.)

No.

INDIGENT

SOLDIER'S PENSION

1904.

Name

County

Co.

Regiment

WARRANT ISSUED

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

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

no date

Foster, J. K.
Cobb Co.

(FOR THOSE ALREADY ENROLLED.)

No.

INDIGENT

SOLDIER'S PENSION

1905.

Name

County

Co.

Regiment

WARRANT ISSUED

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

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

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

I, J. K. Foster 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 17 day of January 1905.

Executed in the presence of

J. K. Foster [L. S.]

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County.

Personally appears John Foster 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 1838 day of Jan, that he is 64 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 years in Company B, of 23 th Regiment of Georgia; that his physical condition is as follows: Age Infirmit and Poorly

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 Cobb County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this 1 day of Jan, 1904.

Ordinary.

STATE OF GEORGIA,

County.

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

Given under my official signature and seal, this 1

day of Jan, 1904.

Ordinary.

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,

County.

Personally appears John Foster 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 1838 day of Jan; that he is 64 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 years in Company B, of 23 th Regiment of Georgia; that his physical condition is as follows: Age Infirmit and Poorly

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 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 1 day of Jan, 1905.

Ordinary.

STATE OF GEORGIA,

County.

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

Given under my official signature and seal, this 1

day of Jan, 1905.

Ordinary.

County.

Note.—The blank spaces must be filled.

Note.—Affidavit should not be attested before January 1st, 1905.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

I, J. K. Foster hereby authorize
John W. 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 _____ day of January 1906.
J. K. Foster [L. S.]

Executed in the presence of

M. Mann

Cons. Section 1334.
(FOR THOSE ALREADY ENROLLED.)

No. 2066

INDIGENT SOLDIER'S PENSION 1906.

Name J. K. Foster
County Cobb
Co. B. 23d Regiment 4th

WARRANT ISSUED
1/22 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO
Cody

Test Pensions Printed and Published by C. W. Anderson, 1905.

no data

Foster, J. K.
Cobb Co.

Cons. Section 1334.
(FOR THOSE ALREADY ENROLLED.)

No. 558

INDIGENT SOLDIER'S PENSION 1907.

Name J. K. Foster
County Cobb
Co. B. 23d Regiment

WARRANT ISSUED

JAN 21 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

Cons. W. Anderson, State Printer, Atlanta.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

I, J. K. Foster hereby authorize
John W. 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 _____ day of January 1907.

Executed in presence of

M. Mann

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Cobb County.

Personally appears

J. R. Foster 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 B, of 23rd Regiment of Vol.; that his physical condition is as follows: Infirmit & poor

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 _____ day of _____ 1906.

Ordinary.

State of Georgia,

Cobb County.

I, John A. Wray

Ordinary of said County,

do certify that I am well acquainted with J. R. Foster the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1906.

Ordinary

Cobb County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Cobb County.

Personally appears

J. R. Foster 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 B, of 28th Regiment of Geo. Vols; that his physical condition is as follows: Infirmit & poor

that his property consists of the following items:

of the value of Nothing 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 _____ day of _____ 1907.

Ordinary.

State of Georgia,

Cobb County.

I, John A. Wray

Ordinary of said County,

do certify that I am well acquainted with J. R. Foster the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1907.

Ordinary

Cobb County.

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

Pension Office, 11/22/10.

Applicant must state every fact to be proven to make out claim for pension.
J. W. Lindsey, Sec. of Pensions.

Foster Margarette
Cobb County
9/21/10
No. _____

Widow's Pension

UNDER ACT 1910.

CH 11
Country *Cobb*

Name *Margarette Foster*

Widow of *Joseph A. Foster*

J. W. LINDSEY,
Commissioner of Pensions.

Chas. F. Byrd, State Printer.

10/20/10
2/20/11

Applicant must state every fact to be proven to make out claim for pension.
J.W. Lindsey, Com. of Pensions.

Widow's Pension

UNDER ACT 1910.

County Colt

Widow of Margaret E Foster
Joseph A Foster

J. W. LINDSEY,
Commissioner of Pensions.

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

STATE OF GEORGIA,

County Colt

Personally before me comes Margaret E Foster of said State and County, and after being duly sworn, on oath says that she desires to apply for a pension allowed under the Act of 1910, and submit testimony to make out the same, true answers makes to the following questions to wit:

1. What is your name, and where do you reside? Margaret E Foster, Russell 6th St, Colt Co, Ga
2. How long and since when have you been a continuing resident in the State of Georgia? Since 1867 - Has been her domicile
3. When, where and to whom were you married? April 1861, Bay Street, Colt Co, Ga
4. When, where and in what Company and Regiment did your husband serve in the Confederate Army or Georgia Militia? (State the arms and class of Service.) April 1861, Bay Street, Colt Co, Ga
5. When and where did the Commands of your husband surrender or discharge from the army? April 1865 at Appomattox
6. Was your husband personally present at the time of the surrender or discharge of this Command? No
7. If he was not present state clearly where he was? He was a prisoner
8. Where was his Command when he left? Cherokee County, Ga
- a. For what cause did he leave his command? Was captured
- b. By whose authority did he leave his Command? By the enemy
- c. For how long was he granted leave of absence? None
- e. What was his physical condition when he left his Command? Very good
- f. What effort did he make to return to his command? None
- g. In what way was he prevented from going back to Command? Was a prisoner
- h. Was he captured by the enemy at any time? Yes
- i. If so, when and where captured and where held to a prisoner, and when and for what cause released? At Appomattox, Va. and was held as a prisoner to Appomattox, Va. and was held as a prisoner to Appomattox, Va.
- j. When and where did your husband die? July 1887, at Appomattox, Va.
- k. Were you residing together when he died? Yes
- l. If not, how long had you resided apart? None
9. What property of any description did you own, hold or control for your use and its cash value, Nov. 4, 1908. (State same by items.) 2 shares in Russell Bond for value \$200.00
10. What property of any kind have you sold or given away since Nov. 4, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.) None
11. What property of any description of any value have you now? Same as above
12. Give list and cash value? 2 shares Russell Bond for value \$200.00
13. What are your annual earnings or income and their value? Only husband's pension from above
14. Have you heretofore been paid a pension by the State? No
- If so, when and for what cause were you struck from the Roll? No

Sworn to and Subscribed before me this the

26 day of Sept 1911

Margaret E Foster

County Colt

Amended by J. M. Lindsey
before me J. M. Lindsey
Ordinary Colt County, Ga

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

STATE OF GEORGIA,

Milton County.

Personally before me comes J. G. Orick, 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. G. Orick, Milton, Ga.
2. How long and since when have you known Margaret M. Orick applicant? 70 years
3. How long and since when has she continuously resided in this State? (Give date.) Since Aug 1861. Military personal knowledge
4. When and where was she married? J. D. Orick How do you know? husband
5. How long and since when did you know J. D. Orick her husband? Since Aug 1861
6. When and where did J. D. Orick the husband of Applicant die? July 1887 at Cumming Ga
7. Where the Applicant and her husband living together as husband and wife at the date of his death? yes
8. If not, how long did they live apart before his death?

Were they divorced?

9. When, where and in what Company and Regiment did J. D. Orick enlist?

April 1861 Big Shanty Ga Co E 22nd Ga Inf.

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

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? from April 1861 until battle of Gettysburg

12. When, and where did his Command surrender, and was discharged? April 1865 at Appomattox V.A.

13. Were you personally present when it was surrendered? yes If not where were you and how came you there?

14. Was the husband of applicant personally present at surrender? no If not where was he? In prison when, where and for what cause did he leave Command? (Give date.) Was captured By whose authority did he leave his Command? and how long was he granted leave? How do you know all this? present

15. For what cause, if you know of your own knowledge was he prevented from returning to his Command? Was in prison

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how?

Sworn to and subscribed before me this 27th day of Sept 1910

E. A. Robertson Ordinary,
of Milton County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Cobb County.

Personally before me comes John L. & S. G. Shaddy, who on oath says that they are freeholders of said County and that they know Margaret M. Orick of said County and know what property she owned on 4th Nov 1908, and its cash value to be as set out by Schedule (A) as follows.

Personal property 2 shares of General Bond
Notes and accounts due and paid \$200.00
Total Value \$

Schedule (B).

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

Personal property \$
Money, Notes and accounts \$

Schedule (C).

We also know what property she has now in her possession, use and control to wit:

Acres of land...worth \$
Horses and Mules 2 shares of General Bond
Cows and Hogs 1 share of
Other property Value \$200.00
Income and earnings Value with years \$1200.00
Total Value of all property and effects \$

Sworn and subscribed before me this 26th day of Sept 1910
J. M. Gann Ordinary,
of Cobb County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cobb County.

I, J. M. Gann Ordinary of said County do certify that, I know Margaret M. Orick the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was in the 4th Nov. 1908.

That I also know J. G. Orick & S. G. Shaddy the witness who swears to the service of husband, and J. G. Orick & S. G. Shaddy who are freeholders. That all of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they all, are truthful, trustworthy, and their statements are entitled to full faith and credit.

That the Tax Return Margaret M. Orick Returned for Tax is for 1908 \$ for 1910 \$

Sworn under my hand and official seal of office this 27th day of Oct 1910

SEAL.

(SEAL.)

J. M. Gann Ordinary,
of Cobb County.

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

STATEMENT

Return this Statement for Correction in Case of Error

191

Mrs Margaret F. Foster
To R. J. P. M. M. S.
Terms. No. St.

For drugs and medical attention
during last illness
#585

Personally Comes R. J. P. M. S.
who being duly sworn says
the above and properly
oath is put and true

Given & subscribed before me
this 18th day of Feb 1918

R. J. P. M. S.

Marshall & Sons Co.
100 N. 1st St. St. Louis, Mo.
I certify for and in full
by C. C. F. H.

R. J. P. M. S.

Foster, Margaret (M. M. S.)
Cobb County
1918

Application for Pension Due
Deceased Pensioner

Under Act 1904

For Mrs Margaret Foster
of Cobb County
of Co. Regiment

Approved and ordered paid

1918.

J. W. LINDSEY,
Commissioner of Pensions.

You will see
that I was short
2 of these blanks
J. W. Lindsey

State of Georgia Forsyth County
To any Minister of the Gospel Judge
of the Superior or Inferior Court
or Justice of the Peace or any person
authorized to celebrate the rite
of Matrimony
You are hereby authorized to give
the honorable state of Matrimony
to Mr Joseph D Foster and
Miss Evaline M McRae accord-
ing to the Constitution and laws
of the State and this shall be your
authority for so doing
Given under my hand and
Seal of the Ordinary's Office
28th day of April 1866

W D Beatty
Ordinary.

I hereby certify That Mr Joseph
D Foster and Miss Evaline M
McRae were joined together in
the Holy Rites of Matrimony by
me on the 29th day of April 1866
J W Beatty
m. y.