

POWER OF ATTORNEY.

STATE OF GEORGIA.

COUNTY. }

herby authorize

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

Witness my hand and seal, this

day of

1903.

Executed in the presence of

[L. S.]

Hollingshead, P.V.
Cobb Co.

No.

1415

20 Fulton Co-1905

INDIGENT PENSION.

1903.

1905

Name P.V. Hollingshead

County Cobb

Co. 22nd Pa. Regt.

Approved 1905 1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta.

5/28/04

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Cobb County.

J. M. Andrews of said State and County having been presented as a witness in support of the application of R. V. Hollingshead 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? St. Andrews, Macon, Ga.
2. Are you acquainted with R. V. Hollingshead, the applicant; if so, how long have you known him? 4 years since 1868
3. Where does he reside, and how long and since when has he been a resident of this State? St. Marks, Ga. Has been raised in this State.
4. When, where and in what company and regiment did he enlist, and how do you know? I don't know personally.
5. Were you a member of the same company and regiment? No
6. How long did he perform regular military duty? Don't know
7. When and where was his command surrendered? Don't know
8. Were you present when it surrendered? No
9. Was applicant present? Don't know
10. If he was not present, where was he?
- When did he leave his command? Don't know For what cause?
- By what authority he left? Don't know How do you know all of this?

11. What property, effects or income has the applicant? (Give your means of knowledge.) Has no property and no income but his labor.
12. What property, effects or income did the applicant possess in 1898, 1897, 1896, 1895, 1900, 1901 and 1902, and what disposition, if any, did he make of same? Nothing - He bought some stock on time and had to give it up.
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? No - Had nothing to convey.
14. What is the applicant's occupation and physical condition? Farmer His health is very bad - Has some spine trouble on kidney trouble
15. Is the applicant unable to support himself by labor of any sort, if so, why? He is not able to support himself on acct. of the infirmities of age and the disease mentioned above.
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? He has been trying to farm.
17. What portion of his support for these four years was derived from his own labor or income? I cannot tell - I know he has been unable to do much.
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? He has been nearly down for some years and unable to work most of the time.
19. Who composes family? What property have they? Children's age and their earning capacity? Himself & wife. They live with and are supported by a married daughter - Have no property or income.
20. What interest have you in the recovery of a pension by the applicant? None.

Sworn to and subscribed before me, this the 11th day of March 1904.
John Andrew Ordinary.

I am a witness and have known him a long time -

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Cobb County.

Personally came before me John Andrew and John Simpson, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully R. V. Hollingshead, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

Applicant is suffering from cataracts and muscular Rheumatism. Has at this time Embargo. His eye sight is very much impaired at times almost blind. Is a deserving man, unable to earn to earn a living by manual labor and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the 11th day of March 1904.
John Andrew Ordinary. John Simpson Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cobb County.

I, John Andrew Ordinary, in and for said County, hereby certify that the applicant R. V. Hollingshead resides in said County, and has been a bona fide resident of this State since the 1st day of January 1894 and that the witnesses, viz: J. M. Andrews

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

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

I further certify that the tax digest of Cobb County show that applicant returned for taxation in his name in 1898 No Dollars of property, and in 1900 No Dollars of property, in 1901 No Dollars of property, in 1902 No Dollars of property.

In my opinion the foregoing claim is No made in good faith.
Witness my hand and seal of office, this 11th day of March 1904.
John Andrew Ordinary,
Cobb County.

NOTES.
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.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Bartow COUNTY.

W. R. Mountcastle

of said State and County, having been presented as a witness in support of the application of P. V. Hollenbach for pension under section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? W. R. Mountcastle
I live in Cartersville Bartow County Ga

2. Are you acquainted with P. V. Hollenbach, the applicant; if so, how long have you known him? Have known him since 1862

3. Where does he reside, and how long and since when has he been a resident of this State? Know him
1000 E. Co. Ga. All his life, especially since I have

4. When, where and in what company and regiment did he enlist, and how do you know? Aug 1862 Winchester Vir. in Co. I - 22 4a Regt

5. Were you a member of the same company and regiment? Same Regiment

6. How long did he perform regular military duty? From Aug 1862 to April 9th 1865

7. When and where was his command surrendered? April 9th 1865 at Appomattox Court House Vir.

8. Were you present when it surrendered? I was

9. Was applicant present? Yes he was present, since

10. If he was not present, where was he? When did he leave his command? For what cause?

By what authority he left? I was present and know personally

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 those 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?

Sworn to and subscribed before me, this the 7th day of March 1904 W. R. Mountcastle Witness.

G. W. Hindricks Ordinary. I Certify that Drs. Z. R.

and A. J. Calhoun and W. R. Mountcastle are men of

Integrity Character. G. W. Hindricks Ord., Bartow Co. Ga.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Bartow COUNTY.

Personally came before me St. L. Griffin and A. J. Calhoun, both known to me as reputable physicians

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

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

Has suffered for years with Muscular Rheumatism

Has at this time Lumbago, His eye sight is

very much impaired, at times almost blind

Is very poor, and unable to earn a living by manual labor

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

Sworn to and subscribed before me, this the 7th day of March 1904 St. L. Griffin A. J. Calhoun

G. W. Hindricks Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Bartow COUNTY.

I, G. W. Hindricks Ordinary, in and for said County, hereby certify that the applicant P. V. Hollenbach resides in said County, and has

been a bona fide resident of this State since the 7th day of March 1899

and that the witness, viz: St. L. Griffin A. J. Calhoun

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

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

I further certify that the tax digest of Bartow County show that applicant returned for taxation in his name in 1899 \$0.00 Dollars of property, in 1900 \$0.00 Dollars of property, in 1901 \$0.00 Dollars of property, in 1902 \$0.00 Dollars of property.

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

Witness my hand and seal of office, this 7th day of March 1904, G. W. Hindricks Ordinary,

of Bartow County.

NOTES.

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.

1. Before any questions are answered, the Ordinary shall swear applicants 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.

Sworn to and subscribed before me, this the
 7th day of March - 1904
W. R. Mountcastle Witness.
W. R. Mountcastle Ordinary.
 and A. J. Balkham and W. R. Mountcastle in my presence
 Testimony Character. Good W. R. Mountcastle Ord., Bartow Co. Ga.



Office of
Court of Ordinary,
 Bartow County.

G. W. HENDRICKS, ORDINARY

Bartonsville Ga. March 14th 1904

Mrs. P. V. Herlinochida

Marietta Ga.

Dear Sir: I have examined the tax digests of
 this County, and find that you have not returned
 any property of your own for taxation in several
 years, and I can safely certify that you do
 not and have not owned any for quite a
 number of years. Hope you will succeed in
 getting your application approved.

Yours truly,
G. W. Hendricks Ordinary.

Ordinary's Certificate

STATE OF GEORGIA

COUNTY

I, John E. Harris

Margaret E. Harris

Ordinary of said County, do certify that I know Margaret E. Harris the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th November 1906, that I also know.

the witness who swears to the service of husband, that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they both are truthful, trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 20 day of Oct, 1919.

(SEAL)

John E. Harris Ordinary,
County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You and you will be the first that you will true answers make to each of the questions asked you and the evidence you give will be the true and correct evidence of the facts stated in the questions." 2. Additional affidavits may be attached if said person are insufficient. 3. All affidavits must be made before the Ordinary of the County of the person to be sworn and certified by him. 4. All affidavits must be made before the Ordinary of the County of the person to be sworn and certified by him. 5. Attached copies of marriage license if obtainable. If not, prove marriage by some person, or by general reputation.

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County Coco

Name Margaret E. Harris

Widow of Samuel E. Harris

Company H

Regiment 41st Va.

Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-30-1919

May 14/62.
Mentioned in marriage record.
Died at age of 62 in the
month of May 1920.

Margaret E. Harris
Cap 1920
No. 1920

Ordinary's Certificate

STATE OF GEORGIA,

Cobb COUNTY.

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

Sworn under my hand and official seal of office this 20 day of Sept 1919.
(SEAL) Margaret G. Holmes Ordinary,
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. Only widows who married prior to January 1st, 1861, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general citation.

Widow's Pension

Under Act 1910—As Amended by Act of 1918

County Cobb

Name Margaret G. Holmes

Widow of James E. Holmes

Company H

Regiment 47th

Approved M. G. Holmes

J. W. LINDSEY,
Commissioner of Pensions,
Bryd Printing Co. State Printers, Atlanta.

10-30-19

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

Questions for Applicant

STATE OF GEORGIA,

Cobb COUNTY.

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

1. What is your name, and where do you reside? Margaret G. Holmes, Marietta Ga.
2. How long and since when have you been a continuing resident of the State of Georgia? all my life
3. When, where and to whom were you married? June 24, 1873 - Marietta Ga. to James E. Holmes
- a. Have you married since the death of first and soldier husband? No
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) June 2, 1862 Camp at Conston Bluff Ga. Volunteer Co. H. 47th Ga. Regiment
5. When and where did the commands of your husband surrender or discharge from the army? April 1865. Greenville North Carolina
6. Was your husband personally present at the time of the surrender or discharge of this command? He was
7. If he was not present state clearly where he was? ★
8. Where was his command when he left? X
- a. For what cause did he leave his command? X
- b. By whose authority did he leave his command? X
- c. For how long was he granted leave of absence? X
- e. What was his physical condition when he left his command? X
- f. What effort did he make to return to his command? X
- g. In what way was he prevented from going back to Command X
- h. Was he captured by the enemy at any time? No
- i. If so, when and where captured and where held as a prisoner, and when and for what cause released? X
- j. When and where did your first husband die? Jan 13, 1890, Marietta Ga.
- k. Were you residing together when he died? Yes
- l. If not, how long had you resided apart? X
- m. Are you now a widow? No
9. Have you or your husband heretofore been paid a pension by the State? No

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

Sworn to and subscribed before me this the

16 day of September 1919
J. M. Jones Ordinary
of Cobb County.
(SEAL)

Margaret G. Holmes

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA,

McIntosh COUNTY.

Personally before me came William C. Wylie 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? W. C. Wylie

Daniel Georgian

2. How long and since when have you known Margaret G. Holmes applicant?

Ever since she was a child

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

Since March 10th 1847 all her life

4. When and to whom was she married? June 24, 1873 How do you know? He lived in the

same house as I do

5. How long and since when did you know James Edward Holmes her husband?

all his life

6. When and where did James Edward Holmes the husband of applicant, die?

Jan. 13, 1880, Darien, Ga.

7. Were the applicant and her husband living together as husband and wife at the date of his death?

They were

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

Were they divorced? No

9. When, where and in what Company and Regiment did James Edward Holmes enlist?

June 4, 1862, Camp Johnston, Ga. Volunteers Co. "H", 47th Ga. Regiment

10. Were you a member of the same Company? I was not

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? During the entire war

12. When and where did his Command surrender, and was discharged?

Greensboro North Carolina April 1865

13. Were you personally present when it was surrendered? I was If not, where were you X X X X and how came you there? X X X X

14. Was the husband of applicant personally present at surrender? He was If not where was he? X X X X X X When, where and for what cause did he leave Command? (Give date.) X X X X X X By whose authority did he leave his Command? X X X X X X And how long was he granted leave? X X X X How do you know all this?

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

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? X X X X X X

Sworn to and subscribed before me this the

13 day of September 1879

W. C. Wylie Ordinary

of McIntosh County.

Questions for Witnesses as to Service of Husband and Marriage

New York,

STATE OF ~~NEW YORK~~

Rockland

COUNTY }

Personally before me comes Joseph Hilton, 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? Joseph Hilton, Upper Macack, New York.

2. How long and since when have you known Mrs. Margaret A. Holmes, applicant? Over sixty (60) years.

3. How long and since when has she continuously resided in this State? (Give date). Seventy-two years, Since March 12th, 1847.

4. When and to whom was she married? James Edward Holmes, June 24, 1878. How do you know? James Edward Holmes

5. How long and since when did you know James Edward Holmes, her husband? Thirty-seven years, Since 1853.

6. When and where did James Edward Holmes, the husband of applicant, die? Jan 13, 1891 at Berlin, N.J.

7. Were the applicant and her husband living together as husband and wife at the date of his death? Yes.

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

Were they divorced? ---

9. When, where and in what Company and Regiment did James Edward Holmes, enlist? Co. 1, 11th Cal. Cavalry, 1878, Voluntary Co. H, 47th Ca Reg.

10. Were you a member of the same Company? No.

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? Until the surrender.

12. When and where did his Command surrender, and was discharged? With Johnson's Army, in North Carolina.

13. Were you personally present when it was surrendered? No. If not, where were you I surrendered at Appomattox Court House. and how came you there? I was Captain and Adjutant General on the Staff of General C. A. Evans, commanding Gordon's Division.

14. Was the husband of applicant personally present at surrender? Yes. If not where was he? --- When, where and for what

cause did he leave Command? (Give date) --- By whose authority did he leave his Command? --- And how

long was he granted leave? --- How do you know all this? I have talked repeatedly with James E. Holmes and with the Captain of his Company, and knew that he was a gallant and faithful soldier.

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

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? ---

Sworn to and subscribed before me this

20th day of September, 1919

Thomas H. Wilson Surrogate
of Rockland County

(SEAL)

Joe Hilton



ORDINARY'S CERTIFICATE

State of Georgia,

.....County)

I, *M. B. Smith*.....Ordinary of said County, do
certify that I know.....*W. J. Kelly*.....the witness who swears
to the service of husband; that he is now a resident of said County and was duly
sworn by me before signing the foregoing affidavit and that he is truthful,
trustworthy, and his statement is entitled to full faith and credit.

Sworn under my hand and official seal of office this *13th* day of
Sept.....1919

(SEAL)

J. H. Smith.....Ordinary,
M. B. Smith.....County.

Ordinary's Certificate

State of..New York.....

Rockland.....County....

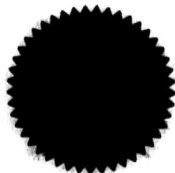
I, Mortimer B. Patterson... Surrogate..... ~~xxxxxxx~~ of said

County, do certify that I know Joseph Hilton.....

the witness who swears to service of husband and that he was duly
sworn before me before signing the foregoing affidavit and that he
is truthful, trustworthy, and his statements are entitled to full
faith and credit.

Sworn under my hand and official seal of office this *20th* day of
September,.....1919.

Mortimer B. Patterson Surrogate.
~~xxxxxxx~~
.....
Rockland.....County.



| | |
|------------------|----------|
| CLASS OF SERVICE | STANDARD |
| Time | |
| Day | Mon |
| Month | Sept |
| Year | 1919 |
| Right Letter | 11 |

If none of these three symbols appears after the signal (except in the case of a telegram, which is then to be followed by the signal appearing after the word)

WESTERN UNION TELEGRAM

NEWCOMB CARLTON, PRESIDENT GEORGE W. E. ATKINS, FIRST VICE-PRESIDENT

RECEIVED AT AN 23 MS 16

DARIEN GA 1PM SEPT 26

MRS MARGARET HOLMES

MARIETTA GA

I BELONGED TO COMPANY H FIFTH GEORGIA CAVALRY SERVED ALL THE WAR

MUSTERED OUT GREENSBORO NC

WM C WYLEY

1 19P

COFF

Ordinary's Certificate.

State of Georgia, }
.....County) }

I,....J.A..Britt.....Ordinary of said County, do
certify that I know Wm..C..Wyley..... the witness who swears
to the service of husband; that he is now a resident of said County
and was duly sworn by me before signing the foregoing affidavit and
that he is truthful, trustworthy, and his statement is entitled to
full faith and credit.

Sworn under my hand and official seal of office this...15th.....
day of Sept.....1919.

(SEAL)

J.A..Britt.....Ordinary,
..McIntosh.....County.

J.A. Britt.....Ordinary,
..McIntosh.....County.

St. James Rectory,
Marietta, Georgia.

September 4, 1919.

This is to certify that the following is a true copy from the
Register of St. James Parish:-

Married.

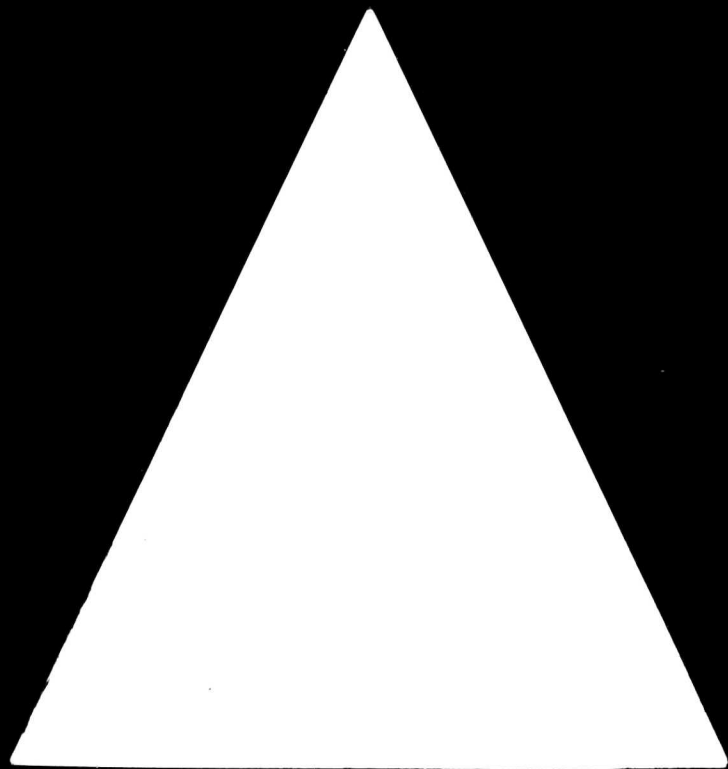
Officiating Minister.

" June 24, 1873. James E. Holmes
and Madge E. Gignilliat.

W. E. Byrnes
Presbyter. "

Randolph P. Claiborne,

Rector of St. James Parish.



STATE OF GEORGIA,

STATE OF GEORGIA,

COUNTY.

I, W. E. Dault, hereby authorize
Sam Anthony of _____

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 May 1907. Wm. J. [Signature]

Executed in presence of

M. Long [L.S.]

Waltz M. E. (Mrs.)
 Living
 Capt. Davis Coll. Co.
 To The Hon. Sec. of War Paid.
 From Father
 35
 1907.

No. 220

INDIGENT WIDOW'S PENSION,

For year ending Dec. 31, 1907.

PAID TO

Mrs. M. S. Holt
OF
Cocoa County,
Widow of John Holt
Co. K 2 Ga. Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1/31 1907.

AND HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY. }

I, M. G. Holt, 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 10
day of January 1907.

M. G. Holt [L. S.]
maker

Executed in presence of

John Anthony

Holt, M. G. (ma, I)
Johns, E. G.
Best, D. H.
To The State
of Georgia
35 1907.

No. 220

**INDIGENT
WIDOW'S PENSION,**

For year ending Dec. 31, 1907.

PAID TO

Mrs. M. G. Holt

OF

Cobb County,

Widow of John Holt
Co. K 2d Regt. Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1907.

AND HANDLED TO

024

John W. Lindsey, State Treasurer, Atlanta.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES Mrs.

M. E. Holt

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 Jan 1 - 1894 That she is the Widow of
John Holt who was a soldier in Company
K of the 2 Regiment of Co. Reserves
Volunteers, that he enlisted in said regiment on or about the month of

1863, and served in the Army up to 1865 That he died on
the _____ day of _____ 1886

age & family

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
soldier, and that she has never married since his death aforesaid, and that she became his wife in
the year 1843

I have been allowed an Indigent pension as a resident of Fulton
County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the
year ending December 31, 1907.

Sworn to and subscribed before me
this 5 day of Jan, 1907.
John Shubert Ordinary Post Office M. E. Holt
main

State of Georgia, Cobb County. }
I, John Shubert
Ordinary of said County, certify that I am well
acquainted with Mrs. M. E. Holt, 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 5 day of Jan, 1907.

Official
Seal

Ordinary of _____ County.

NOTE.—All blanks must be filled.

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

*Received by me
of Cobb County, Ga.
April 1938*

Widow's Application

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

County.....COBB
Name.....Mrs. Rosa Hood
Widow of.....James W. Hood
Date of Marriage.....Dec. 3, 1896
Date of Husband's Death.....Apr. 10, 1906
Company.....I,
Regiment.....2d Regt. Ga. State Troops.
Approved.....*L. Thos. Gillen* 193.....
Director.

RECEIVED

MAR 18 1938

L. THOS. GILLEN,
DIRECTOR

State Dept. Public Welfare,
March 18, 1938.

J. W. Hood enlisted as a private in Co. H, 2d Regt. Ga. State Troops Feb. 14, 1893. Roll exp. Jan. 31, 1894, last on file, shows him present.

Lillian Henderson
Director Confederate Records
Div.

Ordinary's Certificate

STATE OF GEORGIA.

COBB COUNTY.

I, Jas. J. Dantell Ordinary of said County, do certify that I know Mrs. Rosa Hood the applicant for pension; that she is the person she represents herself to be, and that she has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know Mrs. J. K. Crowe the witness who swears to the service of husband and/or the marriage; that Jas. J. Dantell is a resident of said County and has duly sworn to the truth of his statements 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 17 day of March 1938.
(SEAL OF ORDINARY) *L. Thos. Gillen* Ordinary.
COBB County.

INSTRUCTIONS.

1. Before any questions are answered the Ordinary shall read 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?"
2. Additional affidavits may be attached if blank space are insufficient.
3. Only witness who married prior to January 1st, 1920, are entitled.
4. If the Ordinary is unable to find the Ordinary of the County in which the applicant or witness reside and must be certified by said Ordinary.
5. Attach certified copy of marriage license, if obtainable. If not, prove marriage by some person, or to general reputation of the community.
6. Do not use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.
7. Do not take an application from any witness who is already receiving a pension.

State Dept. Public Welfare,
March 16, 1938.

J. W. Hood enlisted as a private in Co. E, 2d Regt. Ga. State Troops Feb. 14, 1863. Roll shows Jan. 31, 1864, last on file, shows him present.

Director Confederate Records
Div.

Widow's Application

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

County COBB
Name Mrs. Rosa Hood
Widow of James W. Hood
Date of Marriage Dec. 3, 1893
Date of Husband's Death Apr. 10, 1906
Company E,
Regiment 2d Regt. Ga. State Troops
Approved 2/18/38
L. Thos. Gillen
Director.

RECEIVED

MAR 18 1938

L. THOS. GILLEN,
DIRECTOR

Ordinary's Certificate

STATE OF GEORGIA.

CO B

COUNTY.

I, Jas. J. Daniell, Ordinary of said County, do certify that I know Mrs. Rosa Hood, the applicant for pension; that she is the person she represents herself to be, and that she has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know Mrs. J. N. Crowe, the witness who swears to the service of husband and/or the marriage; that Mrs. J. N. Crowe is a resident of said County and were duly sworn by me before signing the foregoing affidavit, 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 17 day of March, 1938.
(SEAL OF ORDINARY) Jas. J. Daniell, Ordinary.
of COBB County.

INSTRUCTIONS.

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

APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,

COBB

COUNTY.

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

SECTION I.

- What is your name, and where do you reside? (Give Post Office and County) Mrs. Rosa Hood, R. F. D. 2, Marietta, Cobb County, Georgia
- How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? All my life
- Give date, or year, of your birth. Nov. 6, 1871 Age? 66
- (1) When, (2) where and (3) to whom were you married? James W. Hood - Dec. 3, 1896, License obtained in Pike County, the County of Mr. Hood's residence at that time. Married in Marietta, Georgia.
- Have you married since the death of first and soldier husband? No
- When and where did your first husband die? Pike County, April 10, 1906
- Were you residing together when he died? Yes
- If not, how long had you resided apart?
- Are you now a widow? Yes
- Have you or your husband heretofore been paid a pension by the State? No
- If so, when and for what cause were you or your husband placed on the roll?

SECTION II.

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

- When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia. (Give name of Colonel and Captain.) State whether Infantry, Cavalry, Artillery, Reserves, State Guards, State Militia or State Troops. Private Cp. E, 2d Regt. Ga. State Troops, Feb. 14, 1863 - Hamilton, Harris County, Ga.
- When and where did the Commands of your husband surrender or discharge from the Service? d. do not know
- Was your husband personally present with his Command when it was surrendered or discharged? He was wounded and taken to hospital, understanding not that he was to be discharged.
- If he was not present, state specifically and clearly where he was?
- When did he leave the Command?
- For what cause did he leave?
- By whose authority did he leave?
- For how long was his leave of absence granted? d. In what way?
- What was his physical condition when he left his Command? Was on crutches from injury.
- What effort did he make to return to his Command?
- In what way was he prevented from going back to his Command?
- Was he captured by the enemy at any time?
- If so, when and where? In what prison was he held and when was he released?

Sworn to and subscribed before me, this the 17 day of March, 1938.

Jas. J. Daniell, Ordinary.
of COBB County.
(SEAL OF ORDINARY)

Rosa Hood

Applicant.

An Affidavit

(Read carefully before making this affidavit.)

State of Georgia,

County of COBB

Before me, the Ordinary of said County, comes Mrs. ROSE HOOD 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.

Rosa Hood

Sworn to and subscribed before me, this the

17 day of March, 1938
Jas. B. Smith Ordinary,
Cobb County.

Questions for Witness as to Marriage and Service of Husband.

STATE OF GEORGIA

Cobb COUNTY.

Mrs. J. M. Crowe of said State and County is hereby presented as a witness in support of the application of Mrs. J. W. Hood for the pension provided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendments of 1920 and 1937, in said State, who, after being sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? (Give Post Office and County)
Mrs. J. M. Crowe, 427 N. 4th St., Griffin, Spalding Co. Ga.
2. How long and since when have you known
Mrs. J. W. Hood applicant
all my life. She is my sister just older than myself
3. Where does she now reside, and since when has she been, continuously, a bona fide, resident citizen of this State?
All her life. Now lives in Cobb Co. Ga.
4. When and to whom was she married?
W. B. Hood How do you know? He was present.
5. How long and since when did you know
James W. Hood her husband?
About ten years - 1895 to his death 1905
6. When and where did
James W. Hood the husband of applicant, die? Apr. 10, 1905 in Pike Co. Ga.
7. Were the applicant and her husband living together as husband and wife at the date of his death?
Yes
8. If not, how long did they live apart before his death?
No
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

19 day of Aug, 1937
Jas. B. Smith Ordinary
of Cobb County.
(SEAL OF ORDINARY)

Mrs. J. M. Crowe
(Witness)
as to questions 1 to 8 inclusive

COUNTY OFFICERS

J. C. BENNETT, SHERIFF
J. W. STOREY, CLERK
W. L. JONES, ORDINARY
LOLA G. RUCKER, TAX COLLECTOR
W. H. JOHNSON, TAX RECEIVER
J. D. MOAN, CO. SCHOOL Supt.
J. T. PRESLEY, CORONER



PIKE COUNTY
"A GOOD PLACE TO LIVE"

BOARD OF
COUNTY COMMISSIONERS

M. L. DUNN, SR., CHAIRMAN
HENRY C. SALDWELL
T. S. PATTON
M. L. DUNN, JR., CLERK

ZEBULON, GA.
March 18, 1938

MARRIAGE LICENSE

STATE OF GEORGIA, COUNTY OF PIKE:
To any Judge, Justice of the Peace, or Minister of the Gospel:

You are hereby Authorized to join Mr. James W. Hood and Miss Rosa Swygert in the Holy State of Matrimony, according to the Constitution and Laws of the 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 24th day of November, 1896.

T. J. Blasingame, Ordinary.

CERTIFICATE

GEORGIA, PIKE COUNTY:

I certify that Mr. James Hood and Miss Rosa Swygert were joined in Matrimony by me, this 3rd day of December, Eighteen Hundred and Ninety Six.

F. M. Blalock, M. G.

Recorded: 12/31/96

T. J. Blasingame, Ordinary.

GEORGIA, PIKE COUNTY:

I, W. L. Jones, Ordinary of said County, do hereby certify that the above is a true and correct copy of Marriage Record of James W. Hood and Miss Rosa Swygert as appears in this office.

This the 18th day of March, 1938.

W. L. Jones

W. L. Jones, Ordinary.

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLANTA

March 19, 1938.

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

WHEREAS:

MRS. ROSA HOOD, WIDOW OF JAMES W. HOOD,

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

This, the 18th day of March 1938.

L. Thos. "Pat" G. Wain

Director, Confederate Division
State Department of Public
Welfare

*On Roll As per Mary
OK for 11/2*

0

No.

Widow's Application

To Be Put on Roll in Her Own Right, when
Husband Was on Roll at Death.

County

Cobb

Name

Mary Hooper

Widow of

J. M. Hooper

Co. A. 9

5th Battalion

of Artillery

Approved

J. W. LINDSEY

Commissioner of Pensions

Chas. P. Byrd, State Printer, Atlanta.

10/29/1912

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA.

Cobb County.

Personally before me comes Mary Hooper of said County, who, after being duly sworn, on oath says, that she is the widow of J M Hooper to whom in the County of Cobb State of Ga she was married on the 10 day of Oct 1867 and that she remained his wife, and resided with him to the date of his death in Summit 1911 and that she has not since his death remarried. At the time of his death he was a resident of Griffin County, in Griffin said State of Georgia, and he was on the Griffin Pension Roll of the State and paid a pension of \$60.00 in Griffin County for 1912 per annum, on account of being a soldier in Company A 9 Ga Cavalry (Volunteers of State Militia.)

At the death of J M Hooper he was in the use and possession of the following property. None of the cash value of \$.

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

| | | |
|----------------------------------|------------------------|------------------|
| Acres land. | <u>None except Oak</u> | <u>\$ 100.00</u> |
| Horses and Mules | | \$ |
| Hogs, Cows, etc | | \$ |
| Total Cash value of all property | | \$ |

That she is now a bonafide resident citizen of said County of Griffin 2 years Oct and she has so continuously resided since day of 19.

Sworn to and subscribed before me, this the 22 day of Oct 1912.
J M Egan Ordinary.
of Cobb County.

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

STATE OF GEORGIA.

Cobb County.

Personally before me comes W E Broome known to be responsible and truthful persons, residing in said County, who after having duly sworn on oath, say: that of their own personal knowledge Mrs Mary Hooper who made the foregoing affidavit, is the lawful widow of J M Hooper who died in Griffin County in said State of Ga on 23 day of Dec 1911 and that she has not since remarried. That she became the wife of J M Hooper on the 10 day of Oct 1867 and that she and he had resided together as man and wife continuously since 10 day of Oct 1867 and that the J M Hooper was the same man who was on the pension roll of said State of Ga from Griffin County under Oct 1910 when he died.

Sworn to and subscribed before me, this the 22 day of Oct 1912.
J M Egan Ordinary.
of Cobb County.

Widow's Application

To Be Put on Roll in Her Own Right, when Husband Was on Roll at Death.

County Cobb
Name Mary Hooper
Widow of J M Hooper
A. A. 9 Ga Cavalry
Approved _____

10/24/12
J. W. LINDSEY
Commissioner of Pensions
Chas. F. Boyd, State Printer, Atlanta

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Cobb County.

Personally before me comes J. B. Anderson & William who after being sworn on oath says, that they are freeholders of said County, and that they know William of said County and knew her said husband Mary at his death on the day of Dec 1911 that she and he were in the use, possession and control of the following property at his death to wit: nothing except household goods

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

of the value of \$.....
Sworn to and subscribed before me, this the 22nd day of Sept 1912
J. M. Lamm Ordinary
of Cobb County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cobb County.

Ordinary of said County, do certify, that, I know Mary 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 22nd day of Sept 1912. I also know J. B. Anderson & William witness as to marriage and I also know J. B. Anderson & William who I know to be a resident free holder of said County that all of the foregoing were duly sworn by me before signing the respective affidavits and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

That the tax Books of Cobb County shows that the returned property to the amount of \$..... for 1908 \$..... for 1909 \$..... for 1910 \$.....

Sworn under my hand and official seal, this 22nd day of Sept 1912
(SEAL.) J. M. Lamm Ordinary.
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 present, or by general reputation.

MARRIAGE LICENSE

STATE OF GEORGIA, Cobb County.

To any Minister of the Gospel, Judge of the Superior Court, or
Justice of the Peace, To Celebrate:

YOU ARE HEREBY AUTHORIZED TO JOIN IN THE HONORABLE STATE OF MATRIMONY

J. M. Hooper and *Mrs Mary Pope*

According to the rites of your church, provided there be no lawful cause to obstruct the same,
according to the constitution and laws of the state; and for so doing this shall be your license.

Given under my hand and seal

day of *October 1867*

John S. Campbell (SEAL)
ORDINARY

I hereby certify, that

Mary Pope

HOLY BONDS OF MATRIMONY

on *10* day of *October 1867*, by me.

Robert L. Simon J. P.

OFFICE OF ORDINARY.

GEORGIA, COBB COUNTY.

I, J. M. GANN, Ordinary and ex-officio Clerk of the Court of Ordinary (I having no clerk)

do hereby certify that I have compared the foregoing copy of

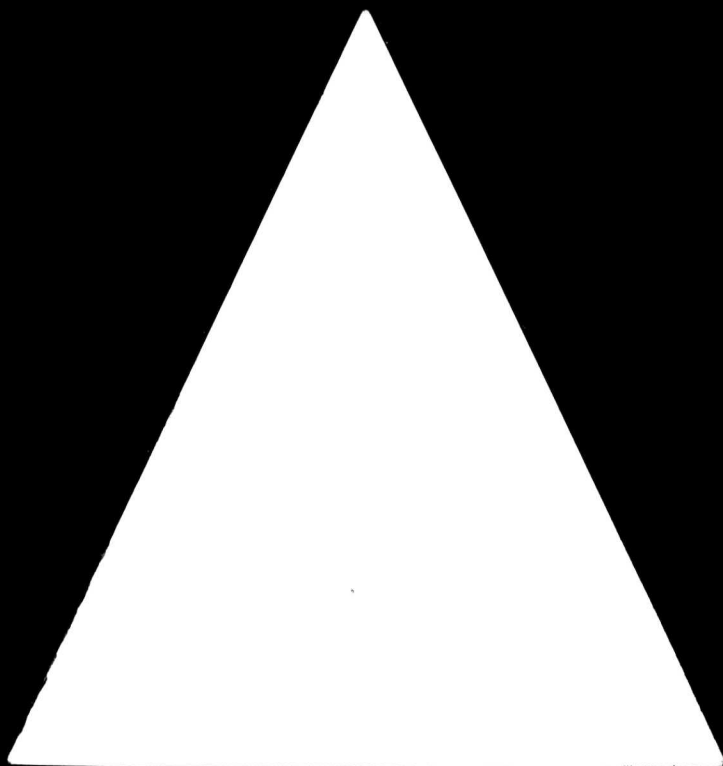
Marriage License & Certificate
J. M. Hooper & Mary Pope

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

, folio

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of the Court of
Ordinary, this the *28* day of *Oct* 19*72*

J. M. Gann
ORDINARY AND EX-OFFICIO C. C. O.



Hopkins Annie
Cobb County
Put on Roll
No. _____

Widow's Application

To Be Put on Roll in Her Own Right, when
Husband Was on Roll at Death.

County Cobb
Name Annie Hopkins
Widow of W. D. Hopkins

Approved _____

J. W. LINDSEY
Commissioner of Pensions

Chas. F. Byrd, State Printer, Atlanta.

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

Cobb County.

Personally before me comes Annice Hopkins of said County, who, after being duly sworn, on oath says, that she is the widow of D. D. Hopkins to whom in the County of Cobb State of Ga she was married on the day of 1836 and that she remained his wife, and resided with him to the date of his death in Oct 4, Dec 10, 1869 and that she has not since his death remarried. At the time of his death he was a resident of Cobb County, in Ga said State of Georgia, and he was on the Independent Pension Roll of the State and paid a pension of \$50.00 in Cobb County for 1869 per annum, on account of being a soldier in Company 7 Ca Regiment. (Volunteers of State Militia.)

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

What property of any kind and of any value have you in your use, control and possession now, and the cash value (State fully.) None

| | |
|----------------------------------|----|
| Acres land | \$ |
| Horses and Mules | \$ |
| Hogs, Cows, etc | \$ |
| Total Cash value of all property | \$ |

That she is now a bonafide resident citizen of said County of Cobb and she has so continuously resided since all my life day of 10

Sworn to and subscribed before me, this the 3 day of Sept 1912 Annice Hopkins of Cobb County.

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

STATE OF GEORGIA,

Cobb County.

Personally before me come W. A. Whitley known to be responsible and truthful persons, residing in said County, who after having duly sworn on oath, say: that of their own personal knowledge Annice Hopkins who made the foregoing affidavit, is the lawful widow of D. D. Hopkins who died in Cobb County in said State of Ga on 8 day of Nov 1909 and that she has not since remarried. That she became the wife of D. D. Hopkins on the day of 1836 and that she and he had resided together as man and wife continuously since day of 1836 and that the D. D. Hopkins was the same man who was on the pension roll of said State from Cobb County when he died.

Sworn to and subscribed before me, this the 13 day of Sept 1912 W. A. Whitley of Cobb County.

Widow's Application

To Be Put on Roll in Her Own Right, when Husband Was on Roll at Death.

County Cobb
Name Annice Hopkins
Widow of D. D. Hopkins

Approved

J. W. LINDSEY
Commissioner of Pensions

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Cobb County.
Personally before me comes *N. R. Whitley* who after being sworn on oath says, that they are freeholders of said County and that they know *Annie Baptists* of said County and knew her said husband *J. D. Baptists* at his death on the *9* day of *Oct* 190*9* that she and he were in the use, possession and control of the following property at his death to wit: *nothing*
of the value of \$ *—* That she is now in the use, possession and control of the following property to wit: *nothing*
of the value of \$ *—*

Sworn to and subscribed before me, this the

13 *J. M. Gamm* 191*0*

Ordinary *N. R. Whitley*
of *Cobb* County.

ORDINARY'S CERTIFICATE.

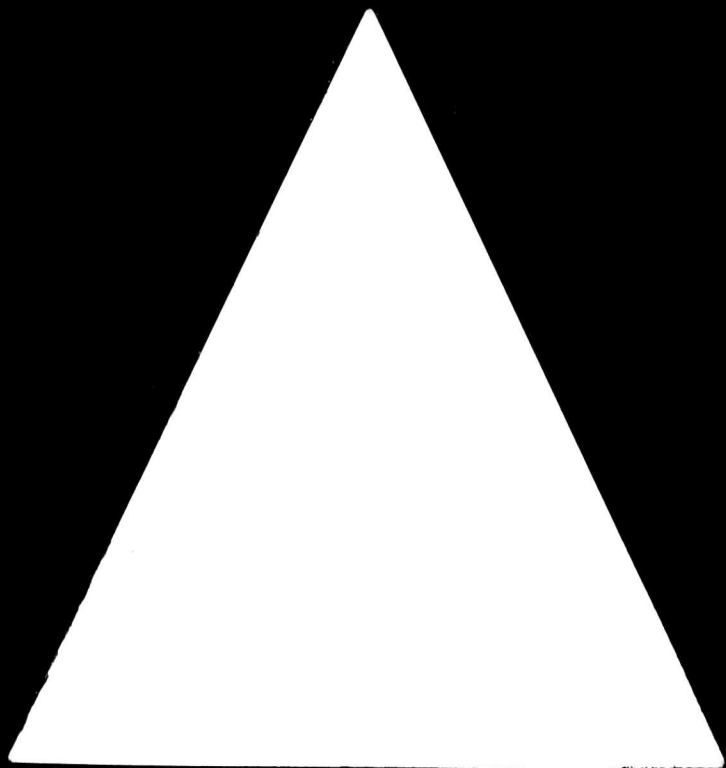
STATE OF GEORGIA.

Cobb County.
I, *J. M. Gamm* Ordinary of said County, do certify, that, I know *Mrs. Annie Baptists* 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 *13* day of *Oct* 190*9* also known to *N. R. Whitley* witness as to marriage and I also know *N. R. Whitley* who I know to be a resident free holder of said County that all of the foregoing were duly sworn by me before signing the respective affidavits and that they are truthful and trustworthy and their statements are entitled to full faith and credit.
That the tax Books of *Cobb* County shows that *Ann* returned property to the amount of *—* for 1908 *\$00* for 1909 *\$00* for 1910 *\$00*
Sworn under my hand and official seal of office this *13* day of *Sept* 191*0*
(SEAL.) *J. M. Gamm* Ordinary.

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

Maryia Cobb Ordinary
I J M Gamm ordinary of said County
Certify that all records in this office including
marriage records of said County were burned
together with the Court books by Sherman
Army in Fall of 1864
Oct 18 1910 J M Gamm
only

any



POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____, hereby 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 _____, 1900.

Executed in presence of _____

(L. S.)

*Pension office 4/1-1900
Has applicant with
his Criminal & when
it commenced at off
Director C. H. off
Date it clearly - and
let various cover
that the money was
present & that he knew
the applicant was
there*
*John Lindsey
Clerk of Prison*

Hopkins, D.D.
Off. Clerk

No. _____

INDIGENT PENSION, 1900.

Name _____

County _____

Co No - 7 - 4a

Approved _____ 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

2/7-1901
10/15-1901

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 _____, 1900.

Executed in presence of

(L. S.)

*Review office 8/11-1900
has applicant with
his Command - when
it Commanded at Off
training C. A. of
A. it clerk - and
let military laws
two the military was
must not let him
they appoint was
this*

*Goodwin
Army of Russia*

No.

INDIGENT PENSION,

1900.

Name *D. D. Hopkins*

County

Cobb

Approved

1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

John W. Lindsey, State Finance, Atlanta.

*217-1900
4/10-1901*

Questions for Applicant.

STATE OF GEORGIA,

County.

I, *D. D. Hopkins*, 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 the following questions, depose and answers as follows:

1. What is your name and where do you reside? (give State, County and post office) *D. D. Hopkins, Roswell, Cobb County, Ga.*
2. How long and since when have you been a resident of this State? *68 years, all my life.*
3. When and where were you born? *10 of March 1832 in French Creek*
4. When and where in what company and regiment did you enlist or serve? *8 of March 1862 Company K T. 1st Ga. Volunteer*
5. How long did you remain in such company and regiment? *till the surrender in April 1865*
6. For how long a period did you discharge regular military duty? *2 years and 2 months*
7. When, where and under what circumstances were you discharged from service? *War between at Appomattox Virginia and paroled 23 day of April 1865*
8. What is your present occupation? *farming when not sick any thing*
9. How much can you earn (gross) per annum by your own exertions or labor? *very little*
10. What has been your occupation since 1865? *farming*
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? *disability - personal*
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? *disability with inflammation in my shoulder and back have been unable to labor for the last two years*
13. What property, effects or income do you possess, and its gross value? *no property at all and no income what ever*
14. What property, effects or income did you possess in 1894, 1895, 1896, 1897, 1898 and 1899, and what disposition, if any, did you make of same? *had no property in any of these years and now no property*
15. In what County did you reside during those years, and what property did you then return for taxation? *in Cobb County did not return any property*
16. How were you supported during the years 1898 and 1899? *by my wife who has become of age and left for herself*
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? *did not know contribute or not not add to work*
18. What was your employment during 1898 and 1899? What pay did you receive in each year? *was up now on the farm and little I could do*
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? *myself and wife have no homestead have no means or support*
20. Are you receiving any pension? If so, what amount, and for what disability? *receive no pension have never applied before*

Sworn to and subscribed before me this

1900.

Ordinary,

County.

Applicant.

D. D. Hopkins
Roswell P.O.

Every Question MUST Be Answered.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Cobb COUNTY.

I, J. A. Reed of said State and County, having been presented as a witness in support of the application of D. D. Hopkins for pension under Section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

- What is your name and where do you reside? J. A. Reed
Roswell Cobb County Georgia
- Are you acquainted with D. D. Hopkins, the applicant; if so how long have you known him? yes have known him 40 years
- Where does he reside, and how long and since when has he been a resident of this State? Roswell Cobb County Georgia since I know him
- When, where and in what company and regiment did he enlist, and how do you know? when he was a volunteer I was with him
- Were you a member of the same company and regiment? I was
- 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? over 2 years
he was a soldier in the 1st Georgia Cavalry
and was discharged in April 1865
- What property, effects or income has the applicant? (Give your means of knowledge.) he has no property and no income I see him
live about 1/4 of a mile from here
- What property, effects or income did the applicant possess in 1895, 1897, 1898 and 1899, and what disposition, if any, did he make of same? never had any

- Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? he has no property
- What is the applicant's occupation and physical condition? he is a house owner
and has no occupation in his work and is unable to work
- Is the applicant unable to support himself by labor of any sort, if so, why? he is
unable to support himself by labor
- How was he supported during the years 1898 and 1899? he did not work
and was supported by his two sons I suppose
- What portion of his support for these two years was derived from his own labor or income? I should say from his condition that did very little
- Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? he is fixed unable to support himself
on account of having rheumatism for the last
two or four years

16. What interest have you in the recovery of a pension by this applicant? none what ever
Sworn to and subscribed before me, this 2nd day of July 1900. J. A. Reed
the J. A. Reed Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Cobb COUNTY.

I, J. A. Reed and D. D. Hopkins, both known to me as reputable physicians of said County, who being severally sworn, say on oath that they have examined carefully D. D. Hopkins, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

Dr. D. Hopkins has a rheumatism
in his back & shoulders & arms,
so severely that he cannot
continue for months, therefore
he cannot do any work

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 the 2nd day of July 1900.

Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cobb COUNTY.

I, J. A. Reed, Ordinary in and for said County, hereby certify that the applicant D. D. Hopkins resides in said County, and has been a bona fide resident of this State since the 10th day of July 1865, and that the witnesses, viz J. A. Reed and D. D. Hopkins 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 1898 nothing Dollars of property, and in 1899 nothing Dollars of property.

In my opinion the foregoing claim is just in good faith.
Witness my hand and seal of office, this 2nd day of July 1900.

J. A. Reed Ordinary,
of Cobb County.

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

Cobb County.

I, D. D. Hopkins hereby authorize

F. M. Hembree of Roswell

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

D. D. Hopkins at Roswell

by Hand

Witness my hand and seal, this 2nd day of January 1902.

D. D. Hopkins [L. S.]
mark

Executed in presence of

L. E. Hembree

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, D. D. Hopkins hereby authorize

F. M. Hembree of Roswell

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

me at Roswell

by Hand

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

D. D. Hopkins [L. S.]
mark

Executed in presence of

W. E. Sherman

Hopkins, D. D.,
Cobb County

COPIES SECTION 124.
(FOR THOSE ALREADY ENROLLED.)

No. 460

INDIGENT

SOLDIER'S PENSION

1902.

Name D. D. Hopkins

County Cobb

Co. H Regiment 7th

WARRANT ISSUED

464 1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Hembree

Gen. W. Lindsey, State Printer, Atlanta.

no data

Hopkins, D. D.,
Cobb Co

COPIES SECTION 124.
(FOR THOSE ALREADY ENROLLED)

No. 701

INDIGENT

SOLDIER'S PENSION

1907.

Name D. D. Hopkins

County Cobb

Co. H Regiment 7th

WARRANT ISSUED

JAN 21 1907.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Hembree

Gen. W. Lindsey, State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears *D D Hopkins* 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 *11* day of *March* *1870*; that he is *61* years old and by occupation a *farmer* that he enlisted in the military service of the Confederate States for of the State of *Georgia* during the war between the States, and served for the term of *4 years* in Company *H*, of *7*th Regiment of *the 1st*; that his physical condition is as follows: *Due to Infirmary & 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 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 *11* day of *January*, 1902.

Ordinary.

STATE OF GEORGIA,

Cobb County.

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

Given under my official signature and seal, this *6th* day of *January*, 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 *D D Hopkins* of *Cobb*

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 18____; that he is _____ years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of _____ in Company *H*, of *7*th Regiment of *the 1st*; that his physical condition is as follows: *Infirmary & Poverty*

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this the *11* day of *January*, 1907.

Ordinary.

State of Georgia,

Cobb County.

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

Given under my official signature and seal this *11* day of *January*, 1907.

Ordinary.

Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, P. P. Hopkin hereby authorize

F. L. Kemble of Knox
to receive and receipt for the pension allowed and request that he remit same to
me at Knox
by han

Witness my hand and seal, this 6 day of January, 1903.

Executed in presence of

L. E. Humber

P. P. Hopkin [L. S.]
mark

no data

Hopkin, P. P.
Cobb Co.

CODE SECTION 154.
(FOR THOSE ALREADY ENROLLED.)

No. 473

INDIGENT

SOLDIER'S PENSION
1903.

Name P. P. Hopkin
County Cobb
Co. H Regiment 7th

WARRANT ISSUED

Jan 3 1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

F. L. Kemble
Gen. Hartsell, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, P. P. Hopkin hereby authorize

F. L. Kemble of Knox
to receive and receipt for the pension allowed and request that he remit same to
me at Knox
by han

Witness my hand and seal, this 2 day of January, 1904.

Executed in presence of

L. E. Humber

P. P. Hopkin [L. S.]
mark

no data

CODE SECTION 154.
(FOR THOSE ALREADY ENROLLED.)

No. 473

INDIGENT

SOLDIER'S PENSION
1904.

Name P. P. Hopkin
County Cobb
Co. H Regiment 7th

WARRANT ISSUED

Jan 2 1904.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

F. L. Kemble
Gen. W. Hartsell, State Printer, Atlanta.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cash County.

Personally appears *D D Hopkins* of *Cash*

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the *10* day of *March* 1840; that he is *62* years old and by occupation a *farmer*, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of *4 years* in Company *26*, of *7th* Regiment of *Volunteers*; that his physical condition is as follows: *owing to infirmity and poverty he is unable to support himself*

that his property consists of the following items:

nothing

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of _____ county been allowed a pension for the year 1 _____

Sworn to and subscribed before me, this *10* day of *Jan* 1903.

J J Hopkins

Ordinary.

STATE OF GEORGIA,

Cash County.

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

Given under my official signature and seal, this *10* day of *January* 1903.

Ordinary

Cash County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cash County.

Personally appears *W H Hopkins* of *Cash*

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the *10* day of *March* 1840; that he is *61* years old and by occupation a *farmer*, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of *4 years* in Company *26*, of *7th* Regiment of *Volunteers*; that his physical condition is as follows: *owing to infirmity and poverty he is unable to support himself*

that his property consists of the following items:

nothing

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

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

Sworn to and subscribed before me, this *10* day of *Jan* 1904.

J J Hopkins

Ordinary.

STATE OF GEORGIA,

Cash County.

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

Given under my official signature and seal, this *10* day of *Jan* 1904.

Ordinary

Cash County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Colt COUNTY.

I, J. J. Hopkins hereby authorize

F. M. Kumbier of Roswell

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

me at Roswell

by Hand

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

J. J. Hopkins [L. S.]
mar

Executed in the presence of

L. E. Kumbier

POWER OF ATTORNEY.

STATE OF GEORGIA,

Colt COUNTY.

I, J. J. Hopkins hereby authorize

F. M. Kumbier of Roswell

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

me at Roswell

by Hand

WITNESS my hand and seal, this 8 day of January 1906.

J. J. Hopkins [L. S.]
mar

Executed in the presence of

L. E. Kumbier

Hopkins, J. J.,
Colt Co.

(FOR THOSE ALREADY ENROLLED.)

No. 618

INDIGENT
SOLDIER'S PENSION
1905.

Name J. J. Hopkins
County Colt
Co. A Regiment 7

WARRANT ISSUED

1/23 1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO
F. M. Kumbier

ONE W. HARRISON KUMBIER, FOR STATE PRINTER, ATLANTA.

no date

Hopkins, J. J.,
Colt County

(FOR THOSE ALREADY ENROLLED.)

No. 623

INDIGENT
SOLDIER'S PENSION
1906.

Name J. J. Hopkins
County Colt
Co. H Regiment 7 Ga

WARRANT ISSUED

1/22 1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO
Kumbier

THE ATLANTA PRINTING AND PUBLISHING CO., ONE W. HARRISON, ATLANTA.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears D. D. Hopkins 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 11 day of March 1840; that he is 62 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 years in Company 26, of 7th Regiment of Cavalry; that his physical condition is as follows: Infirmity and poverty

that his property consists of the following items:

nothing

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

Deponent desires to participate in the benefits of the Act approved December 16th, 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 27 day of January 1905.

John H. W. H. H. H. Ordinary.

STATE OF GEORGIA,

Cobb County.

I, John H. W. H. H. H. Ordinary of said County,

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

Given under my official signature and seal, this 27 day of January 1905.

John H. W. H. H. H. Ordinary Cobb County.

NOTE.—The blank spaces must be filled.

NOTE.—Affidavit should not be attested before January 1st, 1906.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Cobb County.

Personally appears D. D. Hopkins 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 11 day of March 1842; that he is 62 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 years in Company 26, of 7th Regiment of Cavalry; that his physical condition is as follows: Infirmity and poverty

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act approved December 16th, 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 1905.

Sworn to and subscribed before me, this 27 day of January 1905.

John H. W. H. H. H. Ordinary.

State of Georgia,

Cobb County.

I, John H. W. H. H. H. Ordinary of said County,

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

Given under my official signature and seal, this 27 day of January 1905.

John H. W. H. H. H. Ordinary Cobb County.

NOTE.—The blank spaces must be filled.

NOTE.—Affidavit should not be attested before January 1st, 1906.

GEORGIA, Cobb County.

I, J. M. Gann, Ordinary of said county, do certify that I personally know Mrs. Annie Hopkins, the applicant, and that she is the lawful widow of S. D. Hopkins, and was on the 1907 Pension Roll of said Cobb county, and was paid a Pension from Cobb county for 1907, and at the time of his death on the 8 day of October 1907, there was due to him and unpaid his Pension of 14.00 dollars from the State of Georgia, and I know W. H. Whitley, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 4th day of July 1908.
J. M. Gann Ordinary.
Cobb County.

Hopkins, D. D.

Cobb County

No. _____

190____

**Application for Pension
Due Deceased Soldier
UNDER ACT 1891.**

By

Mrs. Annie Hopkins

Widow of S. D. Hopkins

of Cobb County.

7th Regt. Vol.

Approved and Paid

190____

J. W. LINDSEY,

Commissioner of Pensions.

GEORGIA, _____ County.

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

Pension Roll and paid from _____ for 190____.

Witness my hand this _____ day of _____ 190____.

Attested before me:

Application for Pension Due Deceased Soldier

UNDER ACT APPROVED OCTOBER 9, 1891.

STATE OF GEORGIA, Cobb County.

Personally before me comes Mrs. Anna Napkins of said county, after being duly sworn, on oath says that she is the widow of E. D. Napkins who was duly enrolled as a Soldier Pensioner from the county of Cobb and was paid a Pension of Sixty

Dollars from Cobb county for 1902, and that the said E. D. Napkins died in Cobb county on the 8 day of October 1909, and at the time of his death a Pension of Sixty Dollars was due him from Cobb county

and unpaid for 1902. Applicant further swears that she married the said E. D. Napkins on the 24 day of January 1857, in Cobb county and State of Georgia and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 24 day of January 1902.
W. H. Napkins N.B. Ordinary of Cobb County. [L. S.]
Anna Napkins [L. S.]

AFFIDAVIT OF WITNESS.

GEORGIA, Cobb County.

Personally before me comes W. A. Tillet, who on oath says that he knew E. D. Napkins while in life and that he knows that Mrs. Anna Napkins the above applicant; that he knows that the said E. D. Napkins and Anna Napkins were in due form of law married in the county of Cobb in the State of Georgia on the 24 day of January 1857, and that they resided together as husband and wife from date of marriage to the day of his death on the 8 day of October 1909, and I now know that she is his dependent widow.

Sworn to and subscribed before me this 24 day of January 1902.
W. H. Napkins N.B. Ordinary of Cobb County. [L. S.]
W. A. Tillet [L. S.]

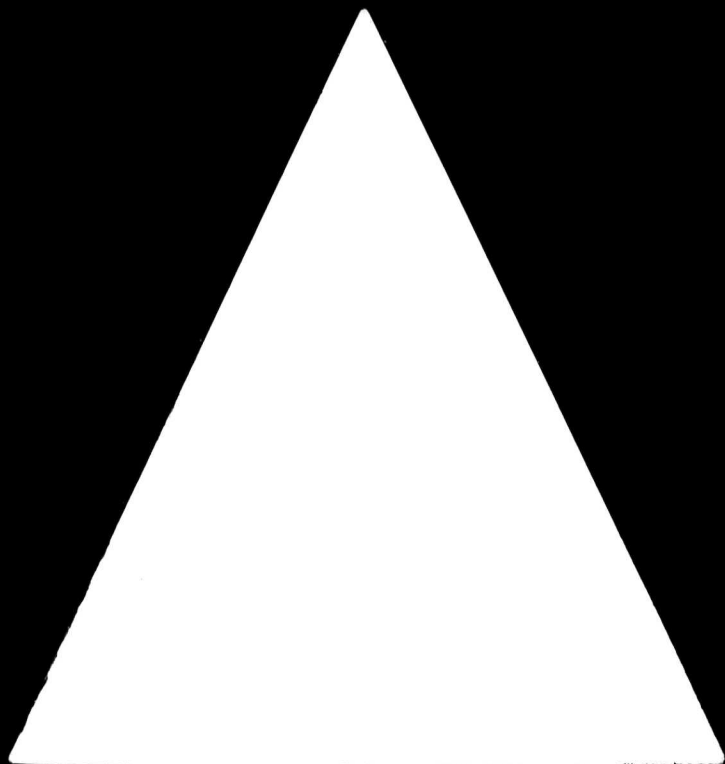
Georgia } Before me Full Member
Cobb County of said County an
Officer of said State authorized
by Law to administer oaths,
Personally appeared Wm A Whitley,
who on oath says that he was a
member of Comp'y H 7th Regiment
Georgia volunteers and that
J D Hopkins was a member of
said Company and Regiment
and that he Wm A Whitley knows
of his own knowledge that
said J D Hopkins was with
his command when it was surrendered
at Appomattox Court House
Virginia and was surrendered with
his company & Regiment and
paroled on the 23rd of April 1865
Sworn to and subscribed before
me the 24th of September 1900
Full Member } Wm A Whitley
d 11/11 }

Georgia } Before me Full Member
Cobb County of said County an
Officer of said State authorized by
Law to administer oaths Personally
appeared John R Kirk who on oath
says that he was a member of Comp'y
H 7th Georgia volunteers and that
he was with said company and
Regiment at Appomattox Court House
at the time of Gen Lee's Surrender
and knows of his own knowledge
that J D Hopkins was with his
company and Regiment at that
time and was surrendered and paroled
on or about the 23rd of April 1865
Deponent further swears that J D
Hopkins was a good and faithful
Soldier and was not at any time
away from his command without
Leave Sworn to and Subscribed
before me the 24th of September 1900
Full Member d 11/11 } J R Kirk

Georgia } Before me F M Hembree
 Cobb County } of said county an officer
 of said State Authorized by Law to
 administer oaths. Personally appeared
 D D Hopkins who on oath says
 that he is the D D Hopkins whose
 applicant for pardon is here to
 attached and he swears positively
 that he D D Hopkins was with
 his company and Regiment when
 surrendered and paroled at
 Appomattox Court House Virginia
 Defendant further swears that
 he never did at any time leave
 his command without leave of
 absence sworn to and subscribed
 Before me the 24 of September 1900
 F M Hembree } D D Hopkins
 1900/11 } mar

Georgia Cobb } I John A Stone
 County } ordinary in and for
 said county hereby certifying that witness
 in applicant of D D Hopkins for pardon
 is not of a Kirk and Wm O Whitten
 and in said county are of trustworthy
 character and that their statement are
 entitled to full faith and credit
 This Oct 4 1900 } J A Stone Ordg

D D Hopkins is a
 N D duty Commission
 by and according to
 the Law of the State
 Oct 4 1900



Horn, N. A.
Colb Co

No. 3511

Col.

SOLDIER'S PENSION

1895.

Name

N. A. Horn

County

Colb Co

Disability

Leg

Amount,

\$50

6/25

1895.

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

R. C. Smith of Ga. for
J. M. Stone

Geo. W. Harrison, Secretary, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA.

Colb Co

COUNTY.

Know all Men by These Presents, That I

N. A. Horn

County of Colb Co State of Georgia

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 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 and all moneys that may be sent by the Government, 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 June 1895.

*[L. S.]

Executed in presence of us:

J. M. Stone

11/1/11 Horn

DIRECTIONS:

If allowed, send amount by

at

and oblige.

to me

POWER OF ATTORNEY.
STATE OF GEORGIA,

Know all Men by These Presents, That I,

County in said State, do hereby appoint

of *Monetta* *Da.* 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 *June* 1895.

Executed in presence of us:

[L. S.]

DIRECTIONS:

If allowed, send amount by

to me

, and oblige.

For Use of Applicants Who Have Not Heretofore Drawn.

STATE OF GEORGIA,

PERSONALLY appears

County, *Cobb* of *N. A. Horn* of *Cobb*

County, State of Georgia, who being duly sworn says on oath that he was born on the *13th*

day of *January* 1844, that he is a bona fide citizen and resident of Georgia, and

has been continuously since the day of *May* 1865

that he enlisted in the military service of the Confederate States (or the State of

) during the war between the States, and served as a

in Company *E* of *8th* th Regiment

of *Arkansas* Volunteers *Ligsdell's* Brigade; that whilst engaged in

such military service, at the battle of *Resacca* in the State

of *Georgia*, on the *14th* day of *May* 1864, he was

disabled as follows: *by a gunshot striking the*

right thigh or just below the knee, tearing

and fracturing the upper part near the

thigh of the frontal leg or shin bone - the

said bone was so torn up that a great

deal of the fractured bone worked out for sev-

eral years after it was wounded - the said

fractured bone is so fractured and so much of

it worked out that it has never grown back

to its proper place but remains unammuted

only by muscles, flesh &c. On account of said

wound deponent is compelled at all times to

use either a crutch or stick - the said wound

under the said leg essentially and substan-

tially useless - deponent is compelled to stop

and is unable to do any work about

Dependent desires to participate in the benefits of the Act approved October 24th, 1887, and the Acts

amendatory thereof, and makes application for the allowance to which he is entitled for the year thereunder,

ending October 26th, 1895.

Sworn to and subscribed before me, this the

18th day of *June* 1895. *N. A. Horn*

Da. Stone Ordinary.

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

of the disability. If claim is based on disease, give full and connected history of disease, tracing it directly to the service.

NOTE.—Do not trouble to mention wounds which do not disable.

NOTE.—The Ordinary will see that all blank spaces are filled when the affidavits are made.

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

Horn, N. A.
Cobb Co
L. No. *3511* *Cobb*
SOLDIER'S PENSION
1895.
Name *N. A. Horn*
County *Cobb*
Disability *Leg*
Amount *50*
6/2/95
RICHARD JOHNSON,
Secretary Executive Department.
WARRANT HANDLED TO
R. C. Jernin of Ga. Fed
Ch. Stone
Gen. W. H. Harrison, *Washington, D.C.*

AFFIDAVIT FOR WITNESSES.

Form 2.

STATE OF GEORGIA,

Cobb County.

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

J. H. Hardage, A. B. Smith

and *W. J. Boring*

each of whom, being duly sworn according to law,

severally say, under oath, that they are personally well acquainted with

N. A. Horn

whose application is herewith presented for a pension,

that he served in Company

of the

Regiment of

Brigade, and from our personal knowledge he was injured by the service as follows: (give full statement,

and tell in your own language when and how the injury happened, and how badly applicant is disabled from

work. If he does any labor, or can do any, state what.) *We have known and been near neighbors to the applicant prospecting 8, 10 & 17 years. Mr. Horn has during this time complained of a wounded leg, the leg as described by him in his affidavit - he is unable to do much work, and that of a light nature - he is compelled at times to stop work and rest on account of the said wounded leg - He uses a crutch or stick when he is walking about.*

We do not know the nature or extent of his wound, only from observation or from his complaining. He tries to push sometimes - he drives and hauls with a wagon sometimes. We know that on account of the said wound that the applicant is not able to make a living for himself.

We personally know above stated facts. *We were with him in the army and have known him ever*

that he was honorably discharged or retired from the service on

day of

Applicant is permanently disabled as stated and has been so to

our certain knowledge ever since *we first knew him* We have no interest in the recovery of a pension by him.

Sworn to and subscribed before me, this

18th day of *June*

1895.

J. H. Hardage

Ordinary.

J. H. Hardage, Mayor, Kennesaw

A. B. Smith

W. J. Boring

NOTE 1.—The Ordinary will see that the full text of the Affidavit is understood by the witnesses, and that they are legally

qualified to the same.

2. Witnesses are asked to make their statements full and explicit.

3. All blank spaces must be filled when signed.

PHYSICIANS' AFFIDAVIT.

Form 3.

STATE OF GEORGIA,

Cobb 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 personal examination,

say that the present condition of applicant is as follows:

and that said condition is permanent.

We further say that said condition arises from the following facts:

We have treated applicant professionally for _____ years, and his condition, as above

stated, does

arise from any hereditary or congenital cause, nor from any vicious or

intemperate habits.

Sworn to and subscribed before me, this

day of

1895.

ORDINARY.

NOTE 1.—The physicians will state fully the extent of the wound, and then give facts to show the extent of the disability resulting therefrom.

NOTE 2.—If claim is for disability resulting from disease, state how the disease is known to result from the service as a soldier. Also state how long physicians have known and treated applicant.

NOTE 3.—The physicians will be careful to fill every blank space in oath.

Form 4.

STATE OF GEORGIA,

Cobb County.

I, *J. H. Stone* _____ Ordinary of said County,

do certify that I am well acquainted with *N. A. Horn* _____ the

applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and he is disabled, as he claims, and I know he is the individual he represents himself to be, and that he resides in this County. I also certify that the foregoing witnesses, to-wit:

J. H. Hardage, A. B. Smith, and W. J. Boring

are persons of respectability, and that their statements are worthy of full credit and belief.

Given under my official signature and seal this *18th* day of *June* 1895.

J. H. Stone

Ordinary *Cobb* County.

POWER OF ATTORNEY.
STATE OF GEORGIA.

Form 3.

Cobb County.

County of Cobb State, do hereby appoint

of Manitla 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 person aforesaid.

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

day of April 1895.

Executed in presence of us:

G. M. Johnson

DIRECTIONS.

If allowed, send amount by

to me

and oblige.

at

to

SOLDIER'S PENSION

1895.

Name

County

Disability

Amount, \$

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

For Use of Applicants Who Have Not Heretofore Drawn.

Form 1.

STATE OF GEORGIA,

Cobb County.

PERSONALLY appears S. A. Horn of Manitla

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 continuously since the

day of May 1861, that he enlisted in the military service of the Confederate

States (or the State of

) during the war between the

States, and served as a Private in Company E, of 8th Regiment

of Polk's Volunteer Light Brigade, that whilst engaged

in such military service, at the battle of Kennesaw in the State

of Georgia, on the 14th day of May, 1864, he was

disabled as follows: from a gunshot wound in the right

thigh which would have disabled him so that

he was never able to do any more work

which said wound almost entirely

disabled him from

usual labor. He was unable to

follow the King from Birmingham in 1864.

Particulars of bones worked out

of the leg - deponent is

rendered incapable of doing

any work to perform the ordinary

man's avocations of life.

Deponent is compelled to use

stick or crutch at times.

Deponent desires to participate in the benefits of the Act approved October 3d, 1862, and the Acts amendatory thereof, and makes application for the allowance to which he is entitled for the year thereunder, ending October 3d, 1895.

Sworn to and subscribed before me, this

18th day of April, 1895.

J. H. Stone

Ordinary.

Note.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability. If claim is based on disease, give full and connected history of disease, tracing it directly to the service.

Note.—Do not trouble to mention wounds which do not disable.

Ex Dpt 23 May 1895
Proofs on not satisfied
try - See notes -
Rich Johnson
Sec

AFFIDAVIT FOR WITNESSES.

Form 3.

STATE OF GEORGIA,

Gordon County.

PERSONALLY appears before me, the undersigned, Ordinary in and for said County, J. M. Green and M. P. Mathis each of whom, being duly sworn according to law, severally say, under oath, that they are personally well acquainted with N. A. Horne

whose application is herewith presented for a Pension,

and that they served with him in the army, and from our personal knowledge he was injured by the service as follows: (give full statement, and tell in your own language how badly applicant is disabled from work.

If he does any labor, or can do any, state what.) We know that N. A. Horne was in the Confederate Army at Resaca Ga. We heard after the Battle that he was wounded in the knee.

PHYSICIAN'S AFFIDAVIT.

Form 2.

STATE OF GEORGIA,

Cobb County.

PERSONALLY comes before me, Dr. Stone Ordinary of said County, Chas. A. Childs and Geo. Smith M.D., both known to me as reputable physicians of said county, who being severally sworn, say on oath, that they have carefully examined N. A. Horne, and after such personal examination, say that the applicant has been injured as follows:

He is a gun shot wound in right leg just below knee joint passing directly through the joint of leg, & breaking the tibia. He is just below its head. The head of the bone being fractured & so much of the bone working out in pieces. The broken bone has now adhered together, but remains in contact, being supported by the muscles & tendons of that leg. The above described injury renders him unable to do ordinary manual labor, & is compelled to use stick or crutches to walk.

We have treated applicant professionally for thirteen years.

Sworn to and subscribed before me, this 27th day of April 1895. Chas. A. Childs, Geo. Smith, M.D., Dr. Stone Ordinary.

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

Cobb County.

I, Dr. Stone Ordinary of said County, do certify that I am well acquainted with N. A. Horne 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.

Given under my official signature and seal this 27th day of April 1895.

Dr. Stone Cobb County.

Sworn to and subscribed before me, this

27th day of April 1895.

T. W. Harbin Ordinary.

J. M. Green A. Horne M. P. Mathis

NOTE.—The Ordinary will see that the full text of the Affidavit is understood by the witnesses, and that they are legally qualified to the same.

Witnesses are asked to make their statements full and explicit.
I certify that the above witnesses know the true character of the statements and their statements are worthy of full credit and belief.
T. W. Harbin ordinary

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

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

by _____

at _____

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

day of _____ 1896.

[L. S.]

Executed in presence of us _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

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

by _____

at _____

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

day of _____ 1897.

[L. S.]

Executed in presence of _____

SOLDIER'S PENSION.

1896.

Name W. A. Horn
County Cobb Co.
Disability Right Leg
Amount, \$ 50.00 2/25 - 1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDLED TO

affick

W. W. HARRISON, State Printer, Atlanta.

no data

SOLDIER'S PENSION.

1897.

Name W. A. Horn
County Cobb Co.
Disability Right Leg
Amount, \$ 50.00 2/24 - 1897

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDLED TO

affick

W. W. HARRISON, State Printer, Atlanta.

no data

Horn, W. A.

Cobb Co.

ACT OF MARCH 1892.

(For These Already Enrolled.)

No. 671

Horn, W. A.

Cobb County

(For These Already Enrolled.)

No. 1499

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears *N. A. Horn* 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

1864 that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a *Private* in Company *B*, of 8th Regiment of *Arkansas* Volunteers, *George*'s Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *14* day of *May* 1864, he was wounded, injured or diseased as follows:

that night being shot striking the right knee and leg fracturing the said knee and leg and almost losing it. He only dependent is to receive gratuity from pension to perform the ordinary manual business of life.

Dependent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1890. I have heretofore as a resident of *Cobb* county been allowed a pension of *\$50.* dollars, for the year 1889.

Sworn to and subscribed before me, this, the

25 day of *July* 1890.

N. A. Horn

Not Sub 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 *N. A. Horn* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this *25* day of *July* 1890.



Ordinary

Cobb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears *N. A. Horn* 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

1864 that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a *Private* in Company *B*, of 8th Regiment of *Ark* Volunteers, *George*'s Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *14* day of *May* 1864, he was wounded, injured or diseased as follows:

that night being shot striking the right knee and leg fracturing the said knee and leg and almost losing it. He only dependent is to receive gratuity from pension to perform the ordinary manual business of life.

Dependent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1890. I have heretofore under said law as a resident of *Cobb* county been allowed an invalid pension of *\$50.* Dollars, for the year 1889.

Sworn to and subscribed before me, this, the

23 day of *July* 1890.

N. A. Horn

Not Sub 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 *N. A. Horn* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this *23* day of *July* 1890.



Ordinary

Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____ of _____

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

at _____

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

day of _____ 1898.

[L. S.]

Executed in presence of _____

ACT OF SEPT. 1887.
(For Those Already Enrolled.)

No. 2723

INVALID

SOLDIER'S PENSION.

1898.

Name

County

Disability

Amount, \$

1898.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDLED TO

appch

SEE W. HARRISON, STATE PRINTER, ATLANTA.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, *N. A. Horn* hereby authorize *Jim Stone* of *Monetta Ga.*

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

at _____

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

day of *July* 1898.

[L. S.]

Executed in presence of _____

CODE SECTION 12A.
(For Those Already Enrolled.)

No. 3169

INVALID

SOLDIER'S PENSION.

1898.

Name

County

Disability

Amount, \$

1898.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDLED

SEE W. HARRISON, STATE PRINTER, ATLANTA.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County. }
Personally appears *N. A. Horn* 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 *1864* 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 *E*, of *8*th Regiment
of *Ark* Volunteers, *Brigade*; that whilst engaged
in such military service in the State of *Georgia*, on the *13* day
of *May* 1864, he was wounded, injured or diseased as follows:

By gunshot striking the right knee fracturing the bone and knee by which the applicant 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 pension to which he is
entitled for the year ending October 20th, 1898. I have heretofore under said law as a
resident of *Cobb* county been allowed an invalid pension of

\$50.00 Dollars, for the year 1897

Sworn to and subscribed before me, this, the *21* day of *July* 1898. POST-OFFICE *Atlanta*

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

STATE OF GEORGIA,

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

Given under my official signature and seal, this *21st*
day of *July* 1898.

Ordinary *J. W. Stone* *Cobb* County.



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County. }
Personally appears *N. A. Horn* 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* 1864; 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 *E*, of *8*th Regiment
of *Arkansas* Volunteers, *Brigade*; that whilst engaged
in such military service in the State of *Georgia*, on the *13* day
of *May* 1864, he was wounded, injured or diseased as follows:

By gunshot striking the right knee fracturing the bone and knee by which the applicant is rendered practically incompetent to perform the ordinary manual avocations of life.

Deponent makes application for the pension to which he is entitled for the year end-
ing October 20th, 1898. I have heretofore under said law as a resident of
Cobb County been allowed an invalid pension of
\$50.00 Dollars, for the year 1897.

Sworn to and subscribed before me, this, the *15th* day of *July* 1898. POST OFFICE *Annandale*

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

STATE OF GEORGIA,

Cobb County. }
I, *J. W. Stone* Ordinary of said County,
do certify that I am well acquainted with *N. A. Horn* the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know 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* 1898.

Ordinary *J. W. Stone* *Cobb* County.



POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

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

by _____

at _____

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

day of _____ 1900.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, John A. Horn hereby authorize _____

of Marion

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

by hand

at his office

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 5

day of May 1901.

[L. S.]

Executed in presence of _____

John M. Garm

Horn, N. A.

Cobb Co.

COBB SECTION 12A

(For Those Already Enrolled.)

No. 2141

INVALID

SOLDIER'S PENSION.

1900.

Name N. A. Horn

County Cobb

Disability Leg

Amount, \$ 50.

Warrant issued July 9 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

John A. Horn

Cobb Co.

No date

Horn, N. A.

Cobb Co.

(For Those Already Enrolled.)

No. 150

DISABLED

SOLDIER'S PENSION.

1901.

Name N. A. Horn

County Cobb

Disability Leg

Amount, \$ 50.

Warrant issued Jan. 15 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

John A. Horn

Cobb Co.

No date

STATE OF GEORGIA

For Applicants Heretofore Allocated Pensions

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears *N. A. Haru* of *Cobb* County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State and County, and has resided therein continuously ever since the day of *April* 1865; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a *private* in Company *C*, of 8th Regiment of *Arkansas* Volunteers, *Sowan*'s Brigade; that whilst engaged in such military service in the State of *Ga.*, on the *13th* day of *May* 1864, he was wounded, injured or diseased as follows:

By gunshot striking the right leg between ankle and knee rendering applicant practically incompetent to perform the ordinary manual avocations of life

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1900. I have heretofore under said law as a resident of *Cobb* County been allowed an invalid pension* of \$50. Dollars, for the year 1899.

Sworn to and subscribed before me, this, *N. A. Haru* 6th day of *March* 1900. POST OFFICE *Kennesaw, Ga.*

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

Given under my official signature and seal, this 6th day of *March* 1900.

Will Stone Ordinary *Cobb* County.



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears *N. A. Haru* 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* 1865; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a *private* in Company *C*, of 8th Regiment of *Arkansas* Volunteers, *Sowan*'s Brigade; that whilst engaged in such military service in the State of *Ga.*, on the *13th* day of *May* 1864, he was wounded, injured or diseased as follows:

By gunshot striking the right leg between ankle and knee rendering applicant practically incompetent to perform the ordinary manual avocations of life

Deponent makes application for the pension to which he is entitled for year ending October 26th, 1901. I have heretofore under said law as a resident of *Cobb* County been allowed an invalid pension of \$50. Dollars, for the year 1900.

Sworn to and subscribed before me, this, *N. A. Haru* 5th day of *January* 1901. Postoffice *John A. Haru, Ord.*

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

STATE OF GEORGIA,

Cobb County.

I, *John A. Haru* Ordinary of said County, do certify that I am well acquainted with *N. A. Haru* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 *January* 1901.

John A. Haru Ordinary *Cobb* County.



GEORGIA

JAN 26 1901

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb

County.

hereby authorize

I, *N. A. Horn*

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 *22nd* day of *January* 1908.

STATE OF GEORGIA

N. A. Horn

[L. S.]

Executed in presence of

John W. Lindsey

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize _____

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

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

day of _____ 1908.

N. A. Horn

[L. S.]

Executed in presence of

FOR THOSE ALREADY ENROLLED.)

No. *517*

DISABLED

SOLDIER'S PENSION
1902.

Name *N. A. Horn*

County *Cobb*

Co. *6* Regiment *8th*

Disability *50*

Amount, \$ *16*

1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Ordy

Gen. W. Harrison State Prison, Atlanta.

no data

John W. Lindsey

Cobb County

(FOR THOSE ALREADY ENROLLED.)

No. *266*

DISABLED

SOLDIER'S PENSION
1903.

Name *N. A. Horn*

County *Cobb*

Co. *6* Regiment *8th*

Disability *50*

Amount, \$ *15*

1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

only

Gen. W. Harrison State Prison, Atlanta.

no data

STATE OF GEORGIA

FOR THOSE ALREADY ENROLLED.)

FOR THOSE ALREADY ENROLLED.)

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County,

Personally appears A. A. Horn 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 1865; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the

States, and served as a Private in Company E, of 8th Regiment of Arkansas Volunteers, Evans's Brigade; that whilst engaged in such military service in the State of _____, on the 13 day

of May 1864, he was wounded, injured or diseased as follows:

By gun shot striking the right leg between ankle and knee and being applicant physically incapacitated to perform the ordinary manual avocations of life

Deponent makes application for the pension to which he is entitled for the year ending October 28th 1902. I have heretofore, under said law, as a resident of

Cobb County, been allowed an invalid pension of \$5.00 Dollars, for the year 1901.

Sworn to and subscribed before me, this the 3rd day of January 1902. } A. A. Horn Post-office Kennesaw Ga

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

STATE OF GEORGIA,

County,

I, John Ambrey Ordinary of said County, do certify that I am well acquainted with A. A. Horn the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 _____ 1902.

Ordinary _____ County.

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

БОМЕР ОЕ ВЛЛОКНЕА

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County,

Personally appears A. A. Horn 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 1865; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the

States, and served as a Private in Company E, of 8th Regiment of Arkansas Volunteers, Evans's Brigade; that whilst engaged in such military service in the State of _____, on the 13 day

of May 1864, he was wounded, injured or diseased as follows:

By gun shot striking the right leg between ankle and knee rendering applicant physically incapacitated to perform the ordinary manual avocations of life

Deponent makes application for the pension to which he is entitled for the year ending October 28th 1903. I have heretofore, under said law, as a resident of

Cobb County, been allowed an invalid pension of \$5.00 Dollars, for the year 1902.

Sworn to and subscribed before me, this the 3rd day of January 1903. } A. A. Horn Post-office Kennesaw

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

STATE OF GEORGIA,

County,

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

Ordinary _____ County.

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

БОМЕР ОЕ ВЛЛОКНЕА

POWER OF ATTORNEY.

STATE OF GEORGIA,

Colt COUNTY.

I, John A. Horn hereby authorize
John A. Horn of
 to receive and receipt for the pension paid hereon, and request that he remit same to
 by
 at.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 1
 day of Jan 1904.

J. A. Horn [L. S.]

Executed in presence of

W. L. Lindsey

POWER OF ATTORNEY.

STATE OF GEORGIA,

Colt COUNTY.

I, John A. Horn hereby authorize
John A. Horn of
 to receive and receipt for the pension paid hereon, and request that he remit same to
 by

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 11
 day of Jan 1905.

W. L. Lindsey [L. S.]

Executed in the presence of

W. L. Lindsey

CODE SECTION 1590.
 (FOR THOSE ALREADY ENROLLED.)

No. 237

DISABLED
 SOLDIER'S PENSION
 1904.

Name J. A. Horn
 County Colt
 Co. 6 Regiment 8th
 Disability
 Amount, \$ 50.00

JAN 25 1904

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HAND TO
Body
 Geo. W. Harrison, State Printer, Atlanta.

no date

CODE SECTION 1590.
 (FOR THOSE ALREADY ENROLLED.)

No. 237

DISABLED
 SOLDIER'S PENSION
 1905.

Name J. A. Horn
 County Colt
 Co. 6 Regiment 8th
 Disability
 Amount, \$ 50.00

JAN 23 1905

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HAND TO
Body
 Geo. W. Harrison, State Printer, Atlanta.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears

A. A. Horn 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* 1865; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *E*, of *8*th Regiment of *Arkansas* Volunteers *Howard*'s Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *13* day of *May* 1864, he was wounded, injured or diseased as follows:

By gun shot striking the right leg between ankle and knee rendering Applicant gradually incapacitated to perform the ordinary avocations of life

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1904. I have heretofore, under said law, as a resident, of *Cobb* County, been allowed an invalid pension of *Five* Dollars, for the year 1903.

Sworn to and subscribed before me, this the *11* day of *January* 1904.

N. A. Horn
Post-office

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

STATE OF GEORGIA,

Cobb County.

I, *John Andrew*

Ordinary of said County,

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

Given under my official signature and seal, this *1* day of *January* 1904.

Ordinary *John Andrew* County.



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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb COUNTY.

Personally appears

N. A. Horn 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 *1865*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *E*, of *8*th Regiment of *Arkansas* Volunteers *Howard*'s Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *13* day of *May* 1864, he was wounded, injured or diseased as follows:

By gun shot striking the right leg between ankle

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1905. I have heretofore, under said law, as a resident of *Cobb* County, been allowed an invalid pension of *Five* Dollars, for the year 1904.

Sworn to and subscribed before me, this the *11* day of *January* 1905.

N. A. Horn
Post-office

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

STATE OF GEORGIA,

Cobb COUNTY.

I,

N. A. Horn Ordinary of said County,

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

Given under my official signature and seal, this *11* day of *January* 1905.

Ordinary *John Andrew* County.



Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1, 1905.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY }
I, W. G. Boone hereby authorize
John Lindsey of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
_____ by _____
at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____
day of July 1908.

C. C. Horn [L. S.]
Executed in the presence of
John Lindsey

(FOR THOSE ALREADY ENROLLED)

No. 267

DISABLED
SOLDIER'S PENSION
1906.

Name W. G. Boone
County Cobb
Co. B 8th Regiment Ark
Disability Wound
Amount, \$ 50.00 1908.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

For Pensioner's Pension and Payment On, On, W. Lindsey, 1908.

no data

John W. Boone
Cobb Co.,

(FOR THOSE ALREADY ENROLLED)

No. 219

DISABLED
SOLDIER'S PENSION
1907.

Name W. G. Boone
County Cobb
Co. B 8th Regiment
Disability Wound
Amount, \$ 50.00 1907.

JAN 21

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

For Pensioner's Pension and Payment On, On, W. Lindsey, 1907.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY }
I, W. G. Boone hereby authorize
John Lindsey of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
_____ by _____
at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____
day of July 1907.

C. C. Horn [L. S.]
Executed in presence of
John Lindsey

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Cobb County.

Personally appears N. A. Horton of Cobb

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of _____ 18____; that he enlisted in the military service of the Confederate States, (or of the State of _____) during the war between the States, and served as a _____ in Company E, of 24th Regiment of Artillery Volunteers _____'s Brigade; that whilst engaged in such military service in the State of _____, on the _____ day of _____ 186____, he was wounded, injured or diseased as follows:

Discharged by

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1906. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of 50 Dollars, for the year 1905.

Sworn to and subscribed before me, this the

1 day of January, 1906.

N. A. Horton

Post-Office _____

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

State of Georgia,

Cobb County.

John Anthony Ordinary of said County.

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

Given under my official signature and seal, this

day of January, 1906.

John Anthony

Ordinary _____ County.



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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Cobb County.

Personally appears N. A. Horton of Cobb

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of _____ 18____; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a _____ in Company E, of 24th Regiment of _____ Volunteers _____'s Brigade; that whilst engaged in such military service in the State of _____, on the _____ day of _____ 186____, he was wounded, injured or diseased as follows:

Discharged by

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1907. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of _____ Dollars, for the year 1906.

Sworn to and subscribed before me, this the

8 day of January, 1907.

John Anthony

N. A. Horton

Post-office _____

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

State of Georgia,

Cobb County.

John Anthony 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 8

day of January, 1907.

John Anthony

Ordinary Cobb County.



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

Questions for Applicants to Answer.

County

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

2. How long and since when have you been a continuou
Ever Since 1864. 60 years

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) *March May 1861. Co. A 8th Arkansas Inf. 1st Div.*

6. When and where was your Company and Regiment surrendered or discharged from the Service?
I don't know.

7. Were you actually present with your Command when it was surrendered or discharged? *no*

[illegible]

e. For how long was your leave granted? In what way? 20 days

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

h. What effort did you make to return? *3 years after war boxes over*

3. If so, when, and where? In what prison were you held and when were you released? 30

3. If so, when, and where? In what prison were you held and when were you released? *No*
Never was away from Communist until wounded.

9. What property of every description was owned, in the use, possession and control of yourself and its cash value on the 4 Nov. 1988? (Make list by items and value, and where situated.)

None

10. What property of any kind have you disposed of and for what

1908. To whom and for what price? None

11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and its cash value? (Make a separate list for each.)

What is the purpose of your firm and its own value? (Make itemized list).

I make this application that I may get 10.00 increase I am
12. What annual or monthly income or earnings of yourself and the spouse derived have
you? None I am unable to find any of myself or my wife's earnings having
never been employed by anyone.
13. Are you or your spouse a citizen of the United States?
and are you or your spouse a resident of the State of Georgia?
Have you or your spouse applied for the Georgia pension and if refused? and for what cause if was
not allowed?
My earnings of 57.00 are based on my own and my wife's 18.00 increase

Sworn to and subscribed before me, this the 15th day of July, 1961

Day of February 1916

[Signature] Ordinary
of *Cash*

Soldier's Application.

UNDER ACT 1910

County

1903

Name.

recept

Compa

To L. A. H.

Regime

2025

Approved

J. W. LINDSEY

Contributors of Pension

CHAS. P. BYRD, State Printer, Atlanta

QUESTIONS FOR WITNESS AS TO SERVICE.

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, 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?
2. How long and since when have you known the applicant?
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know?
4. When, where and in what Company and Regiment did enlist during war from 1861 to 1865? (Give date and place).
5. How did you obtain your information of this Service?
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date).
7. When and where was his Command surrendered or discharged (give date and place).
8. Were you personally present at the Surrender?
9. If not, where were you and how came you there?
10. Was the applicant personally present with his Command at surrender?
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 day of 191

Ordinary,

of County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

County.

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

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

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

Ordinary,

of County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County.

I, Ordinary of said County, certify that I know the applicant for Pension is the person he represents himself to be and resides in said County. That I also know the witness swearing to the service and who are freeholders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Returns of shows that value for tax is in 1908 \$ for 1909 \$ for 1910 \$ for 1911 \$ for 1912 \$ for 1913 \$ for 1914 \$ for 1915 \$

Sworn under my hand and official seal of office this day of 191

Ordinary,

of County.

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

State of Georgia

Whitfield County

} Personally come before me
N A Bradford a Notary Public

and Justice of the peace in and for said county
Mrs S A Helton after being duly sworn says
that N A Horn was a soldier in the confederate
army and that he was wounded in the second
battle of Resaca I saw him in a boat half hour
after he was wounded and I waited on him in the
field hospital

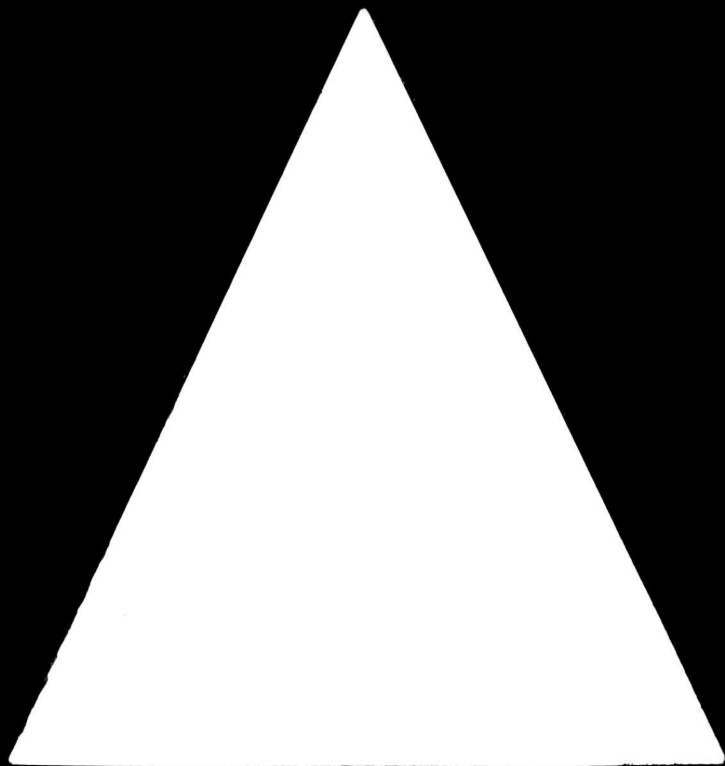
S A Helton
mailed

Sworn to and subscribed before me

this the 24th day April 1896 N A Bradford N P & J P

this is to certify that I have known Mrs S A Helton
personally for twenty five years and that she is a
truthful and good worthy citizen -

N A Bradford N P & J P



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

by

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

Executed in presence of

(L.S.)

House, Morgan
Cobb County

No.

on 1906

INDIGENT PENSION

1906

Name: Morgan House

County, Cobb

Co. 1st Regt. Ga. Regt.

Approved _____ 190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

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

4/8/05

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 _____

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

COUNTY.

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

1. What is your name and where do you reside? *Grogan House, Okonoth, Cobb County, Ga.*
2. How long and since have you been a resident of this State? *70 years, since 1835.*
3. When and where were you born? *Piedmont Dist. S.C. 1827. Co. 8, 18th Regt. Va. Vols, Keenmesaw, Ga. Summer of 1861.*

How long did you remain in such company and regiment? *nearly 4 years, to close of war.*

When and where was your company and regiment surrendered and disbanded? *Company was captured at Appomattox, Va. April 6th 1865.*

Were you present with your company and regiment when it was surrendered? *Yes.*
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 & captured with my company.*

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

What has been your occupation since 1865? *Farmer.*

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

second, "infirmary and poverty," or third, "blindness and poverty"? *Age, infirmary & poverty.*

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 was for more than 10 years blind, but being about 78 years old am unable to perform any labor.*

What property, real and personal, do you possess, and its gross value? *Nothing whatever.*

What property, real or personal, did you possess in 1864, 1865, 1866, 1867, 1868, 1869, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? *See answers on attached papers.*

In what County did you reside during those years, and what property did you then return for taxation? *Cobb County. Returned about \$375 of property.*

How were you supported during the years 1860, 1861 and 1902? *My son helped me come and my land paid the rest.*

How much did your support cost for each of those years, and what portion did you contribute through your own labor or income? *\$75 to \$100 - I contributed probably one half.*

What was your employment during 1868, 1869, 1901 and 1902? What pay did you receive in each year? *Farming as long as able. Received no pay.*

Have you a family? If so, who composes such family? Give their means of support. Have they a homestead, or other property? Their ages and how employed? *None.*

Are you receiving any pension? If so, what amount and for what disability? *No.*

Have you ever made an application for pension before? *Yes - once.*

How many applications have you ever made and under what claim? *One, Invalidity.*

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

John W. Lindsey Ordinary, Applicant.

of _____ County.

Every Question MUST Be Answered.

No. *on 1906*

INDIGENT PENSION

1906

Name *Grogan House*

County *Cobb*

On *18th day* of *Aug* 1906

Approved _____ 1906

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

John W. Lindsey, State Printer, Atlanta, Ga.

4/18/06

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

COUNTY.

of said State and County, having been presented as a witness in support of the application of Jugan Rouse 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? Joseph M. Tamm
Reside in Cobb Co Ga.
2. Are you acquainted with Jugan Rouse the applicant; if so, how long have you known him? 40 years
3. Where does he reside, and how long and since when has he been a resident of this State? Cobb Co. 40 odd years
4. When, where and in what company and regiment did he enlist, and how do you know? June 1st 1861, Company A, 15th Pa., by bringing private Rouse.
5. Were you a member of the same company and regiment? yes
6. How long did he perform regular military duty? until April 1865
7. When and where was his command surrendered? Harpersburg Va. Surrendered April 1865
8. Were you present when it surrendered? yes
9. Was applicant present? yes
10. If he was not present, where was he?

When did he leave his command? For what cause?
By what authority he left? By your authority How do you know all of this?
By being present.

11. What property, effects or income has the applicant? (Give your means of knowledge.) I have no knowledge whatever.
12. What property, effects or income did the applicant possess in 1890, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same? Don't know
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? Don't know
14. What is the applicant's occupation and physical condition? no occupation.
Very poor in health.
15. Is the applicant unable to support himself by labor of any sort; if so, why? I think not.
in account of his age and health.
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? I don't know.
17. What portion of his support for these four years was derived from his own labor or income? Don't know
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? in account of age & poverty
19. Who composes family? What property have they? Children's age and their earning capacity? Don't know
20. What interest have you in the recovery of a pension by this applicant? none

Subscribed before me, this 18th day of July 1905, J. M. Tamm Witness.
Sam M. Tamm Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

COUNTY.

Personally came before me E. M. Bailey and W. C. Humphries, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully Jugan Rouse, applicant for pension under Section 1254, Code, and after

such personal examination say that his precise physical condition is as follows:
Arterial murmur of heart, and debilitated and infirm from old age sufficiently so as to incapacitate him from making a living from manual labor.

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

Subscribed before me, this 18th day of July 1905, W. C. Humphries M.D. Ordinary.
E. M. Bailey M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

COUNTY.

I, Sam M. Tamm Ordinary, in and for said County, hereby certify that the applicant, J. M. Tamm resides in said County, and has been a bona fide resident of this State since the 1st day of January 1894, and that the witnesses, viz.: W. C. Humphries and E. M. Bailey are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digest of Cobb County shows that applicant returned for taxation in his name in 1899 415 Dollars of property; in 1901 415 Dollars of property; in 1902 415 Dollars of property.

In my opinion the foregoing claim is 1703-1700-1904-1395 made in good faith. 18th day of July 1905.
Witness my hand and seal of office, this 18th day of July 1905, Sam M. Tamm Ordinary, of Cobb County.

NOTE.

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

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Cobb COUNTY.

Orlando A. Harty of said State and County, having been presented as a witness in support of the application of Joseph House for pension under section 1254, Code, and after being duly sworn, testifies as follows:

1. What is your name and where do you reside?
Orlando A. Harty
Waco, Cobb County, Ga.
2. Are you acquainted with Joseph House, the applicant; if so, how long have you known him?
Yes - Many years.
3. Where does he reside, and how long and since when has he been a resident of this State?
4. When, where and in what company and regiment did he enlist, and how do you know?
5. Were you a member of the same company and regiment?
6. How long did he perform regular military duty?
7. When and where was his command surrendered?
8. Were you present when it surrendered?
9. Was applicant present?
10. If he was not present, where was he?
When did he leave his command? For what cause?
By what authority he left? How do you know all of this?

11. What property, effects or income has the applicant? (Give your means of knowledge).
Has nothing - I know him well, & all about his affairs.
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?
Had 40 acres land. Deeded it to me - only part in 1902 to secure me for supplies furnished him.
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom?
Had 13 acres land, deeded to me in 1904, but could not de- deed it - had to give it up for the debt.
14. What is the applicant's occupation and physical condition?
Was a little country store, but is too old and infirm to do much.
15. Is the applicant unable to support himself by labor of any sort; if so, why?
He is near 80 years old, & I think too old to do hard labor.
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902?
Partly by rent from land, & partly by support from me.
17. What portion of his support for these four years was derived from his own labor or income?
Could say definitely, but he is not.
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code?
Simply old & infirm.
19. Who composes family? What property have they? Children's age and their earning capacity?
Has no family - I left him - youngest child is 40 years old.
20. What interest have you in the recovery of a pension by this applicant? I swear none.
Sworn to and subscribed before me, this 18th day of April, 1905.
Orlando A. Harty
Ordinary.

Witness.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY, }
I, Grogan House hereby authorize
John Andrew of _____
to receive and receipt for the pension allowed, and request that he remit same to
me at his office
by hand

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

Grogan House [L. S.]
mm

Executed in the presence of

W. H. H. H.

Cross Section 1234.
(FOR THOSE ALREADY ENROLLED.)

No. 607

INDIGENT SOLDIER'S PENSION 1906.

Name Grogan House
County Cobb
Co. A, 18th Regiment Ca.
hols.

WARRANT ISSUED

12 2 1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

John

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY, }
I, Grogan House hereby authorize
John Andrew of _____
to receive and receipt for the pension allowed, and request that he remit same to
_____ at _____
by _____

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

Grogan House [L. S.]
mm

Executed in presence of

W. H. H. H.

Cross Section 1234.
(FOR THOSE ALREADY ENROLLED.)

No. 608

INDIGENT SOLDIER'S PENSION 1907.

Name Grogan House
County Cobb
Co. E, 11th Regiment Ca.
hols.

WARRANT ISSUED

1 1907.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

John

JOHN W. LINDSEY, SECRETARY, ATLANTA.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Cobb County.

Personally appears Eugene House 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 _____, _____th Regiment of _____; 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, _____ 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 Emmett County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this _____ day of _____ 1906. Eugene House Ordinary.

State of Georgia,

Cobb County.

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

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

Ordinary Cobb County.



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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Cobb 18 Regt Bar State

Cobb County.

Personally appears Eugene House 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 _____, _____th Regiment of _____; 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, _____ 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 _____ County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this _____ day of _____ 1907. Eugene House Ordinary.

State of Georgia,

Cobb County.

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

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

Ordinary Cobb County.



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

Answer of Grogan House to question
No. 14.

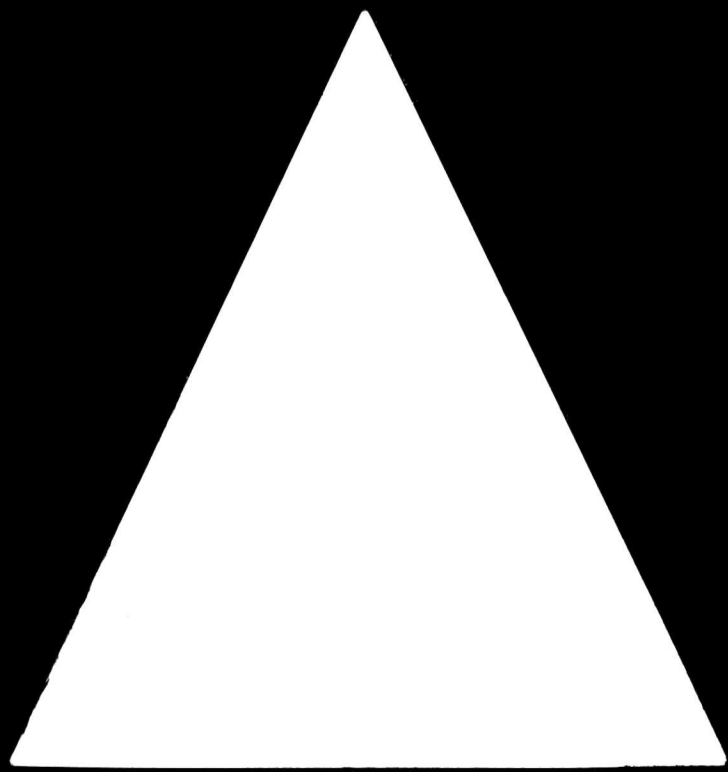
In answer to this question, Applicant
states as follows; He owned a forty
acre lot of land, which he had in his
possession until 1804. About ten years
ago he mortgaged it to secure the firm of
Orlando Dwyer & Co. for provisions.

Being unable to make a support this incumbrance
went from year to year until 1904 when
he had to give up the land to the
above Company & pay the debt. Applicant
is now left totally without means and
being 78 years old cannot make a support
by labor.

My former application is lost.

Statement of Ordinary.

Having been a member of the firm
mentioned above until recently, I
know Mr. House's statement is true.
John Hawley,
Ordinary.



POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

herely 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

Executed in presence of

1895.

approve
Rich Johnson
Sec

No. 377

House
Indigent Pension
(to Clayton Co 1897)
1895.

Name

County

Ground

House
Cobb

July 11 1896
RICHARD JOHNSON,

Secretary Executive Department

WARRANT HANDED TO

Judge Stone

Geo. W. Harrison, State Printer, Atlanta.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cobb County.

I, *J. M. Stone*, Ordinary in and for said County, hereby certify that the applicant *J. H. House* resides in said County, and was a bona

fide resident of this State on the first day of January, 1894, and that the witnesses, viz. *J. D. Maline M.D.* and *J. G. Moss 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 herein prescribed, and that the full text of the affidavits was read to the applicant and witnesses before same were signed.

I further certify that the tax digests of *Cobb* County show that applicant returned for taxation in his name in 1893, *Nothing* dollars of property, and in 1894, *Nothing* dollars of property.

Witness my hand and seal of office, this *22* day of *May* 1895. *J. M. Stone* 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.

J. M. Stone Ordinary, *Cobb* County
Certify that *J. D. Allen* is a
Justice Peace in said County
May 22/95 *J. M. Stone*
Ord.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Cobb County.

Personally come before me

J. D. Maline M.D. and *J. G. Moss M.D.*, both known to me as reputable physicians of said County, who being severally sworn, say on oath that they have examined carefully *J. H. House*, 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, with partial paralysis of left arm, and his general Physical Condition is very weak and infirm, on account of which

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 *22* day of *May* 1895. *J. M. Stone* Ord.

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

1895.

Executed in presence of

10. What is the applicant's occupation and physical condition? *He has no occupation and is not able to do scarcely any*

11. Is the applicant unable to support himself by labor of any sort, if so, why? *Old age & afflictions*

12. How was he supported during the years 1893 and 1894? *by his children*

13. What portion of his support for these two years was derived from his own labor or income? *Scarcely none*

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? *He is very old has deep seated Rheumatic pains has is partially paralyzed on the left side*

15. What interest have you in the recovery of a pension by this applicant? *None whatever sworn to and subscribed before me, this*
the 30th day of *March* 1895. *J. J. Gordon*
J. C. Allen, J. P.

NO. 377.
Hannah J. Cobb
INDIGENT PENSION
(to August 10, 1895)
1895.

Name *J. J. House*
County *Cobb*
Ground

July 11 1896
RICHARD JOHNSON,
Notary Public for Georgia

WARRANT HANDED TO
July 11 1896
Geo. W. Harrison, State Printer, Atlanta.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

1866 }
County. }

J. F. Carson of said State and County, having been presented as a witness in support of the application of *J. N. Hauze* for pension under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the following questions, deposes and answers as follows.

1. What is your name and where do you reside? *J. F. Carson*
I reside in Cobb County Georgia
2. Are you acquainted, with *J. N. Hauze*, the applicant, if so how long have you known him? *Since 1871*
3. Where does he reside, and how long has he been a resident of this State?
He resides in Cobb County Georgia near
and out of the State
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this?
He was in the Georgia Militia

5. When, where and in what company and regiment did he enlist?
6. Were you a member of the same company and regiment?
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?

8. What property, effects or income has the applicant? (Give your means of knowledge.)
He has nothing in his own name, nor income
and is dependent upon his children

9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? *He had nothing in 1893 and*
1894

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

1866 }
County. }

J. N. Hauze of said State and County, desiring to avail himself of the Pension Act Approved December 15th, 1894, hereby submits his proof, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (give State, County and post office)
J. N. Hauze Resides in Cobb County Georgia
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State?
I resided in Clayton County Georgia until February 94
3. When and where were you born? *I was born in Jackson County Georgia*
4. Did you volunteer in the Confederate Army or in the Georgia Militia? *first for Guards*
then militia
5. When and where did you enlist? *in Paulding County Ga*
6. In what company and regiment did you enlist? *Co. I, 1st Georgia Cavalry*
7. How long did you remain in that company and regiment? *I received pay for 6 months*
Months
8. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge or transfer? *I came out on detail sick when I left camp*
broken down with Rheumatism and was not able to go back
and I was there several weeks being in one little tent
9. For how long a period did you discharge regular military duty? *I am not able to say*
10. When, where and under what circumstances were you discharged from service? *I left about the*
time they were moving the banks of hostilities and did not
wish to be captured and then did want to get back to my
company and I was discharged
11. What is your present occupation? *I have to stay in bed and get pills for*
my Rheumatism and I shall never be able to
12. How much can you earn per annum by your own exertions or labor? *I don't do anything*
for I get back Rheumatism it has it seems mostly settled in
the back of neck and around my heart

13. What has been your occupation since 1866? *I was a farmer only a few years*
since the war I have been to do anything and I have my
unhappy children but I have had the doctor experimented on me
all the way

14. What sum would be necessary for your support for this pension year, and how much are you able to contribute thereto either in labor or income? *I say God forbid I should*
write any thing on this but what is strictly true I have
no means or in come what else I do not as easily for I
can't tell what I need for that person
I think I could make out on that my family also is
badly affected and I have had doctors I am I said a month in bed
to my disability after I due consideration five dollars per month

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

1892

21. How were you supported during the years 1893 and 1894?

By my children

22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? I contributed not very little

The rest was paid of what it cost

23. What was your employment during 1893 and 1894? What pay did you receive in each year?

My Wife died December the 13th in her 67th year 1893

R. A. House was born somewhere in 1844

S. A. House was born somewhere the 29th 1846

Sarah E. House was born July the 8th 1849

Wm. A. House was born March the 9th 1863

24. Are you married and have you a family? If so, is your wife living and how many children have you?

Give age and sex of children and their means of support?

In 1893 & 1894 was how old? you are in my family out of 25
I have one daughter my self & wife in other County there.
I am a single man in my 50's, lived with my wife the eldest
and 4 of her children but 3 of them are not poor people

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

I have never been paid a pension

26. Are you receiving any aid from your County, and if so, how much? Did you ever apply for such aid?

I received nothing County one neighbors several years back
said to me he would put my name in to draw
I replied to him I would the same of it for he then
said there was more money I said to him
I would be that as long as I could help it I would
not be like a beggar I have not space

Sworn to and subscribed before me this the

30th day of April 1895.

Applicant.

Ordinary

County.

15. What is your present physical condition and how long have you been in such condition?

Bad I suppose & has been ^{being the same for long years} the same for the last two years.
I have lay on my life of side now or that very little since the war if I did 10 paign would make
I beat the heart like I shot & I have had "set up one time"
Recollect I had to set up three days I might think I
have not had to set up so long at a time since but
can't by on my left ^{limb} I have but little use of my
left arm & hand shoulder arm & hand has pained
I may feel like it was a sleep & that hand arm &
shoulder seems to cold much more than the other

16. Upon which of the following grounds do you base your application for pension, viz.: first, "age and poverty," second "infirmary and poverty" or third "blindness and poverty?"

on poverty, age and poverty

17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight?

Age and poverty especially I partly say I beat as
good as can men men of my age

I am nearly 70 years old you still consider I have
some wife looks but consider
My wife I infirmity
I was 1821 born
I am now 74 years old 21 of November
J. A. House

18. What property, effects or income do you possess? I own in 1893 some

19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any did you make of same? None None

State of Georgia }
 Paulding County }

Personally came before me an
 acting justice of the peace in and
 for said county, E. Williams who
 on oath says

2 question yes. I first ~~saw~~ ^{met} him
 in 1857. J. N. House

4 question yes he served in the Georgia
 Militia. by being with him

5 question in 1862 & 1863, in Paulding
 county Ga in capt J. B. Deans co
 of Ga Militia Yes - yes began

6 question I was

7 ~~was~~ 6 months and received
 his pay and was discharged
 at Rome Ga

sworn to and subscribed

before me this May 14th 1895

J. P. Jenkins J.P.

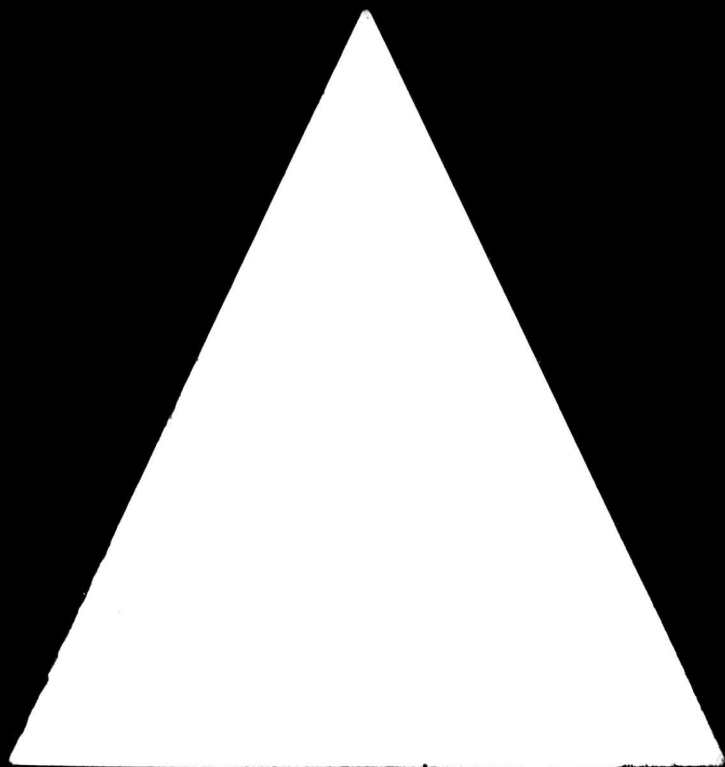
E. Williams

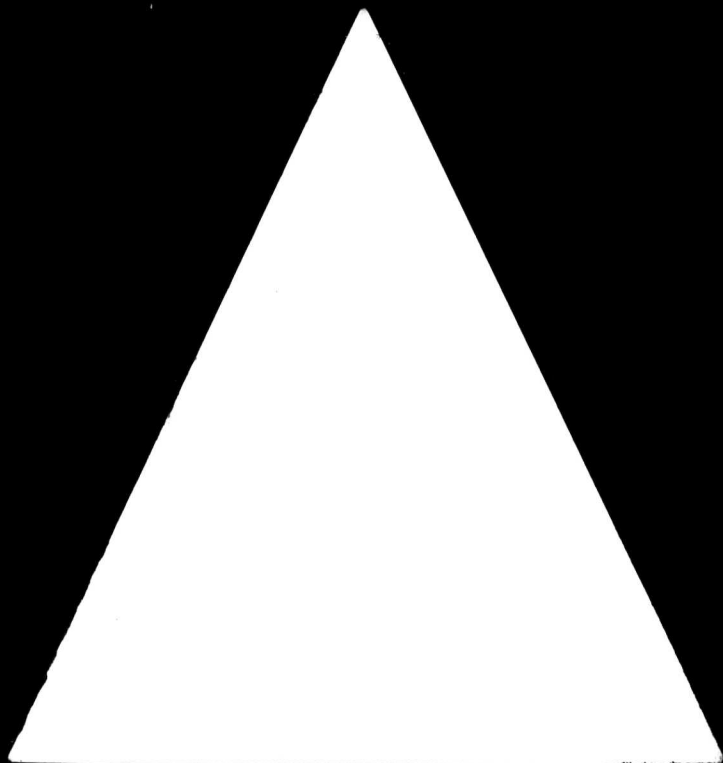
Witness E. Williams, Jr.

1895

Witness E. Williams, Jr. was sworn to and subscribed with
 Edward Williams Esquire and James W. Williams Esquire
 for Paulding County Ga and were known or heard
 anything of him but is quite long & honorable
 testimony

E. W. Williams





Ordinary's Certificate

STATE OF ALABAMA,

CALHOUN COUNTY

I, Sam Williams, Ordinary of said County, do certify that above the applicant for pension. She

is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th November 1908, that I also know

the witness who swears to the service of husband; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they both are truthful, trustworthy, and their statements are entitled to full faith and credit

Sworn under my hand and official seal of office this 25th day of October 1923
(SEAL) Sam Williams Ordinary, County

NOTES: 1. Before any questions are answered the Ordinary shall have applicant and the witness in the following words: "You do solemnly swear that you will true answers make to the questions asked you and the witnesses you shall give will be the truth. So help you God." 2. Only witnesses who married prior to January 1st, 1901 are entitled to give evidence. 3. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by him. 4. Affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by him. 5. Attach certified copies of marriage license if obtainable. If not, prove marriage by some person, or by general reputation.

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County Calhoun

Name Wm. H. G. G.

Widow of Wm. H. G. G.

Company

Regiment 2nd Reg. Infantry

Approved Sam Williams

Sam Williams Ordinary

Get official record

J. W. LINDBERGH,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10/31/1923

Howard, S. A. (1923)
OK for 1923
Cobb C. E.
No.

Ordinary's Certificate

STATE OF GEORGIA,

Cobb COUNTY.

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

Sworn under my hand and official seal of office this 25 day of October 1923

(SEAL)

Ordinary,

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. Only widows who married prior to January 1st, 1861, are entitled. 4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary. 5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Widow's Pension

Under Act 1910—as Amended by Act of 1919

County

Name

Widow of

Company

Regiment

Approved

Amesbury Pension

Get official record

J. W. Lupton,

Commissioner of Pensions,

Byrd Building Co. State Printer, Atlanta.

10/31/1923

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

Questions for Applicant

STATE OF GEORGIA,

Cobb COUNTY

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

1. What is your name, and where do you reside? Mrs. G. A. Howard
Cobb Co. Ga.
2. How long and since when have you been a continuing resident of the State of Georgia? 22 years
3. When, where and to whom were you married? Dec. 3, 1872, Conthamers Ky.
John M. Howard
4. Have you married since the death of first and soldier husband? No
5. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) 18th Regt. Inf.
Conthamers Ky. Co. 1st Regt. Inf.
6. When and where did the commands of your husband surrender or discharge from the army? Conf. Regt. Dec. 10, 1864
7. Was your husband personally present at the time of the surrender or discharge of this command? Conf. Regt.
8. If he was not present state clearly where he was? Conf. Amosbury Regt. 18th Regt. Inf.
9. Where was his command when he left? Conf. Regt.
10. For what cause did he leave his command? Conf. Regt.
11. By whose authority did he leave his command? No information as to what he was with
12. For how long was he granted leave of absence? See list of names in the list of names
13. What was his condition when he left his command? Wounded at Fairville
14. What effort did he make to return to his command? Returned to command
15. In what way was he prevented from going back to Command
16. Was he captured by the enemy at any time? No
17. If so, when and where captured and where held as a prisoner, and when and for what cause released?
18. When and where did your first husband die? May 9, 1901, Marietta Ga.
19. Were you residing together when he died? Yes
20. If not, how long had you resided apart?
21. Are you now a widow? Yes
22. Have you or your husband heretofore been paid a pension by the State? No
23. If so, when and for what cause were you or your husband placed on the roll?

Sworn to and subscribed before me this the

25 day of October 1923

J. M. Howard Ordinary
of Cobb County.

(SEAL)

SMITH-REES COMPANY

INCORPORATED
CYNTHIANA, KY.

Aug 15th
1923

Dear Geo Ann

I suppose you thought you would

never hear from me in regard to your pension
I have done very little at that. we run down every
thing possible. There is not a man now living
that left this county with McDowell that we can
find. Mr Wm Boyle said that he knew two or three
men that lived ~~to~~ out side of our county that was in
Johns Co so he wrote to them where he got an
answer was that the man was dead so it looks
to me like there is no way to answer these questions
as one of the men that could answer them are dead
there is no question about John being in the southern
army and was badly wounded it looks like that
would be proof enough to allow you a pension
Mr Boyle got very young and Hyson Rees both old
Rebel soldiers to state what they knew about
John being in the war. I don't know whether that
will do you any good or not. I can wait a
copy of your marriage certificate let me know
and I will send it to you or any thing else
that I can. do I am ready and willing I am also
sending you a part of what Ed Porter Thompson says
about John in his History of the Orphan Brigade

Your Cousin

L. H. Rees

SMITH-REES COMPANY

INCORPORATED
CYNTHIANA, KY.

The history of the Orphan Brigade, written by Edw. Peter

Thompson, show that John T. Howard was in Co. W. 2nd Ky. Inf. U.S.A.
Hervy McDowell, Capt. of Co. F. Roger Hanson Col. 2nd Ky. Inf. That
he was in the following battles: Donelson, Hartsville, Jackson,
Rockyface Gap, Resaca and Dallas. It also says that he was wounded
at Hartsville. And also badly wounded on his retreat from Dallas.

Cynthiana, Ky.

August, 13, 1923.

The affiant, William Young, deposes and says that he knew John T. Howard before the war and saw him during the war, also saw him when he got home and saw his wound. I knew him until he moved to Georgia but do not know where he surrendered but know from what all of the old comrades said of him that he was a gallant soldier and stood well with all of the old comrades who got home, and especially those of his own Company.

Witness H. M. Jameson.

William Young
his mark

Subscribed and sworn to before me this 13th day of

August 1923.

Jno. G. Pope
Clerk Harrison County Court, Ky.
By H. M. Jameson, D. C.

State of Kentucky.
County of Harrison, Sot.

I, Jno. G. Pope, Clerk of the Harrison County Court, certify that the foregoing is a true and correct copy of the Marriage License and Marriage Certificate as fully as the same appears on record in my office.

Given under my hand this 20th. day of August, 1923.

Jno. G. Pope Clerk.
by H. M. Jameson D. C.

BOND

Cynthiana, Ky.

August 13, 1923.

The affiant, Hysen Rees deposes and says that he knew John T. Howard before and during the war of 1861 to 1865 and after he returned home and until he moved to Georgia. He belonged to Company F. Capt. Harvey McDowell, Col. Robert Hanson, 2nd. Ky. Infantry. I belong to Capt. Ben Desha's Company D., 9th. Ky. Infantry of the same Brigade. I know he was a good soldier and I saw him in different engagements during the war. Know that he was wounded at Hartsville, Tennessee. I also know that he was badly wounded on the retreat from Dallas. I don't know whether he was able to do any service afterwards and do not know where he surrendered but saw him after he got home. I know he was an honorable soldier during the war and I always heard him spoken of as such by all of the old comrades of his Company. I also knew his wife before and after his marriage.

Hysen Rees

Subscribed and sworn to before me this 13 day of August, 1923.

Jno. G. Pope
Clerk of Harrison County Court, Ky.
By H. M. Jameson, D. C.

Marriage License

The Commonwealth of Kentucky

To any Minister of the Gospel or other Person Legally Authorized to Solemnize Marriages:

You are permitted to solemnize the Rites of Matrimony

between John T. Howard

and Miss Georganna Pope

the requirements of law having been complied with.

Witness my signature as Clerk of Harrison County Court

this 3rd day of December, 1872

R. W. Herritt, Clerk

D. C.

Marriage Certificate

This is to Certify that on the 4th day of December, 1872

the Rites of Marriage were legally solemnized by me

between John T. Howard

and Miss George Ann Pope

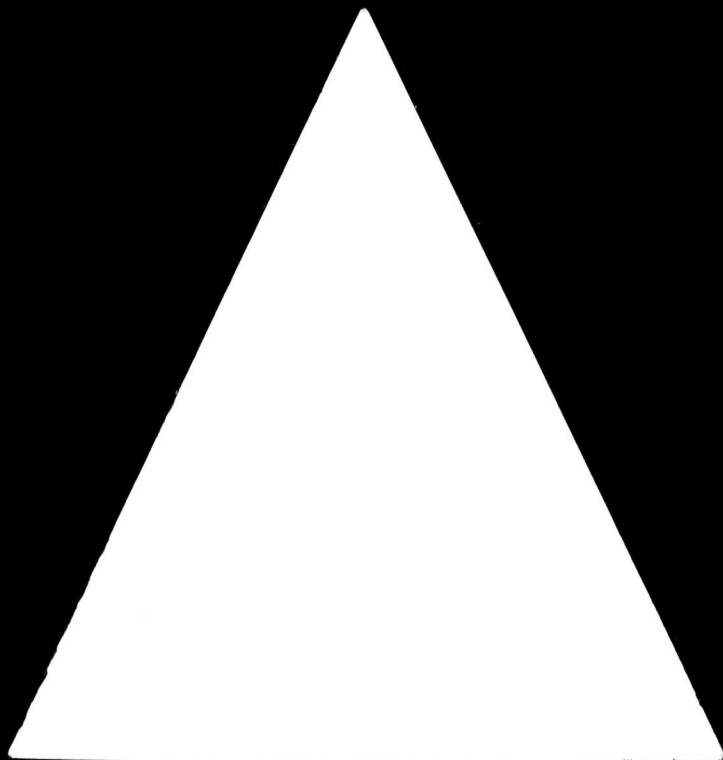
at R. Rees' in the County of Harrison

in the presence of R. Rees, Joseph Mintz &c

Signed

R. Lancaster
Minister

NOTE: THE STATUTE REQUIRES THE NAMES OF AT LEAST TWO WITNESSES TO BE INSERTED IN THE FOREGOING CERTIFICATE



Pension Office, 12/12/10.

Applicant must state and prove the letter of the Company and the number of the Regt. or Battalion in which he served, and whether his command was infantry or cavalry, or the U.S.A. State Militia, or State Troops, and state the facts fully then prove clear.

J.B. Lindsey, Secy. of Records.

Colt Co.
Pay of confederate
OK Jan 1911
Confederate

Soldier's Application.

UNDER ACT 1910.

County *Colt*
Name *J. B. Howard*
Company *D*
Regiment *Roller's Battalion*
Approved _____

10/20/11
6/20/11

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

of _____ County.

Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words:

"I do solemnly swear that you will truthfully answer each question asked you and the evidence you give shall be the true and correct evidence."

2. Additional affidavits may be attached if bank papers are insufficient.

3. All affidavits must be made before the Ordinary and sworn to by him.

4. If applicant has no property at all in his possession, use or control of self and wife, affidavits of Free holders necessary.

AFFIDAVIT OF TWO FREEHOLDERS

STATE OF GEORGIA.

County.

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

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

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

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

4. What relation is the party to applicant? _____

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

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

or was it made to obtain a pension? _____

Sworn to and subscribed before me, this the _____

day of _____ 1910

Ordinary,

of _____ County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

County.

I, _____ Ordinary of said County, certify that I know _____ for Pension is the person he represents himself to be and resides in said County. That I also know _____ the witness swearing to the

service and _____ who are freeholders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Results of _____ shows that _____ and wife

value for tax in 1908 \$ _____ for 1909 \$ _____ for 1910 \$ _____

Sworn under my hand and official seal of office this _____ day of _____ 1910

Ordinary,

of _____ County.

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

10. When any questions are answered the Ordinary shall swear, applicant and all witnesses to the following words:
1. "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 assumed 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 freehold unnecessary.

Howard, Sarah
Cobb Co
an Roll for 1914

+

No.

Widow's Application

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

County

Cobb

Name

Sarah L. Howard

Widow of

J. B. Howard

Company

P. D. Robinson Building

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. F. BYRD, State Printer, Atlanta.

4/1/19

County

Personally before me comes Jess Sarah E. Howard of said County, who, after being duly sworn, on oath says, that she is the widow of J.B. Howard to whom in the County of Dawson State of Ga she was married on the 5 day of March 1966 and that she remained his wife, and resided with him to the date of his death Sept 22nd 1973 and that she has not since his death remarried. At the time of his death he was a resident of Cobb County, in Ga said State of Georgia, and he was on the Lemise Pension Roll of the State and paid a pension of \$50.00 is Cobb County for 10/3 per annum, on account of being a soldier in Company D Robert B. Babbalions (Volunteers of State Militia.)

At the death of John A. Gorman, he was in the use and possession of the following property 1. 2000 1/2 tons, 1 ton, 1 wagon, farming tools of the cash value of \$300

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

| | | |
|---|---|----------------------|
| 2 | Acres land | \$ |
| 2 | Horses and Mules | \$ 300 ⁰⁰ |
| 1 | Hogs, Cows, etc. 25-4 years old. From 2000 to | \$ 40 ⁰⁰ |
| | Total Cash value of all property | \$ 800 ⁰⁰ |

That she is now a bona fide resident citizen of said County of Essex and she
 Resided in State all her life
 has so continuously resided since 20 day of June 1907

Sworn to and subscribed before me, this the 25th day of Jan, 1919. Sarah J. [Signature]
J. M. [Signature] Ordinary,
of Code County.

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

County.

Personally before me come _____ known to be responsible and truthful persons, residing in said County, who after having duly sworn on oath, say: that of their own personal knowledge Mrs. _____ who made the foregoing affidavit, is the lawful widow of _____ who died in _____ County in said State of _____ on _____ day of _____ 19 _____ and that she has not since remarried. That she became the wife of _____ on the _____ day of 18 _____ and that she and he had resided together as man and wife continuously since _____ day of _____ 18 _____ and that the _____ was the _____ same man who was on the pension roll of said State _____ from _____ County _____ when he died.

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

Widow's Application

To Be Put on Roll in Her Own Right When

**Husband Was on the Indigent Roll
Put on Under Act of July 11, 1910.**

County

Name Vanessa N. Taylor

MOPTAA

Company Ltd. v. Walling & Walling

Approved

J. W. LINDSEY,

Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Cobb County.

Personally before me comes _____ who after being sworn on oath says, that they are freeholders of said County, and that they know _____ of said County and knew her said husband _____ at his death on the _____ day of _____ 1913 that she and he were in the use, possession and control of the following property at his death to wit: _____ Mule #2570 Wagon 15⁰⁰ Cows 25⁰⁰ _____ of the value of \$300⁰⁰ That she is now in the use, possession and control of the following property to wit: _____ Mule Wagon Cows & Hens of the value of \$300⁰⁰

Sworn to and subscribed before me, this the

25th day of Oct 1913

J. M. Gunn Ordinary

Oscar Benson of Cobb County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cobb County.

I, J. M. Gunn Ordinary of said County, do certify, that, I know _____ the applicant for this pension and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the _____ 1913

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

That the tax Books of _____ County shows that _____ returned property to the amount of _____ for 1908 \$280⁰⁰ for 1909 \$280⁰⁰ for 1910 \$260⁰⁰

Sworn under my hand and official seal of office this _____ day of _____ 1913

(SEAL.)

J. M. Gunn Ordinary.

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

State of Georgia Dawson County
 I J. F. Evans ordinary of said County
 do certify that the within is a true copy
 of the Marriage License of John B. Howard
 and Sarah Sheffield as appears on Record
 in my office in Book A. Page 106
 given under my hand and seal this 19th day
 of October 1918 J. F. Evans ordinary of said County

MARRIAGE LICENSE

or

AND

Issued

191

and Recorded on Page Book

of Marriage Licenses.

Ordinary.

MARRIAGE LICENSE

ON

AND

Issued

191

and Recorded on Page

Book

of Marriage Licenses.

Ordinary.

Printed & Bound by C. H. Smith.

29 October 1918
not valid until 19th day
of November ordinary of State



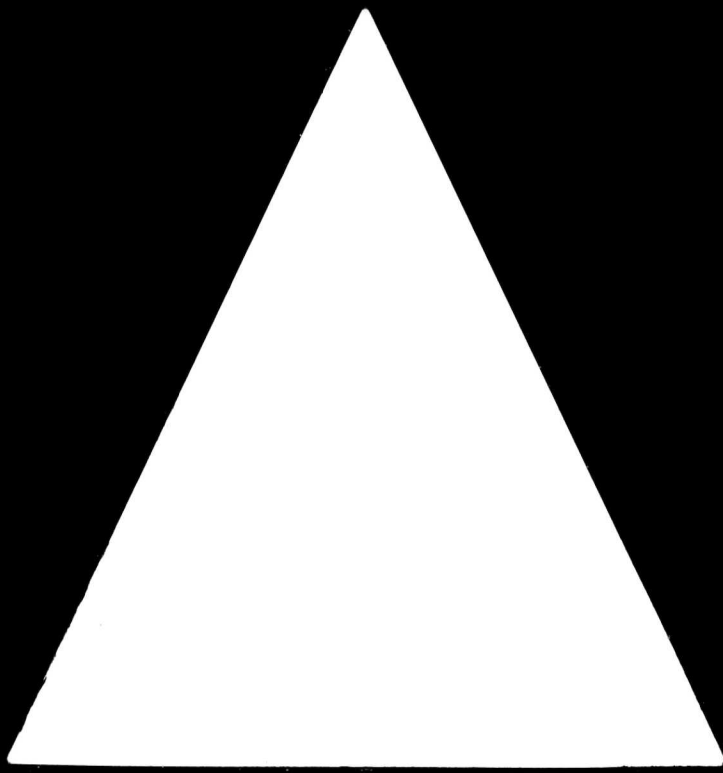
You are hereby authorized to join
John B. Howard and *Sarah Chaffee*
 in the Holy State of Matrimony, according to the Constitution
 and Laws of this State and for so doing this shall be your License.
 And you are hereby required to return this License to me,
 with your Certificate hereon of the fact and date of the Marriage.
 Given under my hand and seal this *11th* day of
December 18*68* *74* *Daniel Fowler* (L.S.)
 Ordinary

STATE OF GEORGIA **CERTIFICATE** DAWSON COUNTY

I Certify that *John B. Howard* and *Sarah Chaffee*
 were joined in Matrimony by me this *5* day of *December* *1868* *1868*
 and

Recorded
Daniel Fowler 191
 Ordinary

Richard Beard J.P.



John L. Cochran
enlisted March 29, 62
Harris, Pennsylvania
Oct. 8, 1862. 1878

Widow's Application

Under Act 1910
 Who was killed and During War as a Soldier,
 and is Now a Widow.

County *Allegheny*

Name *Diary Arnold*

Soldier-Husband's Name

John Cochran

Company *B*

Regiment *41st*

Name of Last Husband

H. C. Arnold

Approved

See list

ENTERED ROSTER OFFICE
 J. W. LINDSEY,
 Commissioner of Pensions
 State Printing Co., State Printer, Harrisburg.

10/20-1920

handwritten note

(SEAL)

John Cochran Ordinary
Allegheny County

before signing their respective affidavits and that they are truthful and trustworthy persons and their statements are entitled to full faith and credit.
 Given under my hand and official seal of office, this the *29th* day of *July* 1920

the death of husband.

That both of said persons were duly sworn by me

That I also know *John Cochran* as a *Private* in the service of husband's marriage, and was on the 4th day of November, 1906.

I, *John Cochran*, Ordinary of said County, do certify that I know *Diary Arnold* the applicant for Pension and that I know that she is the person that she represents herself to be, and that she is a bona fide continuing resident of said county, and

STATE OF GEORGIA
 COUNTY }
 I, *John Cochran*, Ordinary of said County, do certify that I know *Diary Arnold* the applicant for Pension and that I know that she is the person that she represents herself to be, and that she is a bona fide continuing resident of said county, and

handwritten note

ORDINARY'S CERTIFICATE
STATE OF GEORGIA
COUNTY.

I, J. M. Bann, Ordinary of said County, do certify that I know Ricky Howell the applicant for Pension and that I know that she is the person that she represents herself to be, and that she is a bona fide continuing resident of said county, and was on the 4th day of November, 1908.

That I also know J. C. Jones P. A. S. P. Jones witness to the service of husband's marriage, and the death of husband, that both of said persons were duly sworn by me

before signing their respective affidavits and that they are truthful and trustworthy persons and their statements are entitled to full faith and credit.

Given under my hand and official seal of affix, this the 29th day of July, 1920

J. M. Bann Ordinary
Cobb County.

(SEAL)

Widow's Application

Under Act 1910
Who served During War as a Soldier,
and is Now a Widow.

County Cobb

Name Ricky Howell

Soldier-Husband's Name John C. Howell

Company H

Regiment 41st

Name of Last Husband H. C. Howell

Approved J. C. Jones

Entered Roster Office

J. W. LINDSEY,
Commissioner of Pensions,
First Printing Co., 1011 Peachtree Avenue, Atlanta.

10/20-1920

1920-1921

1921-1922

1922-1923

1923-1924

1924-1925

1925-1926

1926-1927

1927-1928

1928-1929

1929-1930

1930-1931

1931-1932

1932-1933

1933-1934

1934-1935

1935-1936

1936-1937

1937-1938

1938-1939

Georgia Cobb County:

Personally appeared before the undersigned A. S. Pittman, who being duly sworn, on oath says, that he knew John Cochran, in his life time, and that he knows that the said John Cochran, and Dicy Scott, nee, now Dicy Howell, were married in January 1862, and that the said John Cochran, joined the Confederate Army shortly after his marriage, and never returned home, affiant says that he was informed that the said John Cochran, was killed in the Battle of Perryville Ky. and that the said Dicy Howell Cochran afterward married H. C. Howell, and that the said H. C. Howell, is now dead and that Dicy Howell is now a widow.

Sworn to and subscribed before

on this July 25th, 1920.

A. S. Pittman
Ordinary Cobb County Ga.

Widow's Affidavit of Her Husband Killed During the War and Afterwards Married and Now a Widow

STATE OF GEORGIA.

Cobb

COUNTY.

Personally before me comes *Mrs. Dicie Howell*

of said county

who, after being sworn on oath, says that she became the lawful wife of *John Cochran* on the

day of *JANUARY* 1862 and that he died on the *1st* day of *MARCH*

1862 enlisted in Company *K-41st Ga.* Regiment and was on the day of *October*

1863 killed or died as the result of an injury received while in line of duty on the day of

October 1863 leaving this applicant his widow. That on the day of

1863 she was married to *H. C. Howell* of *Cobb*

County, and that on the *23rd* day of *September* 1916 in the county of *Cobb*

State of *Ga.* the said *H. C. Howell* died and that

this deponent is now a widow.

Sworn to and subscribed before me, this the *29th* day of *July* 1920

J. M. Gann Ordinary *Dicy E. Howell*
Cobb County

(SEAL)

Affidavit of Witness to the Service and Death of Soldier-Husband and Her Marriage

STATE OF GEORGIA.

Cobb

COUNTY.

Personally before me comes *J. C. James*

after being

duly sworn, says that he knew *John Cochran* that he was in Company

K-41st Regiment of *Ga. Volunteers* day of

MARCH 1862 and that on the day of *October* 1862 he was killed

or died as a result of the injury received in Battle of *Perryville Ky.* while in the service as a soldier in the

Confederate army, and that he knows *Mrs. Dicie Howell* the applicant. She

and her said soldier husband were married on the day of

and that she was his widow at his death; that he knows that the said *Dicie Howell* married

again on the day of 19 to one *H. C. Howell*

and that her said husband *H. C. Howell* died on the *23rd* day of *September*

1916 and that the applicant is now a widow.

I was a member of the same Co. and Regiment, and in the same battle.

Sworn to and subscribed before me, this the *29th* day of *July* 1920

J. M. Gann Ordinary *J. C. James*
Cobb County

(SEAL)

READ THIS NOTE:-

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the whole truth, so help you God."
2. Additional affidavits may be allowed if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the County of the residence of the person to be sworn, and recorded to be such Ordinary.
4. Only widows whose husbands died from wounds or injuries received in line of duty before 30 April, 1908 have been married and are now widows are entitled to this Pension.
5. Blank spaces of marriage before of such persons to prove marriage, by some one who knew in or by general reputation.

5. All affidavits must be made before the Ordinary of the County of the residence of the person to be sworn, and certified to by such Ordinary.

6. Only widows whose husbands died from wounds or injuries received in line of duty before 30 April, 1965 have their names on the list and are now widows are entitled to this Pension.

7. Attach copies of marriage license of both marriages or prove marriage, by some one who knew it, or by general reputation.

Richard Johnson
Soldier's Pension
Act of March 3, 1875
For Decadal Pension

No. *100* *Lindsey*

INVALID

Soldier's Pension

1898.

Name

E. R. Norton

County

Disability

Chel' wound

Amount, \$

Unwounded S. H. 174.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

802. W. HARRISON, STATE PRINTER, ATLANTA.

9/14-1901

3/4, 1898 - 11/23, 1898

Pension Office 9/8 1898

Three witnesses must show injuries as mentioned by applicant & the physician if claim is allowed on each ground - Only one of the three mentions such injuries and he is silent as to the effect of but one of them - One of the witnesses says applicant was shot in the breast & the last witness says applicant was wounded but gives no details at all - Under the proofs the effect of but one wound could be considered & that is the one in the breast if the last mentioned witness refers to that (which is not certain) -

Does that injury render the applicant totally & essentially disabled? To prove that fact the applicant, the witnesses & the physicians should fully set out the present condition of such arm as a result of the wound, so that it may be determined to what extent it is disabled - *Richard Johnson*
Com. of Pensions

Pension Office 8/30 1898 - attention is again called to the above memo and a -

Richard Johnson
Com. of Pensions

Excluded in the presence of

day of *28th* *1898*

W. H. Johnson
W. H. Johnson
W. H. Johnson

W. H. Johnson
W. H. Johnson
W. H. Johnson

W. H. Johnson
W. H. Johnson
W. H. Johnson

POWER OF ATTORNEY.

STATE OF GEORGIA

COUNTY

Representative

of

day of

1898

at

in

County

State of Georgia

do hereby certify that the within and foregoing are the true and correct copies of the original as the same appear in my hands and well, this

day of

1898

at

in

County

State of Georgia

do hereby certify that the within and foregoing are the true and correct copies of the original as the same appear in my hands and well, this

day of

1898

at

in

County

State of Georgia

do hereby certify that the within and foregoing are the true and correct copies of the original as the same appear in my hands and well, this

day of

1898

at

in

County

State of Georgia

do hereby certify that the within and foregoing are the true and correct copies of the original as the same appear in my hands and well, this

day of

1898

at

in

County

State of Georgia

do hereby certify that the within and foregoing are the true and correct copies of the original as the same appear in my hands and well, this

day of

1898

at

in

County

State of Georgia

do hereby certify that the within and foregoing are the true and correct copies of the original as the same appear in my hands and well, this

day of

1898

at

in

County

State of Georgia

do hereby certify that the within and foregoing are the true and correct copies of the original as the same appear in my hands and well, this

day of

1898

at

in

County

State of Georgia

do hereby certify that the within and foregoing are the true and correct copies of the original as the same appear in my hands and well, this

day of

1898

at

in

County

State of Georgia

do hereby certify that the within and foregoing are the true and correct copies of the original as the same appear in my hands and well, this

day of

1898

at

in

County

State of Georgia

do hereby certify that the within and foregoing are the true and correct copies of the original as the same appear in my hands and well, this

day of

1898

at

in

County

Form No. 5.

3/4.1848 - 11/23.1848

Soldier's Pension

1941 1898.

INVALID

Name *E. D. Jones*
 Rank *Private*
 Company *Co. H 92nd Regt*
 Disability *Cholera morosa*

RICHARD JOHNSON,
 Commissioner of Pensions

WARRANT RETURNED TO

3/4, 1898 - 11/23, 1898

March 28, 9/8 1898

These witnesses must show us that the pensioner is entitled to the pension by virtue of his service in the army, and that he is now disabled from service by reason of his wounds or disease. - July 10, 1864, the pensioner was wounded in the right arm by a bullet which entered the joint and was so badly injured that he was unable to perform any manual labor. He was taken to the hospital and remained there for several months. He was then discharged from the service on account of his wounds. He has since been unable to perform any manual labor, and is now disabled from service by reason of his wounds.

James H. Jones
1830-1898
Private U.S. Army
Co. H 92nd Regt
Cholera morosa
March 28, 1898
James H. Jones
1830-1898
Private U.S. Army
Co. H 92nd Regt
Cholera morosa

Executed in the presence of

March 28, 1898

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

I Certify that the witnesses, *Richard H. Jones* and *James H. Jones*, are reputable physicians and that their statement is true and correct. This was done on the 28th day of March, 1898.

STATE OF GEORGIA

POWER OF ATTORNEY.



AFFIDAVIT FOR THREE WITNESSES.

Form No. 3.

STATE OF GEORGIA.

Cherokee County.

PERSONALLY appears before me, the undersigned Ordinary in and for said County, *C. C. Clayton*

and

personally known to me to be trustworthy citizens, each of whom, being duly sworn according to law, severally say, under oath, that they are personally well acquainted with *E. R. Howell*

whose application is herewith presented for a pension, that he has resided in this State continuously since the

day of *January* 1864 that he served in Company *C* of the

Regiment of *Howards*

Brigade, and from our personal knowledge he

was injured by the service as follows: *gave full statement, and tell in your own language when, where and how the injury happened, in the absence of controverted facts, what extent applicant is disabled from work as a direct result thereof. If he does any labor, in how many, state what*

That he was wounded in the right breast on the 6th day of August 1864, at the Battle of Atlanta in breaking the front line, and two weeks, and that he was struck on the left leg by a piece of shell at Newton, Ga. in the month of April 1864, and was struck by a spent ball at the left at Rentonville, N.C. in April 1864. He reports that these wounds had serious and permanent effects, practically, essentially and substantially kept him unable to perform manual labor, to pursue the usual avocations of life requiring manual labor. They require the payment of his condition will continue as long as he lives.

We personally know above stated facts. We were with him in the army and have known him ever since.

He was honorably discharged or retired from the service on *April* day of *1865*. *He was discharged with the position of Sergeant Major, N.C.* Applicant is permanently disabled as stated and has been so to our certain knowledge ever since 1865. We have no interest in the recovery of a pension by him.

Sworn to and subscribed before me, this

C. C. Clayton

W. H. Storkley day of *July* 1898

NOTE 1.—The Ordinary will see that the full text of the Affidavit is understood by the witnesses, and that they are legally qualified to take the same.
2.—Witnesses are asked to make their statements full and explicit, tracing disability to its true cause.
3.—If blank spaces must be filled when signed.
4.—Three witnesses are required.

I certify that D. V. Storkley before whom the above Affidavit was taken is a J.P. in Cobb County duly commissioned as such. J. H. Stone
July 3/98

PHYSICIANS' AFFIDAVIT.

Form No. 3.

STATE OF GEORGIA.

Cobb County.

PERSONALLY come before me, *J. H. Stone* Ordinary of said County,

Chas. H. Storkley M.D. and *J. H. Freeman M.D.* both known to me as reputable physicians of said County, who being severally sworn, say on oath, that they have carefully examined *E. R. Howell* and after such personal examination, say that

the present condition of applicant is as follows:

We find applicant (Chas. H. Storkley) to have received a gunshot wound in the right breast in front, breaking the third or fourth bone, ranging backward & downward, the breaking was a rib, which injury from dislocation of shoulder & the blow under the right arm, to a great extent, essentially & substantially disabled, we declare that he suffers from hernia as a result, and is disabled by a gunshot wound in the right leg, caused by being struck on said leg, and that such condition is permanent. Said condition arises from the following facts:

Applicant reports that he has from a gradual & continuous washing of parts affected by the wounds as described above. We further state that said injuries are of such a character, that they render him practically, substantially, & transiently unable to perform ordinary manual labor, to the extent of more than 90%.

We have treated applicant professionally for *2* years, and his condition, as above stated, does not arise from hereditary or congenital causes, or from violent or intemperate habits.

Sworn to and subscribed before me, this *3rd* day of *July* 1898, *Chas. H. Storkley M.D.* and *J. H. Freeman M.D.* Ordinary.

NOTE 1.—State fully the physical condition and especially the extent of disability. If disability results from wound or injury, state its location, character and present condition. If from disease, give its nature and character, and its cause or origin, as understood by the affiants.
NOTE 2.—The physicians will be careful to fill every blank space in oath.

STATE OF GEORGIA.

Form No. 4.

Cobb County.

I, *J. H. Stone* Ordinary of said County,

do certify that I am well acquainted with *E. R. Howell* 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 witnesses, to-wit: *C. C. Clayton*

Chas. H. Storkley M.D. and *J. H. Freeman M.D.* are persons of respectability, that their statements are worthy of full credit and belief and that the full text of the affidavit was read to and understood by them before they signed the same.

Given under my official signature and seal this *3rd* day of *July* 1898, *J. H. Stone* Ordinary, *Cobb* County.

All amending proofs must be executed with the same formality as original proofs, and the Ordinary must so certify.

Physicians' Affidavit.

STATE OF GEORGIA,

County,

PERSONALLY comes before me John Awtrey Ordinary of said County,

E. R. Howell and J. T. Gault M.D., 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 personal examination, say that the present condition of applicant is as follows: He is badly lacerated on the left side. Also suffers greatly from various ulcers in left leg. He has a fearful gunshot wound in the right breast, which also fractures his right shoulder, maiming and disabling his right arm, rendering said right arm practically and essentially useless.

and that such condition is permanent. Said condition arises from the following facts:

We have treated applicant professionally for 1 1/2 years, and his condition, as above stated, does not arise from hereditary or congenital causes, or from vicious or intemperate habits.

Sworn to and subscribed before me, this 12th day of Sept. 1901,
John Awtrey Ordinary.

NOTE 1. State fully the physical condition and especially the extent of disability. If disability results from wound or injury, state its location, character and present condition. If from disease, give its nature and character, and its course or origin, as understood by affiants.

NOTE 2.—The physicians will be careful to fill every blank space in oath.

STATE OF GEORGIA,

County,

I John Awtrey 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 and has been a bona fide residence since the 18 day of 18

I also certify that the witnesses, to-wit: J. T. Gault M.D. and J. T. Gault M.D. are persons of respectability, that their statements are worthy of full credit and belief and that the full text of the affidavit was read to and understood by them before they signed the same.

Given under my official signature and seal this 12th day of Sept. 1901

John Awtrey Ordinary Cobb County.

All amending proofs must be executed with the same formality as original proofs, and the Ordinary must so certify.

Amendment, Sept. 1901.

OFFICE OF

JOHN AWTRY

ORDINARY, COBB COUNTY.

Marietta, Ga.,

1901.

Georgia, Cobb County.

Personally appeared E. R. Howell, Applicant for Invalid Pension, and in addition to his evidence heretofore given, deposes and says that the ~~wound~~ gunshot wound received in the right breast at the battle of Atlanta in August 1864, also fractured his right shoulder and disabled his right arm, so that he cannot use said arm for labor in the ordinary manual avocations of life, and rendering said arm practically and essentially useless.

E. R. Howell

Sworn to and Subscribed
before me this Sept. 17th 1901.
John Awtrey
Ordinary

Amendment, Sept. 1901.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, *E. H. Howell* hereby authorize *John Lindsey* of _____ to receive and receipt for the pension paid hereon and request that he remit same to _____ by _____.

at _____ IN WITNESS WHEREOF, I have hereunto set my hand and seal this *2nd* day of *January* 1902. *E. H. Howell* [L. S.]

Executed in presence of

J. M. Gann

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, *E. H. Howell* hereby authorize *John Lindsey* of _____ to receive and receipt for the pension paid hereon and request that he remit same to _____ by _____.

at _____ IN WITNESS WHEREOF, I have hereunto set my hand and seal this _____ day of *Jan* 1903. *E. H. Howell* [L. S.]

Executed in presence of

(FOR THOSE ALREADY ENROLLED.)

No. *319*

DISABLED

SOLDIER'S PENSION
1902.

Name *E. H. Howell*
County *Cobb*
Co. *K* Regiment *42*
Disability
Amount, \$ *22 1/2* 1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Gray

Gen. W. Matthews, State Printer, Atlanta.

No data
Howell E. H.
Cobb County

(FOR THOSE ALREADY ENROLLED.)

No. *266*

DISABLED

SOLDIER'S PENSION
1903.

Name *E. H. Howell*
County *Cobb*
Co. *K* Regiment *42*
Disability
Amount, \$ *50 00*
1/2 1/2 1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

only

Gen. W. Matthews, State Printer, Atlanta.

No data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.)

Personally appears E. R. Howell 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

1844; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a private in Company K, of 42th Regiment of Ga Volunteers, Spawls' Brigade; that whilst engaged in such military service in the State of Ga, on the 6th day

of August & other date 1864, he was wounded, injured or diseased as follows: By gun shot passing through the right breast and pierce of skull striking the left ankle fracturing the bones of same and Minnie ball at Antietam & C. breaking rim of belly from which wounds Deponent has never recovered and said wounds has rendered him practically incompetent to perform the ordinary avocations of life.

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1902. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of \$50.00 Dollars, for the year 1902.

Sworn to and subscribed before me, this the 4th day of January 1902. E. R. Howell

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

STATE OF GEORGIA,
Cobb County.)

I, John Aubrey Ordinary of said County, do certify that I am well acquainted with E. R. Howell the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1902.

John Aubrey Ordinary, Cobb County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.)

Personally appears E. R. Howell 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

1844; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a private in Company K, of 42th Regiment of Ga Volunteers, Spawls' Brigade; that whilst engaged in such military service in the State of Ga, on the 6th day

of August 1864, he was wounded, injured or diseased as follows: By gun shot passing through right breast and pierce of skull striking the left ankle fracturing the bones of same and Minnie ball at Antietam & C. breaking rim of belly from which wounds Deponent has never recovered and said wounds has rendered him practically incompetent to perform the usual avocations of life also left on the was struck by piece of shell striking same also struck by minnie ball at Antietam & C. breaking rim of belly.

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1903. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of \$50.00 Dollars, for the year 1902.

Sworn to and subscribed before me, this the 4th day of January 1903. E. R. Howell

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

STATE OF GEORGIA,
Cobb County.)

I, John Aubrey Ordinary of said County, do certify that I am well acquainted with E. R. Howell the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1903.

John Aubrey Ordinary, Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

I, E. R. Howell hereby authorize

John Anthony of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
by _____

at _____

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

E. R. Howell [L. S.]

Executed in presence of

J. M. Gam

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

I, E. R. Howell hereby authorize

John Anthony of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
by _____

at _____

In WITNESS WHEREOF, I have hereunto set my hand and seal, this _____
day of Jan 1905.

E. R. Howell [L. S.]

Executed in the presence of

J. M. Gam

CODE SECTION 1250.

(FOR THOSE ALREADY ENROLLED.)

No. 241

DISABLED

SOLDIER'S PENSION

1904.

Name E. R. Howell

County Cobb

Co. A Regiment 42

Disability

Amount, \$ 50.00

JAN 25 1904.

JOHN W. LINDSEY,

(Commissioner of Pensions)

WARRANT HANDLED TO

body

Geo. W. Harrison, State Printer, Atlanta.

no date

(FOR THOSE ALREADY ENROLLED.)

No. 241

DISABLED

SOLDIER'S PENSION

1905.

Name E. R. Howell

County Cobb

Co. A Regiment 42

Disability

Amount, \$ 50.00

JAN 23 1905.

JOHN W. LINDSEY,

(Commissioner of Pensions)

WARRANT HANDLED TO

body

Geo. W. Harrison, State Printer, Atlanta.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears *E R Howell* 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 *1843*; 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 *K*, of *42nd* Regiment of *Volunteers* *Storads*'s Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *10* day of *August* *1864*, he was wounded, injured or diseased as follows:

Gun shot in breast and gut. Rim of belly broken at Bentonville, AR

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1904. I have heretofore, under said law, as a resident of *Cobb* County, been allowed an invalid pension of *50* Dollars, for the year 1903.

Sworn to and subscribed before me, this *10th* day of *January*, 1904.

E R Howell
Post-office

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

STATE OF GEORGIA,

Cobb County.

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

Given under my official signature and seal, this *10th* day of *January*, 1904.

John Anthony
Ordinary *Cobb* County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb COUNTY.

Personally appears *E R Howell* 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 *1843*; 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 *K*, of *42nd* Regiment of *Volunteers* *Storads*'s Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *10* day of *August* *1864*, he was wounded, injured or diseased as follows:

Gun shot passing through right breast—also left arm through to piece of shell—rendering him practically incompetent to perform the ordinary manual avocations of life

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1905. I have heretofore, under said law, as a resident of *Cobb* County, been allowed an invalid pension of *50* Dollars, for the year 1904.

Sworn to and subscribed before me, this *10th* day of *January*, 1905.

E R Howell
Post-office

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

STATE OF GEORGIA,

Cobb COUNTY.

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

Given under my official signature and seal, this *9th* day of *January*, 1905.

John Anthony
Ordinary *Cobb* County.

Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1, 1905.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY. }
 I, E. R. Howell hereby authorize
John A. Haring of _____
 to receive and receipt for the pension paid hereon, and request that he remit same to
 _____ by _____
 at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____
 day of July 1906.

E. R. Howell [L. S.]

Executed in the presence of
McLam

Cross Section 1260
 (FOR THOSE ALREADY ENROLLED.)

No. 266

**DISABLED
 SOLDIER'S PENSION
 1906.**

Name E. R. Howell
 County Cobb
 Co. K. 42 Regiment 6th Inf.
 Disability Am
 Amount, \$ 52-

1906.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO

The Pension Office and Pensions Office, No. 10, Williams, Bldg.

no data

Howell, E. R.
Cobb Co.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY. }
 I, E. R. Howell hereby authorize
John A. Haring of _____
 to receive and receipt for the pension paid hereon, and request that he remit same to
 _____ by _____
 at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 4
 day of July 1907.

E. R. Howell [L. S.]

Executed in presence of
McLam

Cross Section 1260.
 (FOR THOSE ALREADY ENROLLED.)

No. 266

**DISABLED
 SOLDIER'S PENSION
 1907.**

Name E. R. Howell
 County Cobb
 Co. K. 42 Regiment
 Disability Am
 Amount, \$ 52

JAN 21 1907.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO

One W. H. Adams, 1010 Peachtree, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Cobb County.

Personally appears E. A. Howell of _____
County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen
and resident of said State, and has resided therein continuously ever since the
day of _____ 18____; 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 _____ in Company K, of 42nd Regiment
of La Volunteers _____'s Brigade; that whilst engaged
in such military service in the State of _____, on the _____ day
of _____ 186____, he was wounded, injured or diseased as follows:

Disabled arm

Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1906. I have heretofore, under said law, as a resident of
Cobb County, been allowed an invalid pension of
50 00 Dollars, for the year 1905.

Sworn to and subscribed before me, this the

1 day of January 1906.

E. B. Howell
Post-Office _____

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

State of Georgia,

County.

I, _____ 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 _____ County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Cobb County.

Personally appears E. A. Howell of Cobb
County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen
and resident of said State, and has resided therein continuously ever since the
day of _____ 18____; that he enlisted in the military service of the Con-
federate States (or of the State of _____) during the war between the
States, and served as a _____ in Company A, of 42nd Regiment
of _____ Volunteers _____'s Brigade; that whilst engaged
in such military service in the State of _____, on the _____ day
of _____ 186____, he was wounded, injured or diseased as follows:

Disabled arm

Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1907. I have heretofore, under said law, as a resident of
Cobb County, been allowed an invalid pension of
_____ Dollars, for the year 1906.

Sworn to and subscribed before me, this the

1 day of January 1907.

E. A. Howell
Postoffice _____

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

State of Georgia,

Cobb County.

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

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

E. B. Howell
Ordinary Cobb County.

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

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Instructions for Applicants to Answer.

STATE OF GEORGIA

County of Chatham I, Edw. J. Howell of said State and County, hereby apply for the pension authorized by Act of March 3, 1907, to Compensation holders and others for service with the Confederate States and the Army and Navy and other military and naval service in which the applicant participated, whether as Soldier or not.

Where your name has been on your name? (Give County and State.)
Chatham County, Georgia

How long and since when have you been a continuous resident within the State?
all my life 20 years

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

2. What and where, and in what Company or Regiment did you enlist? (Give name and place of Service)
Company 1st Georgia Cavalry, 1st Division, 1st Army Corps, Confederate States Army

3. How long did you remain in the United States Service with said Company and Regiment?
April 1862 to April 1865

(Give date of discharge) What and where was your Company and Regiment surrendered or discharged from the Service?
April 9th 1865, Fort Sumter, S.C.

4. Were you personally present with your Command when it was surrendered or discharged?
Yes

5. If you were not personally present, state specifically and clearly where you were.
I was present

6. Where was your Command when you left it?
Fort Sumter, S.C.

7. What did you leave the Command?
April 26/65

8. For what cause did you leave?
After being ordered

9. By whose authority did you leave?
By the authority of the Confederate States Army

10. For how long was your leave granted? In what way?
For 30 days

11. Why did you not return to your Command after leave expired?
Not captured

12. In what way were you prevented?
Not captured

13. What effort did you make to return?
None

14. Were you captured during the war?
Yes

15. If so, where and when? In what prison were you held and when were you released?
Not captured

16. What property of every description was owned, in the use, possession and control of yourself and wife, on the 4th day of Nov. 1865? (Make item by item and value.)
None

17. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov. 1865. To whom and for what price?
None

18. 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 item by item and value.)
None

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

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

21. Have you ever applied for the Georgia Pension and has it refused and for what reason?
Not allowed

22. Have you ever applied for the United States Pension and has it refused and for what reason?
Not allowed

23. Have you ever applied for the United States Pension and has it refused and for what reason?
Not allowed

24. Have you ever applied for the United States Pension and has it refused and for what reason?
Not allowed

Soldier's Application.

UNDER ACT 1910.

12302-5

12302-5

12302-5

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12302-5

Confederate

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Howell, E. J. Co. 1st

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ENTERED MASTER OFFICE

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12302-5

12302-5

12302-5

12302-5

CHAS. F. STEED, STATE PRINTER, ALBANY.

QUESTIONS FOR WITNESS AS TO SERVICE

STATE OF GEORGIA.

County.

I, Ed. H. Hume, of said State and County, is hereby appointed as a witness in support of the application of Ed. Hume for discharge 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? Ed. Hume

2. How long and since when have you known Ed. Hume the applicant? Over 60 years

3. Where does he now reside, and since when has he been a bona fide continuing resident in this State and how do you know? Remains at the same place since he was born

4. When, where and in what Company and Regiment did Ed. Hume serve during

was from 1901 to 1905. (Give date and place) He was in the 1st Co. of the 1st Regt. of the 1st Div. of the 1st Army.

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

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date and place) From 1901 to 1905

7. When and where was his Command surrendered or discharged (give date and place) I don't know

8. Were you personally present at the Surrender? No

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

10. Was the applicant personally present with his Command at surrender? I don't know

11. If not where was he and how came he there? I don't know

12. When did he leave his Command? When was his Command

13. In what way was he prevented from returning to his Command? By whose authority did he leave?

14. What effort did he make to return to his Command and how do you know? 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 5th day of Oct, 1915.

J. M. Hume Ordinary

STATE OF GEORGIA.

County.

I, Ed. H. Hume, of said County, do hereby certify that I know

the applicant in person and we know the property described in the foregoing affidavit and interest of himself and wife and of the said value as well. (State date of same as above)

1. What property, if any, has been sold or given away by the Applicant or his wife since 4 Nov 1905? (State it fully by name)

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

3. What was the price or value of the same?

4. What was the date of the sale?

5. What was the date of the purchase of the same?

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

Sworn to and subscribed before me, this the

day of Oct, 1915.

of Ed. Hume Ordinary, County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

County.

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

the Ed. Hume the person he represents himself to be and resides in

said County. That I also know Ed. Hume the witness swearing to the

service and Ed. Hume who are freeholders, that

they are all residents of said County and were duly sworn by me before signing the foregoing affidavits and

they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the

Tax Return of Ed. Hume shows that Ed. Hume and wife

value for said year 1905 \$00 for 1906 \$00 for 1910 \$00

for 1911 \$00 for 1912 \$00 for 1913 \$00

Sworn under my hand and official seal of office this 26th day of Oct, 1915.

J. M. Hume Ordinary, County.

of Ed. Hume County.

NOTES: 1. Before any Affidavit is sworn the Ordinary shall swear applicant and all witnesses in the following words:

"I, the Ordinary, do hereby swear that you will come before me in the Court of said County, and that you will

and give full and true testimony in the Court of said County, and that you will not be guilty of perjury.

2. The Ordinary shall also swear to the following: "I, the Ordinary, do hereby swear that I am a freeholder and

that I am a resident of said County, and that I am a freeholder and a resident of said County, and that I am a

freeholder and a resident of said County, and that I am a freeholder and a resident of said County, and that I am a

freeholder and a resident of said County, and that I am a freeholder and a resident of said County, and that I am a

freeholder and a resident of said County, and that I am a freeholder and a resident of said County, and that I am a

freeholder and a resident of said County, and that I am a freeholder and a resident of said County, and that I am a

Howell, E. R.

For *Cost* *Cost* *Cost*

1926

**Application for Pension
Due Deceased Pensioner**

(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

E. R. Howell Ordinary

For *E. R. Howell*

Date of Death *Dec 15* 1926

Amount \$ *145.00*

Approved and ordered paid

John W. Clark
JOHN W. CLARK
Commissioner of Pensions
11 Dec 26

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

For the funeral expenses of Mr. E. R. Howell.

1896

IN ACCOUNT WITH
HARRY G. POOLE.
FUNERAL DIRECTOR
96 S. PRYOR STREET
ATLANTA, GA.

1926

WALNUT | 6356
| 6359

June 15th 1926.
To Cash

Funeral and services \$ 100.00
Coffin 10.00
Burial 5.00
Gravestone 25.00

\$ 145.00

Georgia,
Fulton County.
Personally appeared before me Harry G. Poole,
who after being sworn, swears the above account
is just and correct and was for the funeral of
Mr. E. R. Howell who died without sufficient funds
to pay his funeral expenses.

Sworn to and subscribed *Harry G. Poole*
before me this 15th day of
October, 1926.

Arthur G. W. W. W.
C. C. Ordinary.

Howell, E. R.

For *Colt* Compt

1926

**Application for Pension
Due Deceased Pensioner**
UNDER ACT 1919

To pay expenses of last illness and funeral

E. R. Howell Ordinary

For *E. R. Howell*

Date of Death *June 15* 1926

Amount *\$145.00*

Approved and ordered paid

John W. Clark
11 Dec 26 JOHN W. CLARK
Commissioner of Pensions

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

For the funeral expenses of Mr. E. R. Howell.

1896

IN ACCOUNT WITH
HARRY G. POOLE,
FUNERAL DIRECTOR
88 N. PAVOR STREET
ATLANTA, GA.

1926

WALNUT 1896

June 15th 1926.

To Cash for

Funeral expenses and services

Notice

Receipt

\$ 120.00

15.00

5.00

25.00

\$ 145.00

Georgia,
Fulton County.
Personally appeared before me Harry G. Poole,
who after being sworn, says the above account
is just and correct and was for the funeral of
Mr. E. R. Howell who died without sufficient funds
to pay his funeral expenses.

Sworn to and subscribed
before me this 15th day of
October, 1926.

Arthur R. Mendenhall
C. C. Ordinary.

Application for Pension Due to a Deceased Pensioner

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

(Under Act Approved August 15, 1904)

GEORGIA, Fulton County.

Personally before me, the Ordinary of said County, comes Harry G. Poole of said County, who, after being sworn, on oath says that he knew E. R. Howell of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in Fulton County, in this State, on the 12 day of June 1926, and that a Pension of \$ () Dollars was due pensioner and unpaid at the time of pensioner's death, and that pensioner left no widow or dependent children surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$4500. per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me

Arthur B. Marshall Ordinary
Fulton County

Harry G. Poole

(Seal of Ordinary)

CERTIFICATE OF ORDINARY

GEORGIA, Fulton County.

I, Thos. H. Jeffries, Ordinary of said County, do certify that I personally know Harry G. Poole, 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 while in life and that this was the same person whose name appears on the Pension Roll of Fulton County, and was paid a Pension of \$ () Dollars in said County for 1926, 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 15 day of Oct 1926
(Seal of Ordinary) Thos. H. Jeffries Ordinary
Fulton 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. The Ordinary signs pay roll, as Ordinary, for the pension and then disburses the money himself and takes receipts.
- 6th. Return this application, and attached bills, with your final settlement, to the Pension Department.
- 7th. Ordinary should see that the back of this blank, when folded, is filed out.

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, _____ County.

Personally before me, the Ordinary of said County, comes _____ of said County, who, after being sworn, on oath says that he knew _____ of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in _____ County, in this State, on the _____ day of _____ 192____, and that a Pension of _____ (\$ _____) Dollars was due pensioner and unpaid at the time of pensioner's death, and that pensioner left no widow or dependent children surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$ _____ per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me

_____, Ordinary
_____, County

(Seal of Ordinary)

CERTIFICATE OF ORDINARY

GEORGIA, Cobb County.

I, J. M. Lamm, Ordinary of said County, do certify that I personally know _____, 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 E. R. Howell while in life and that this was the same person whose name appears on the Pension Roll of Cobb County, and was paid a Pension of One Hundred (\$100.) Dollars in said County for 1926, 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 20 day of April 1926
(Seal of Ordinary) J. M. Lamm Ordinary
Cobb 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. The Ordinary signs pay roll, as Ordinary, for the pension and then disburses the money himself and takes receipts.
- 6th. Return this application, and attached bills, with your final settlement, to the Pension Department.
- 7th. Ordinary should see that the back of this blank, when folded, is filed out.

4th. The completed voucher—this blank and the bill—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. The Ordinary signs pay roll, as Ordinary, for the pension and then disburses the money himself and takes receipts.

6th. Return this application, and attached bills, with your final settlement, to the Pension Department.

7th. Ordinary should see that the back of this blank, when folded, is filled out.

blank, after this blank has been properly completed as indicated.

8th. The completed voucher—this blank and the bill—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.

9th. The Ordinary signs pay roll, as Ordinary, for the pension and then disburses the money himself and takes receipts.

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

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

Howell, E. R.

For Col. C. C. Ordinary Count

1926

**Application for Pension
Due Deceased Pensioner**
(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

John W. Clark Ordinary

For E. R. Howell

Date of Death June 12 1926

Amount \$100.00

Approved and ordered paid

John W. Clark
11 Dec 26 JOHN W. CLARK,
Commissioner of Pensions

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

For the funeral expenses of Mr. E. R. Howell.

IN ACCOUNT WITH
1896 HARRY G. POOLE. 1926
FUNERAL DIRECTOR
96 S. PRYOR STREET
ATLANTA, GA.

WALNUT 0555
0555

June 12th 1926.

| | |
|------------------------|-----------|
| To Casket | \$ 100.00 |
| Embalming and services | 15.00 |
| Notices | 5.00 |
| Hearse | 25.00 |
| | ----- |
| | \$ 145.00 |

Georgia,
Fulton County.

Personally appeared before me Harry G. Poole, who after being sworn, says the above account is just and correct and was for the burial of Mr. E. R. Howell who died without sufficient funds to pay his funeral expenses.

Sworn to and subscribed Harry G. Poole
before me this 15th day of
October, 1926.

Allen B. Marshall
C. C. Ordinary.

OFFICE OF
J. M. GANN
ORDINARY
COBB COUNTY, GA.

Marietta, Ga.,

Georgia, Fulton County.

Received of J. M. Gann, Ordinary,
Cobb County, Georgia, one hundred (\$100.00) dollars on the
attached bill for the burial of F. R. Howell, this being
the amount allowed by the state of Georgia on said expenses.
This Jan. 4 1927.

Harry G. Pool
by Wm. Maxwell

Witness:

A. B. Engarbut

Georgia } Personally appeared before
Cobb County } me the undersigned, C. C. Clayton
} Who being sworn says, that in ad-
dition to the affidavit heretofore made by him
in the matter of C. R. Howell application for admission
says that his deponent was a member of Co. K 42nd
Inf. Regiment and knows that said Howell enlisted
in said company in January 1864 and served
until April 1865 and was honorably discharged.
And knows that said Howell was wounded in
the breast at the battle of Atlanta on the 6th of Sep-
tember 1865 breaking the breast bone and two ribs
and that he received the other injuries as mentioned
in deponent's former affidavit. Deponent says that
he has known said Howell intimately ever since
1865 and that since 1888 his right arm has
practically and essentially under. Caused from
the wound in the breast and that he is unable
to perform manual labor sufficient to support
himself, the above are facts to best of my knowledge
known to deponent
before me this 29th day of Nov 1898
D. N. Hokeby J. D. } & belief
C. C. Clayton

over

I Certify that James McLean before
 this affidavit is made is an acting
 Justice of the Peace and as such is
 authorized to administer oaths.
 Given my hand & seal Nov 17 1898

Attest
 Clerk
 Cherokee Co.

James
 McLean
 Justice of the Peace

This is a true and correct copy of the
 original as the same is on file in the
 office of the Clerk of the County of
 Cherokee

Attest
 B. B. McLean
 Clerk of the County of Cherokee

Wherefore the Clerk of the County of Cherokee
 do hereby certify that the above is a true and correct
 copy of the original as the same is on file in the
 office of the Clerk of the County of Cherokee
 and that the same is a true and correct copy of the
 original as the same is on file in the office of the
 Clerk of the County of Cherokee

State of Georgia,

Fullon County.

Personally appeared before me, the undersigned Ordinary in and for said County, Green J. Watkins, personally known to me, to be a trust worthy citizen, whom, being duly sworn according to law, says; under oath, that he is personally well acquainted with E. R. Howell, whose application is here with presented for a Pension, that he has resided in this State continuously since the day of January, 1864, that he served in Company K of the 42nd Regiment of Stovell's Brigade, and from his personal knowledge he was injured by the service as follows:

That said E. R. Howell was shot in the right breast in August 1864 in the Battles of Atlanta Georgia, exact day of which affiant does not recollect, said shot breacking two ribs and said wound was a very bad wound and was such a one as would incapacitate said E. R. Howell to perform manual labor, and in opinion of affiant said Howell is unable to perform manual labor.

I personally know the above stated facts, I was with him in the army and have known him ever since. He was honorably discharged or retired from the service on the day of April 1865. Applicant is permanently disabled as stated and has been so to my certain knowledge ever since 1865. I have no interest in the recovery of a Pension by him.

Sworn to and subscribed

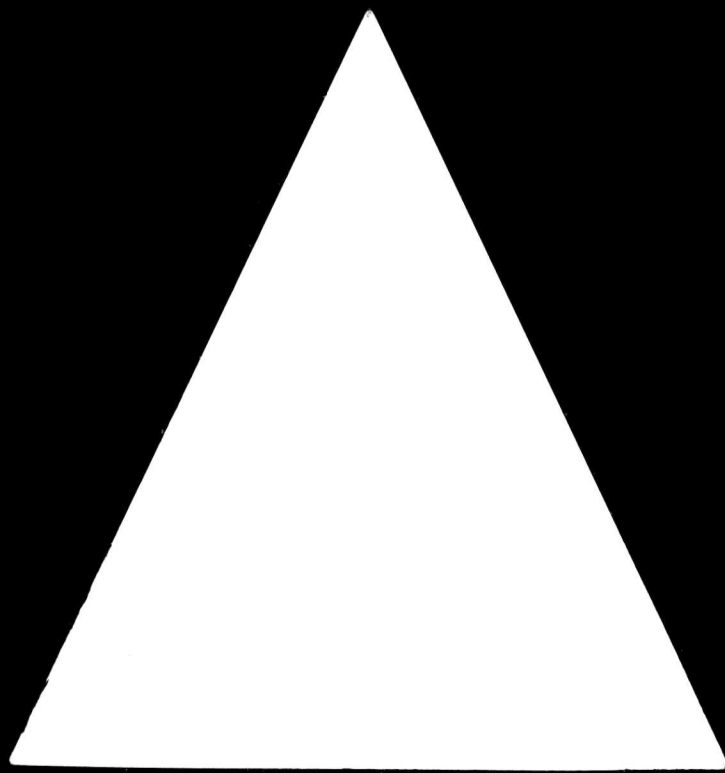
before me this 24th day of March 1898.

Matthew *E. J. Watkins*
Ordinary.

*certify that the above E. J. Watkins
is a man worthy of full pay
and credit as a soldier*

March 4 - 1898

Matthew
Ordinary



POWER OF ATTORNEY.

STATE OF GEORGIA.

COUNTY.

I, _____, do hereby authorize _____

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

Executed in presence of _____

(L.S.)

HUBBARD, DANIEL V.

Cass Co. Ga.
7 miles N. of 20

No. _____

INDIGENT PENSION

1899.

Name D. V. J. Hubbard

County Cobb
Co. 13 - 45 - Ga

Approved _____

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

REG. W. HARRISON, STATE PRINTER, ATLANTA.

5/29/1907

12/21/1908

3/22/99

Pension Office 20/1899
Service must have been
rendered as a soldier.

Rich Johnson
Comm. of Pensions

Pension Office 20/1899

Application, now done
the proffs. Show any
Military Service - now
done Pension office
do not show any
evidence of them
own knowledge, or by
examination. This
claim is disapproved

Rich Johnson
Comm. of Pensions

Pension Office 14/5/1899
In addition to the above, was
- in - and that very obliging
may be sent - application
whereas done with application
The Muster Roll of Co. 13 45
and the Record of the same
showing in the Muster Roll
that the above claimant
is a soldier and that he
has a right to a pension
and that he is a soldier

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

COUNTY.

J. J. Tince and *D. V. Hubbard* being presented as witnesses in support of the application of *J. J. Tince* 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. J. Tince
Hutton Co. Ga

2. Are you acquainted with *D. V. Hubbard*, the applicant; if so how long have you known him?
All of my life

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

4. When, where and in what company and regiment did he enlist, and how do you know?
Was a small boy & don't remember what Co

5. Were you a member of the same company and regiment?
For young & don't

6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service?
He was in the Confederate service in the early history of the war & I might have been in the same & don't know if he was

7. What property, effects or income has the applicant? (Give your means of knowledge.)
He has in the Confederate service in the early history of the war & I might have been in the same & don't know if he was

8. What property, effects or income did the applicant possess in 1896, 1897 and 1898, and what disposition, if any, did he make of same?
He has in the Confederate service in the early history of the war & I might have been in the same & don't know if he was

9. What property, effects or income did the applicant possess in 1896, 1897 and 1898, and what disposition, if any, did he make of same?
He has in the Confederate service in the early history of the war & I might have been in the same & don't know if he was

10. What is the applicant's occupation and physical condition?
He has in the Confederate service in the early history of the war & I might have been in the same & don't know if he was

11. Is the applicant unable to support himself by labor of any sort, if so, why?
He has in the Confederate service in the early history of the war & I might have been in the same & don't know if he was

12. How was he supported during the years 1897 and 1898?
He has in the Confederate service in the early history of the war & I might have been in the same & don't know if he was

13. What portion of his support for the two years was derived from his own labor or income?
He has in the Confederate service in the early history of the war & I might have been in the same & don't know if he was

14. Give a full and complete statement of the applicant's physical condition that entitled him to a pension under Section 1254, Code?
He has in the Confederate service in the early history of the war & I might have been in the same & don't know if he was

15. What interest have you in the recovery of a pension by this applicant?
He has in the Confederate service in the early history of the war & I might have been in the same & don't know if he was

Sworn to and subscribed before me, this *25* day of *June* 1899.

J. J. Tince Ordinary.

D. V. Hubbard Witness.

J. J. Tince Ordinary.

D. V. Hubbard Witness.

J. J. Tince Ordinary.

D. V. Hubbard Witness.

STATE OF GEORGIA,

Cobb COUNTY.

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

Applicant says he has rheumatism in right hip and leg, which is very severe at times. He also says that he passes large amounts of urine, that is normal. His general health is not good.

We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me this the *21* day of *June* 1899.

C. J. Nolan M.D. Ordinary.

J. A. Malone M.D. Ordinary.

C. J. Nolan M.D. Ordinary.

J. A. Malone M.D. Ordinary.

C. J. Nolan M.D. Ordinary.

J. A. Malone M.D. Ordinary.

C. J. Nolan M.D. Ordinary.

J. A. Malone M.D. Ordinary.

C. J. Nolan M.D. Ordinary.

J. A. Malone M.D. Ordinary.

C. J. Nolan M.D. Ordinary.

J. A. Malone M.D. Ordinary.

C. J. Nolan M.D. Ordinary.

J. A. Malone M.D. Ordinary.

C. J. Nolan M.D. Ordinary.

J. A. Malone M.D. Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cobb COUNTY.

I, *D. V. Hubbard* Ordinary in and for said County, hereby certify that the applicant *D. V. Hubbard* resides in said County, and has been a bona fide resident of this State since the *18* day of *June* 1899, and that the witnesses, viz:

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

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

I further certify that the tax digests of *Cobb* County show that applicant returned for taxation in his name in 1897 *\$15.30* Dollars, and in 1898 *\$21.35* Dollars of property.

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

Witness my hand and seal of office, this *21* day of *June* 1899.

D. V. Hubbard Ordinary.

C. J. Nolan M.D. Ordinary.

J. A. Malone M.D. Ordinary.

C. J. Nolan M.D. Ordinary.

J. A. Malone M.D. Ordinary.

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.

COUNTY.

I, _____, hereby authorize _____

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

Witness my hand and seal this _____ day of _____ 1899

Executed in presence of

(L. S.)

STATE OF GEORGIA

County

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

1. What is your name and where do you reside? (Give State, County and post office).
My name is David V. Dastane, Meriden, Conn. P.O.
2. How long and since when have you been a resident of this State? Since 1877.
3. When and where were you born? In Pickens Dist. S.C. on June 20th 1847
4. When and where and in what company and regiment did you enlist or serve?
I enlisted in U.S.A. Co. 9th Ga. Inf. Charles Co. and was on detail service as a cooper for two years and seven months.
5. How long did you remain in such company and regiment?
I was wounded as a member of that company in April 1865.
6. For how long a period did you discharge regular military duty?
Detail service for two years and seven months.
7. When, where, and under what circumstances were you discharged from service?
I was paroled in April 1865 in Mason Co. when the ship to which I was attached was captured.
8. What is your present occupation?
I have been engaged in farming.
9. How much can you earn (gross) per annum by your own exertions or labor?
Comparatively little over \$1000.
10. What has been your occupation since 1865?
Farming as long as had means.
11. Upon which of the following grounds do you base your application for pension, viz.: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty?"
Infirmity and poverty.
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight?
I have not been able to make living by my labor for five years - on account of distention and rheumatism which has no margin in remission and hard labor while in the army so severe.
13. What property, estate or income do you possess, and its gross value?
I have no property except household goods and furniture worth about fifty dollars.
14. What property, effects or income did you possess in 1864, 1865, 1866, 1867 and 1868, and what disposition, if any, did you make of same?
I had a farm during three years which was covered by a mortgage for security debts and sold to satisfy said debt.
15. In what County did you reside during those years, and what property did you then return for taxation?
In Holt County.
16. How were you supported during the years 1867 and 1868?
By the rent of Maryland land that I then owned.
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 dollars.
18. What was your employment during 1867 and 1868? What pay did you receive in each year?
I was employed as a cooper again and received no pay.
19. Have you a family? If so, who compose your family? Give their means of support. Have they a home?
I have a wife dependent upon me for support. She has no domestic aid.
20. Are you receiving any pension? If so, what amount, and for what disability?
None.

Sworn to and subscribed before me this the

1899.

of Stone Ordinary,
Robb County

David V. Hubbard

Manette Gen

15

Every Question **MUST** be Answered

[illegible]

HUBBARD, David V.T.

INDIGENT PENSION

6661

Name D J Hubbard

County ColoCounty Colo

RICHARD JOHNSON,

-PRESENT HANDLED TO

6/21/00

3/22/90

HUSBAND, David W. Hubbard
Cass Co. Va.
7/21/98
No.
1898
INDIGENT P

Name David W. Hubbard
County Cass Co. Va.



7/21/98
7/21/98
7/21/98

20. Are you receiving any pension? If so, what amount, and for what disability? *None*
Sworn to and subscribed before me this day of *June*, 1899.
David W. Hubbard
Applicant
Ordinary, *Manthel*
County.

I am acquainted with W. M. Hubbard and he resides in Gordon Co. Va. and is a member of the 1st Va. Cavalry Regt. Co. B.
(March 1862)
QUESTIONS FOR WITNESS.
STATE OF GEORGIA,
Gordon COUNTY.
W. M. Hubbard of said State and County, having been presented as a witness in support of the application of *David W. Hubbard* for pension under the Act approved December 15th, 1894, and after being duly sworn true answer to make to the following questions, deposes and answers as follows:
1. What is your name and where do you reside? *W. M. Hubbard*
Gordon Co. Va.
2. Are you acquainted with *David W. Hubbard*, the applicant; if so how long have you known him? *yes known him all my life*
3. Where does he reside, and how long and since when has he been a resident of this State? *Gordon Co. Va. since 1845.*
4. When, where and in what company and regiment did he enlist, and how do you know? *1862*
Gordon Co. Va. Co. B. 1st Va. Cavalry Regt.
5. Were you a member of the same company and regiment? *yes*
6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? *I don't know*
He was on commissary dept. Mar 3rd
Sworn to and subscribed before me this day of
March 2d 1898
W. M. Hubbard
7. What property, effects or income has the applicant? *(None)*

Waring Cobb County - I certify that Thomas Lawrence is a resident of Cobb County, Georgia, and as a witness he is worthy of free & full credit. J. M. Stone, Only

State of Georgia Personally appeared
Cobb County before me the Undersigned
Thomas Lawrence of said County who
being sworn says:

My name is Thomas Lawrence. I
reside in Cobb County Georgia.
I am well and personally acquaint-
ed with D. V. Hubbard of Cobb
County Georgia. He resides in Cobb
County and has lived there ever
since I knew him.

He owns no property and has no
income at this time. He has been
sold out for debt. He has not
conveyed his property away to
any body.

He has been a farmer but
is not now engaged in any work
and has no occupation.

He is not able to support himself by
labor of any sort. He suffers from
Rheumatism and Diabetes. I have
lived on his place before it was sold
and I know that he is not able to
perform manual labor to any extent
to amount to any thing.

I have no interest whatever in
D. V. Hubbard's recovery or receiving
a Pension.

Sworn to and subscribed.

before me this the

25th day of Nov/ 1899

J. M. Stone
Only

DR. C. T. NOLAN,
BRANTLEY BUILDING.

Marshall Co. Nov. 15th 1900

State of Georgia

Personally came before
me C. T. Nolan M.D. & J. J.
M.D., who on oath say as follows.
After personal examination of Mr.
D. V. Hubbard we find his present
physical condition to be as follows.
He has been afflicted several years
with chronic rheumatism - at times
giving him acute pains.
The general condition of Mr. Hubbard's
health is not good.
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.

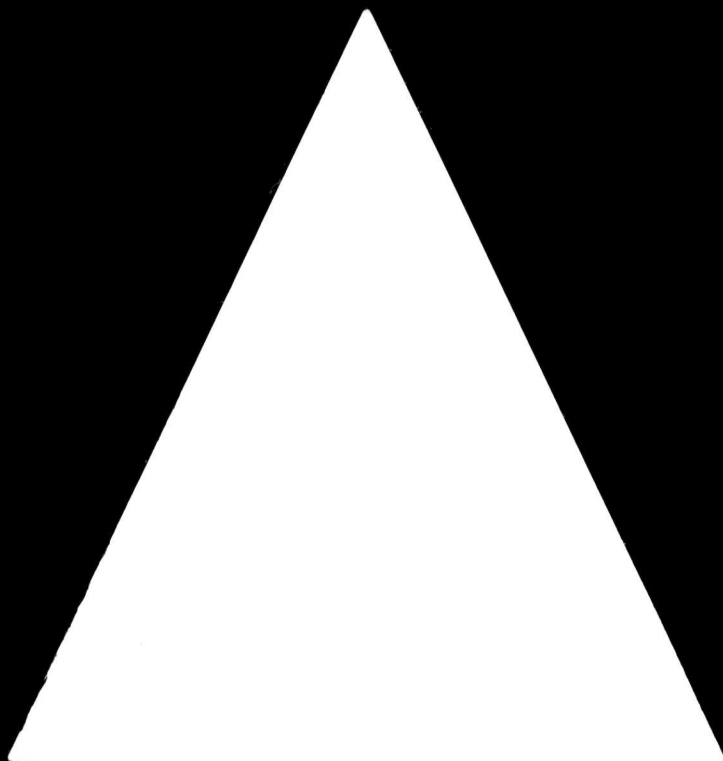
Given to and subscribed by C. T. Nolan, M.D.
before me 15th Nov. 1900 & J. J. Selig, M.D.
J. M. Stone, Only

Sp

21 Mar 2 noon 1877
Jal Stone
only

I know Dr. C. J. Nolan
and E. J. Setze to be reputable
physicians.

Jal Stone
only



POWER OF ATTORNEY.

STATE OF GEORGIA,

W. P. Green County, }

Phillip Hunkater hereby authorize
W. P. Green of *Meritts* the

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

at

Witness my hand and seal this

18

day of

Nov

1895.

Executed in presence of

W. P. Green

Phillip Hunkater

Approved Rich Johnson Sec
No. 378
Hunkater, Phillip
Cobb Co
INDIGENT PENSION
1895.

Name *Phillip Hunkater*

County *Cobb*

Ground

July 1 1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

July Stone

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb County.

I, *Phillip Huckabee* hereby authorize
E. P. Green of *Monetta Ga*

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

at *18* day of *May* 1895.

Executed in presence of

Phillip Huckabee
W. H. Stone

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Cobb County.

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

1. What is your name and where do you reside? (give State, County and post office) *Phillip Huckabee Monetta Cobb County Ga.*
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? *At Monetta Cobb County Ga. Have been resident since 1890.*
3. When and where were you born? *Nov 18 1820 in Spaulding Co. Ga.*
4. Did you volunteer in the Confederate Army or in the Georgia Militia? *In Confederate Army*
5. When and where did you enlist? *April 14 1861 at Agos Quaker, D.C.*
6. In what company and regiment did you enlist? *Co. D 3rd Regiment*
7. How long did you remain in that company and regiment? *About 18 months*
8. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge or transfer? *I was discharged after 18 months in Confederate Army.*
9. For how long a period did you discharge regular military duty? *About 18 months in April 1861.*
10. When, where, and under what circumstances were you discharged from service? *July 22th 1862 at Richmond, Va. was honorably discharged on account of age.*
11. What is your present occupation? *Farming*
12. How much can you earn per annum by your own exertions or labor? *400 or 500*
13. What has been your occupation since 1865? *Working on farm*
14. What sum would be necessary for your support for this pension year, and how much are you able to contribute thereto either in labor or income? *About one hundred dollars*
15. What is your present physical condition and how long have you been in such condition? *I am in very feeble health, suffer with back, legs and have been in this condition five years*
16. Upon which of the following grounds do you base your application for pension, viz.: first, "age and poverty," second "infirmary and poverty" or third "blindness and poverty"? *1st & 2nd*
17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? *I have not been able to earn my support since the war. I suffer from back being weak & a bad cramp.*
18. What property, effects or income do you possess? *one one horse wagon*
19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same? *Had the same then as now have not disposed of anything*
20. In what County did you reside during those years and what property did you then return for taxation? *In Cobb County. Wagon & horse valued at 400.*
21. How were you supported during the years 1893 and 1894? *By the labor of my wife & myself & contributions from neighbors*
22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *1200 I contributed about 600*
23. What was your employment during 1893 and 1894? What pay did you receive in each year? *Working on farm I rented land & worked for part of the year*
24. Are you married and have you a family? If so, is your wife living and how many children have you? Give age and sex of children and their means of support? *I am married. My wife is living. Have never had any children.*

Approved
No. 378
INDIGENT PENSION

1895.

Name *Phillip Huckabee*

County *Cobb*

Ground

July 1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT DENSED TO

W. H. Stone

One W. H. Stone, State Prison, Atlanta.

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

Sworn to and subscribed before me, this

the 18th day of May 1895.

None
L. Taylor
W. D. Taylor
to questions 3/4 following
applicant, Thomas
to questions
1-2-4-5-6-7

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."

Mem 1250

Hudson, W. J.
Capt. Gen.

OK for 1911

Confederate

Soldier's Application.

✓ UNDER ACT 1910.

County Cobb
Name W. J. Hudson
Company 7th La.
Regiment 7th La.

Approved _____

J. W. LINDSEY,
Committee of Pensions

CHAS. F. BYRD, State Printer, Atlanta.

8/2/10

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA

County

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

1. What is your name and where do you reside? (Give County and Post-office)
W. H. Anderson, Marietta, Ga.
2. How long and since when have you been a continuous resident citizen of this State?
March 28th 1834
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 year and date of Service)
Adventures, May 31st 1861 Co. 2, 9th Regt. Va. Inf. Regt.
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge)
During entire term of 1861
6. When and where was your Company and Regiment surrendered or discharged from the Service?
April 9th 1861 at Appomattox 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.
 - a. Where was your Command when you left it? at Appomattox Va.
 - b. When did you leave the Command? April 13th 1861
 - c. For what cause did you leave?
 - d. By whose authority did you leave?
 - e. For how long was your leave granted? In what way?
- f. Why did you not return to your Command after leave expired?
- g. In what way were you prevented?
- h. What effort did you make to return?
- i. Were you captured during the war? No
- j. If so, when, and where? In what prison were you held and when were you released?
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)
80 acres land & value at \$1200--
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)
80 acres land & value at \$1200--
12. What annual or monthly income or earnings of yourself and wife and the source derived have you?
\$600 per year from some of said land
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

Subscribed before me, this the

1912

W. H. Anderson
of said County.

Confederate
Soldier's Application.

UNDER ACT 1910.

County

Name

Company

Regiment

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. J. REYNOLDS, STATE PRINTER, ATLANTA

QUESTIONS FOR WITNESS AS TO SERVICE

STATE OF GEORGIA

W.D. Cunningham
County, Georgia
as a witness in support of the application of *W.D. Cunningham* for the pension provided by the Act of 1910, in said State, and after being sworn to make the questions propounded answers as follows:

1. What is your name and where do you reside?
W.D. Cunningham, Montgomery, Ala.
2. How long and since when have you known the applicant?
Since the year 1888
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?
Montgomery, Ala. in life was in Santa Fe, during
4. When, where and in what Company and Regiment did *W.D. Cunningham* serve during war from 1861 to 1865? (Give date and place).
Montgomery, Ala. 1861-1865
5. How did you obtain your information of his service?
I was visited at home time
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date).
Since I return from the war
7. When and where was his Command surrendered or discharged (give date and place).
At Montgomery, Ala.
8. Were you personally present at the Surrender?
Yes
9. If not, where were you and how came you there?
10. Was the applicant personally present with his Command at surrender?
Yes
11. If not where was he and how came him there?
12. When did he leave his Command? *At Montgomery, Ala.* Where was his Command when he left it?
At Montgomery, Ala. for what cause did he leave?
That was over
By whose authority did he leave? *and how*
long was he granted leave?
at the time he was in service
all that you have stated to be true? If of your own knowledge (tell clearly and specifically)
I carried with me in service to I, W.D. Cunningham
13. In what way was he prevented from returning to his Command?
How do you know?
14. What effort did he make to return to his Command and how do you know?
15. Was applicant captured as a prisoner? *No* If so, when and where?
In what prison was he held? *and when released?*

Sworn to and subscribed before me, this the *10th* day of *August* 1912 } *W.D. Cunningham*
J.M. Johnson Ordinary
of *Critt* County, Georgia.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA

Personally before me come *W.D. Cunningham* and *J.M. Johnson* who on oath say that they are free holders residing in said County and know the applicant for pension and we know the property that is owned in the name of the applicant and of his wife and of its cash value to wit: (State list by its value and location)
It was a lot of land in Critt County, Ga.

1. What property, if any, has been sold or given away by the applicant or his wife since 1890

Ordinary's Certificate

Ordinary of said County, certify that I know the applicant *W.D. Cunningham* to be and reside in said County *Montgomery, Ala.* the witness swearing to the service and *W.D. Cunningham* who are free holders, that they are all bona fide and Oath sworn by me before signing the foregoing affidavit and they are all true and correct and their statements are true and correct. That the Tax Receipts of *W.D. Cunningham* shows that *W.D. Cunningham* paid the value for tax for 1906 *1000* for 1907 *1000* for 1908 *1000* for 1909 *1000* for 1910 *1000* for 1911 *1000* for 1912 *1000* and of other bills *1000* day of *August* 1912.

STATE OF GEORGIA

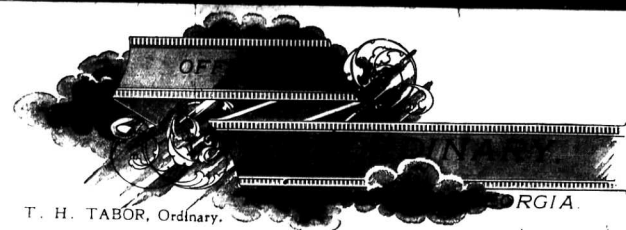
W.D. Cunningham County, Georgia
Ordinary of said County, certify that I know the applicant *W.D. Cunningham* to be and reside in said County *Montgomery, Ala.* the witness swearing to the service and *W.D. Cunningham* who are free holders, that they are all bona fide and Oath sworn by me before signing the foregoing affidavit and they are all true and correct and their statements are true and correct. That the Tax Receipts of *W.D. Cunningham* shows that *W.D. Cunningham* paid the value for tax for 1906 *1000* for 1907 *1000* for 1908 *1000* for 1909 *1000* for 1910 *1000* for 1911 *1000* for 1912 *1000* and of other bills *1000* day of *August* 1912.

NOTES: 1. Where any questions are answered the Ordinary shall write additional and all references in the following words: "You do solemnly swear that you will give evidence to each question asked you and the evidence you shall give shall be the whole truth, as in and to the Oath."
2. Additional affidavits may be executed. A small space is left for this.
3. All affidavits must be made before the Ordinary and certified by him.
4. If applicant has no property as set in his presentation, use of words "I and wife, abducts of Free holders, uncertainty."

*To care of [unclear] [unclear] [unclear]
 Post Office [unclear]*

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

1894
 Mr. J. B. Howard
 Dear Sir
 I have been with
 the 1st Regt. Stationed
 at [unclear] I have
 been at [unclear] and
 [unclear] Station. Will
 be in [unclear] to [unclear]
 [unclear] at
 [unclear]
 [unclear] at [unclear] changing
 [unclear] who are
 [unclear]
 Yours Res
 J. P. Hill



T. H. TABOR, Ordinary.

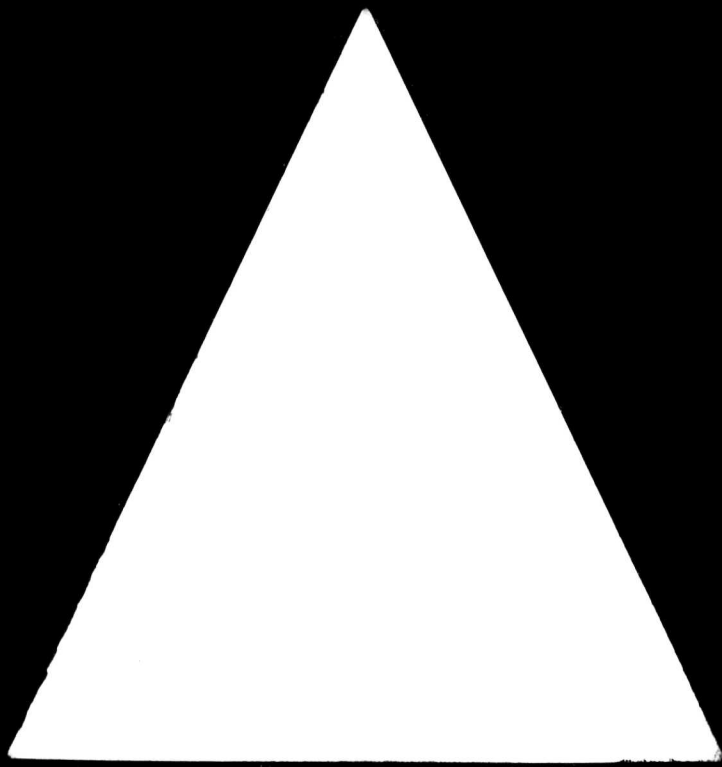
RGIA.

Ellijay, Ga., May 17, 1911

Mr. J. B. Howard
 Dear Sir:

The Gilmer County Record shows that the fol-
 lowing soldiers of Ralston's Battalion are now-
 drawing ^{or} have drawing state pensions,

L. D. Grace ^{Living} John Mulkey dead
 J. W. Parker ^{Living}
 J. A. Ralston ^{Living} Vidalia, Ga. moved there
 J. P. Hill ^{Living} #1
 Yours truly
 T. H. Tabor
 Ordg.



POWER OF ATTORNEY.

STATE OF GEORGIA,

John Huggins

County

John Huggins

herby authorize

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

by _____ at _____

Witness my hand and seal, this *16th* day of *January*, 1905.

Executed in the presence of *John Huggins* [L. S.]

Huggins, John
Capt G

CODS SECTION 1204

FOR THOSE ALREADY ENROLLED
722-184

No. *722*

INDIGENT
SOLDIER'S PENSION
1905.

Name *John Huggins*
County *Cos*
Co. *28th* Regiment *Ca*
70th

WARRANT ISSUED
JAN 23 1

1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY,
I, *John Huggins*

hereby authorize

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

by

Witness my hand and seal, this *16th* day of *January* 1905.

Executed in the presence of *John Huggins* [L. S.]

Huggins, John
Cobb Co
FOR THOSE ALREADY ENROLLED
722, 722, 722

INDIGENT
SOLDIER'S PENSION
1905.

Name *John Huggins*
County *Cobb*
Co. *D 28th* Regiment *64*
720.

WARRANT ISSUED
4th 86 1 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
C

Geo. W. HARRISON, WASHINGTON, D. C. STATE PRINTER, ATLANTA.

no date

Huggins John
Cobb Co

CODE SECTION 1234
(FOR THOSE ALREADY ENROLLED.)

No. *579*

INDIGENT
SOLDIER'S PENSION
1905.

Name *John Huggins*
County *Cobb*
Co. *D 28th* Regiment *64*

WARRANT ISSUED
722 1 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
C

Geo. W. HARRISON, WASHINGTON, D. C. STATE PRINTER, ATLANTA.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY,
I, *John Huggins*

hereby authorize

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

by

Witness my hand and seal, this day of *July* 1905.

Executed in the presence of *John Huggins* [L. S.]

John Huggins

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Bolt County.

Personally appears *John Huggins* of *Bolt* 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 *22nd* day of *June* 1837; that he is *65* years old and by occupation a *farmer*, that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served for the term of *3 1/2 years* in Company *E 8*, of *28th* Regiment of *La. Vols.*; that his physical condition is as follows: *Disability and poverty he is unable to support himself*

that his property consists of the following items:

Nothing

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

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

Sworn to and subscribed before me, this *16th* day of *January*, 1905.

John Huggins Ordinary.

STATE OF GEORGIA,

Bolt County.

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

Given under my official signature and seal, this *16th* day of *January*, 1905.

John Huggins Ordinary. *Bolt* County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Bolt County.

Personally appears *John Huggins* of *Bolt* 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 *22nd* day of *June* 1837; that he is *66* years old and by occupation a *farmer*, that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served for the term of *4 1/2* years in Company *E 8*, of *28th* Regiment of *La. Vols.*; that his physical condition is as follows: *Infirmary poverty*

that his property consists of the following items:

Nothing

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

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

Sworn to and subscribed before me, this *16th* day of *January*, 1905.

John Huggins Ordinary.

STATE OF GEORGIA,

Bolt County.

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

Given under my official signature and seal, this *16th* day of *January*, 1905.

John Huggins Ordinary. *Bolt* County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

COFFEE COUNTY.

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

Witness my hand and seal, this 11 day of January, 1907.

John Huggins [L. S.]

Executed in presence of _____

Huggins, John
Coff G.

Order Section 1284.
(FOR THOSE ALREADY ENROLLED)

No. 605

INDIGENT
SOLDIER'S PENSION
1907.

Name John Huggins
County Coffee
Co. A 28th Regiment Ca.

WARRANT ISSUED

1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

JOHN W. LINDSEY, COMMISSIONER, ATLANTA.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Personally appears John Ruggins of Appling 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 E of 28th Regiment of 2nd; that his physical condition is as follows: Age Infirmitly & poverty

that his property consists of the following items: _____

of the value of _____ Dollars. I am _____ing 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 Appling County, been allowed a pension for the year 1906.

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

State of Georgia,

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

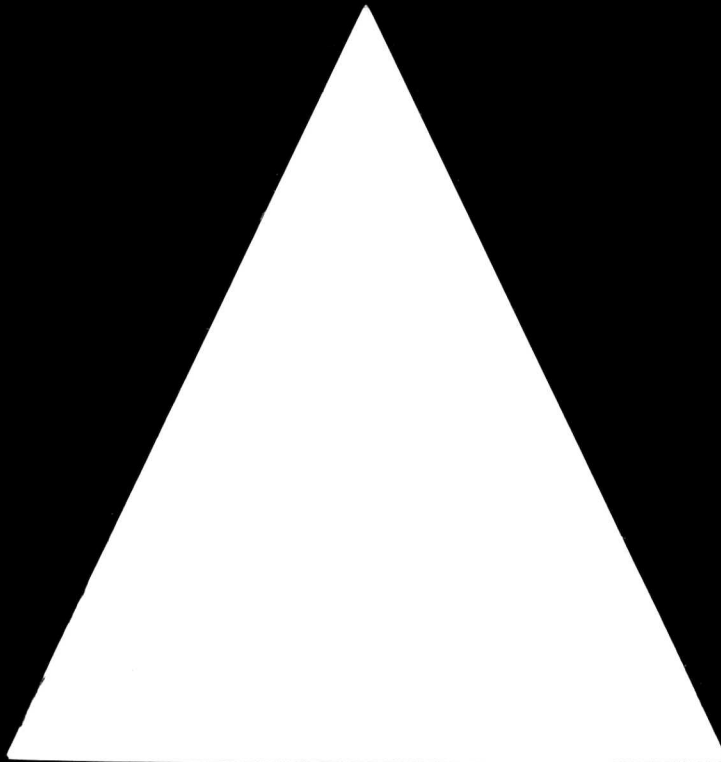
Given under my official signature and seal this _____ day of _____ 1907. John Ruggins Ordinary _____ County.



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

here

Now.—The same as the above. All the
Nora.—Aldavil should not be attested before January 1st, 1907.



STATE OF GEORGIA

Cobb County

I, Wm. Thomas Hughes Ordinary of said County, do certify that I personally know Rebecca Hughes the applicant, and that she is the lawful widow of A. J. Hughes and was on the Cobb Pension Roll of said Cobb County, and was paid a Pension from 1886 County for 1921, and at the time of his death on the 22 day of March 1922 there was due to him and unpaid his Pension of 1.00 Dollars from the State of Georgia, and I know Mr. Mary E. Ream the within- witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 15 day of March 1922.
(SEAL) Wm. Thomas Hughes Ordinary
Cobb County.

Hughes, A. J.
Cobb County
1922

**Application for Pension Due
Deceased Soldier**
(UNDER ACT 1891)

(To be paid his Widow or Dependent Children)

BY

Mrs. Rebecca Hughes
Widow of A. J. Hughes
of Cobb County
Old or New Old
Date of Death 3/29 1922

Approved and ordered paid. 1.00

4/25 - 1922
J. W. Lindsey
J. W. LINDSEY,
Commissioner of Pensions.

Ordinary: Fill out above in full and send this blank to Pension Office for approval before you pay out the money, and then return it with your pay-rolls for permanent filing in the Pension Office.

THE STATE PRINTING CO.

GEORGIA.

County.

I hereby authorize and constitute _____ of said County, my lawful attorney to collect, and receipt for me in my name, for the Pension due me for 1922, through my deceased husband, _____ who was on Pension Roll and paid from _____ County for 19 _____ day of _____ 1922. Attested before me:

STATE OF GEORGIA

County

I, J. M. Gamm Ordinary of said County, do certify that I personally know Mrs Rebecca Hughes the applicant; and that she is the lawful widow of A. J. Hughes and was on the Pension Roll of said Cobb County, and was paid a Pension from Cobb County for 1921, and at the time of his death on the 29 day of March 1922, there was due to him and unpaid his Pension of 100 Dollars from the State of Georgia, and I know Mrs Mary E. Dean the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 15 of May, 1922.

(SEAL.)

Ordinary

County.

Hughes, A. J.

Cobb County 1922

Application for Pension Due Deceased Soldier
(UNDER ACT 1891)

(To be paid his Widow or Dependent Children)

BY

Mrs. Rebecca Hughes
Widow of A. J. Hughes
of Cobb County

Old or New Old
Date of Death 3/29 1922

Approved and ordered paid, 100

42 - 1922
J. W. Lindsey

J. W. LINDSEY,
Commissioner of Pensions.

Ordinary. Fill out above in full and send this blank to Pension Office, and when before you pay out the money, and then return it with your pay-roll for permanent filing in the Pension Office.

GEORGIA, County.

I hereby authorize and constitute _____, of said County, my lawful attorney to collect, and receipt for me in my name, for the Pension due me for 192____ through my deceased husband, _____, who was on _____ Pension Roll and paid from _____ County for 19____.

Witness my hand this _____ day of _____, 192____.

Attested before me:

Application for Pension Due Deceased Soldier

(To Be Paid to His Widow or Dependent Children)

UNDER ACT APPROVED OCTOBER 9, 1901.

STATE OF GEORGIA, Cobb County

Personally before me comes Mrs. Rebecca Hughes of said County, who after being duly sworn, on oath says that she is the widow of A. J. Hughes who was duly enrolled as a Servant Pensioner from the County of Cobb and was paid a Pension of 1.25 Dollars from Cobb County for 1921, and that the said A. J. Hughes died in Cobb County on the 29 day of March, 1922, and at the time of his death a Pension of \$1.00 was due him from Cobb County and unpaid for 1922. Applicant further swears that she married the said A. J. Hughes on the 5 day of November, 1861, in Ill County and State of Ill, and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 2 day of May, 1922.
J. M. Gann Ordinary.
Cobb County. Mrs. Rebecca Hughes (U. S.)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Cobb County

Personally before me comes Mrs. Mary C. Dean, who on oath says that he knew A. J. Hughes while in life and that he knows Mrs. Rebecca M. Hughes, the above applicant; that he knows that the said A. J. Hughes and Rebecca M. Hughes were in due form of law married in the County of Hall in the State of Georgia on the 5 day of November, 1861, and that they were residing together as husband and wife at the time of his death on the 29 day of March, 1922, and I know that she is his dependent widow.

Sworn to and subscribed before me this 3 day of May, 1922.
Joe Abbott Ordinary.
Mary Publ. Cobb County. Mrs. Mary C. Dean

INSTRUCTIONS:

1st. This form can be used by guardians, or minor children, where there is no widow.
 2nd. The Ordinary must, in all cases, send certificate of marriage attached hereto, if marriage is not proven by witness.
 3rd. Avoid the use of the enormously large form of marriage certificate in common vogue throughout this State, suitable only for training such a certificate is unnecessary, bulky for use in any sort of pension paper and dependent children.
 4th. This form is for widows of disabled soldiers who died after October 10th, and for widows and dependent children of soldiers who died after November 10th.
 5th. Ordinary should examine the blank carefully and see that it is fully and correctly completed, and the seals affixed, and that no money on this application until it is approved in the Pension Office, and returned to you as your authority to make a payment.
 6th. Return this application with your final settlement to the Pension Office.
 7th. The widow signs for each year for the pension of her husband, signing her name opposite his name thereon.
 8th. The pension office must not be covered by one voucher. Each year's pension must be a separate and distinct transaction and must be so framed that it can be covered by one voucher.
 9th. If the widow has a "new" pensioner, who was not a "new" pensioner, she must make two new applications—one for each year. Attach a separate marriage license to each future claim.

and Rebecca Hughes were in due form of law married in the County
of Hall in the State of Georgia on
the 5 day of November, 1865, and that they were residing
together as husband and wife at the time of his death on the 27
March, 1922, and I know that she is his dependent widow.
Sworn to and subscribed before me this 3 day of May, 1922.
Joe Hobbs Ordinary.
Wm. P. Cobb County. Mary C. Dean
(SEAL.) 2

INSTRUCTIONS:
1st. This form can be used by guardian, or minor children, where there is no widow.
2nd. The Ordinary must, in all cases, send certificate of marriage attached hereto, if marriage is not proven by wit-
ness.
3rd. Avoid the use of the supposedly large form of marriage certificate in common vogue throughout this State, suit-
able only for framing. Such a certificate is unnecessary bulky for use in any sort of pension paper.
4th. This form is for widows of disabled soldiers who died after October 18th, and for widows and dependent children
of service soldiers who died after November 1st.
5th. The Ordinary should examine the blank carefully and see that it is fully and correctly completed, and the seals
affixed, and that the facts when filled in agree with the facts as shown on the back, when filled in also until it is approved in the Pension Office, and returned to you as your
authority to make the payment.
6th. Return this application with your final settlement to the Pension Office.
7th. The widow signs pay-roll for the pension of her husband, signing her name opposite his name thereon.
8th. The pension for only one year can be covered by one voucher. But if a separate and distinct
transaction and must be so treated. If widow of a "new" pensioner who was due 100 and 110 a separate and distinct
two yellow applications—one for each year. Attach a separate marriage license to each yellow blank.

STATE OF GEORGIA Hall County.

ORDINARY'S OFFICE—22

I M. D. Whitelaw Ordinary and Ex-Officio Clerk of
the Court of Ordinary of said county, do hereby certify that I have compared the foregoing copy of
Marriage License and Certificate of H. A. Hughes
and Rebecca M. Davis

with the original record thereof, now remaining in this office, and the same is a correct transcript there-
from, and of the whole of such original record.

In testimony whereof, I have hereunto set my hand and affixed the Seal of the Court of Ord-
inary, this 26 day of April, 1922.

M. D. Whitelaw
Ordinary and Ex-Officio C. C. O.

STATE OF GEORGIA Hall County.

ORDINARY'S OFFICE—21

I, W. A. Whelchel Ordinary and Ex-Officio Clerk of
the Court of Ordinary of said county, do hereby certify that I have compared the foregoing copy of
Marriage License and Certificate of H. A. Hughes
And Rebecca M. Davis

with the original record thereof, now remaining in this office, and the same is a correct transcript there-
from, and of the whole of such original record.

In testimony whereof, I have hereunto set my hand and affixed the Seal of the Court of Ord-
inary, this the 26 day of April, 1922.

W. A. Whelchel
Ordinary and Ex-Officio C. C. O.

GEORGIA, HALL COUNTY.

To any Judge, Justice of the Superior Court, Justice of the
Peace or Minister of the Gospel—

You are hereby authorized to join in the holy state of Mat-
rimony, H. A. Hughes and Rebecca M. Davis according to the
Constitution and Laws of this State; and for so joining this shall
be your sufficient license.

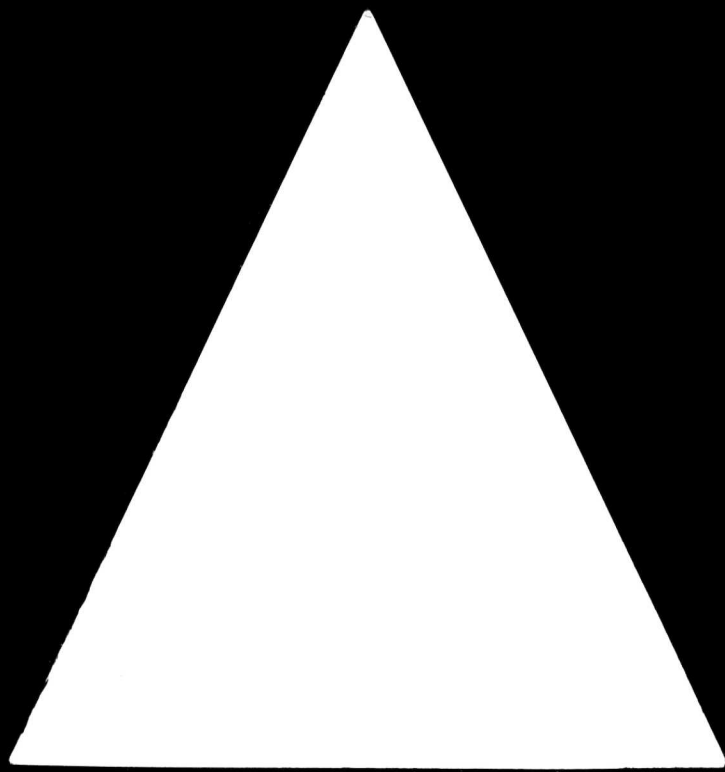
Given under my hand, this fourth day of October 1865.

A. L. Cochran, Ordinary.

GEORGIA, HALL COUNTY.

I certify, that the above named parties ~~were~~ were duly
joined in matrimony by me this 6th day of October 1865.

J. L. Chapman, J. C.



POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY, }

I, _____ hereby authorize

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

at _____ by _____

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

[L. S.]

Executed in presence of _____

Sept 3 1861

Hughes, James L.
Cobb Co.

No. Jan 7902

INDIGENT PENSION.

1907

Name James L. Hughes

County Cobb

Co. D 28th Regt.

Approved _____ 1907

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

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

8/7/10

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 _____

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

COUNTY.

I, James D. Hughes of said State and County, desiring to avail myself of the Pension Act (Section 1284, Code), hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

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

James D. Hughes, Columbus Cobb County, Ga.

2. How long and since when have you been a resident of this State? Ever since 1845

3. When and where were you born? 1835, In South Carolina

4. When and where and in what company and regiment did you enlist or serve? August 1861. At

Confederate Company D 28th Regiment

5. How long did you remain in such company and regiment? Until Sept 1864

6. When and where was your company and regiment surrendered and discharged? Don't know

7. Were you present with your company and regiment when it was surrendered? 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? Was at Henry's plantation, September 1864. On a sick

leave, by a board of officers from Washington, Va.

9. How much can you earn (gross) per annum by your own exertions or labor? Do not know

10. What has been your occupation since 1865? Farming, husbandry, etc.

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

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

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

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

state whether you are totally blind and when and where you lost your sight? About 1864

Don't know. I probably was in Texas, and had

some severe rheumatism. The doctor said I was

one of my right arm and leg.

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

and a third of an acre which I own 18 1/2 years on with 20

14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904 and 1905, and what disposition

if any, by sale or gift, have you made of same? I had a house of 1000 sq ft and had 100

sq ft of land. I also had a house of 1000 sq ft and had 100

sq ft of land. I also had a house of 1000 sq ft and had 100

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

Cobb

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

My family, my daughter, my son, and my wife.

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

own labor or income? Nothing from 1901 to 1905

18. What was your employment during 1901, 1902, 1903, 1904 and 1905? 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-

stead, or other property? Their ages and how employed? My wife, my daughter, my son, and my wife.

My wife is 30 years old, my daughter is 18 years old, my son is 10 years old, and my wife is 50 years old.

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 claim? None

Sworn to and subscribed before me this the _____ day of _____ 190 _____

James D. Hughes Applicant.

of _____ County.

Every Question Must Be Answered.

Hughes, James D.
Cobb Co.

No. 1907

INDIGENT PENSION.

1907

Name of Applicant
County
Cobb

Age
28 1/2
Regt.
190

JOHN WEINSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Printed by the Publishing Co., No. 100, N. E. Corner, N. E. Corner, N. E. Corner.

24/18

My two daughters
were in the army
and were killed
in the war.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Cherokee COUNTY.

T. H. Roach of said State and County, having been presented

as a witness in support of the application of Jas. D. Hughes for pension under section 1254, Code, and after being duly sworn to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside? T. H. Roach Holly Spring Cherokee County Georgia

2. Are you acquainted with Jas. D. Hughes the applicant: if so how long have you known him? I am. About 50 years

3. Where does he reside, and how long and since when has he been a resident of this State? at Kennesaw Cobb County Georgia

4. When and in what company and regiment did he enlist, and how do you know? Aug. 1861. 1st Canton. Co. D. 28th Va

5. Were you a member of the same company and regiment? I was

6. How long did he perform regular military duty? until the fall of 1864

7. When and where was his command surrendered? Cappomattoch C.H. Va

8. Were you present when it surrendered? about August 1865

9. Was applicant present? He was not

10. If he was not present, where was he? My recollection is he was on horse

When did he leave his command? Fall of 1864 For what cause? on parole

By what authority he left? Left Parole by Mrs. Jane Richmond How do you know all of this? I know a man was with my Grandfather

11. What property, effects or income has the applicant? (Give you any of knowledge) I don't know of any

12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904 and 1905, and what disposition, if any, did he make of same? I don't know of any

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

None that I know of

14. What is the applicant's occupation and physical condition? He was Postmaster at Kennesaw for a long time has no particular occupation now

15. Is the applicant unable to support himself by labor of any sort; if so, why? I think he is from the effects of a stroke of

paralysis

16. How was he supported during the years 1901, 1902, 1903, 1904 and 1905? I don't know

17. What portion of his support for these four years was derived from his own labor or income? None that I know of

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code. He had a stroke of Paralysis from which he has not fully recovered

19. Who composes family? What property have they? Children's age and their earning capacity? He has a wife and some children I don't know how many

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

Sworn to and subscribed before me, this the 14th day of August 1906

T. H. Roach Witness.

J. H. Roach Ordinary.

I hereby certify that the witness T. H. Roach is worthy of confidence and belief

J. H. Roach Ordinary

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Cobb COUNTY.

Personally came before me John D. Taylor and

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

Jas. D. Hughes, applicant for pension under Section 1254, Code, and after

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

He has chronic diabetes, Rheumatism

to partial paralysis, which renders

him totally unable to do any kind of

business, or to transact any kind of

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

Sworn to and subscribed before me, this the 31st day of July 1906

John D. Taylor Ordinary. Clayton C. Elder M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cobb COUNTY.

I, John D. Taylor Ordinary, in and for said County, hereby certify

that the applicant Jas. D. Hughes resides in said County, and has

been a bona fide resident of this State since the War day of 189

and that the witnesses, viz: John D. Taylor

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

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

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

returned for taxation in his name in 1901 \$140.00 Dollars of

property, and in 1902 \$110.00 Dollars of property; in 1903

\$110.00 Dollars of property; in 1904

\$110.00 Dollars of property; in 1905

\$110.00 Dollars of property.

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

Witness my hand and seal of office, this 31st day of July 1906

John D. Taylor Ordinary.

of Cobb County.

NOTE.

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

2. Additional affidavits may be attached if blank spaces are insufficient.

3. In every case the ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

I, James D. Hughes, 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 9 day of January 1907.

James D. Hughes [L. S.]

Executed in presence of

M. Gamm

Hughes, James D.

Cobb Co.

(FOR THOSE ALREADY ENROLLED)

No. 612

INDIGENT

SOLDIER'S PENSION

1907.

Name James D. Hughes

County Cobb

Co. D 28th Regiment

WARRANT ISSUED

1907.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

Gen. W. H. LAMME, State Printer, ATLANTA.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Cobb County.

Personally appears James L. Hughes 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 D, of 22nd Regiment of _____; that his physical condition is as follows: Infirmary & Pension

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 16th, 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 January 1907.

John A. Hickey Ordinary.

James L. Hughes

State of Georgia,

Cobb County.

I, John A. Hickey Ordinary of said County,

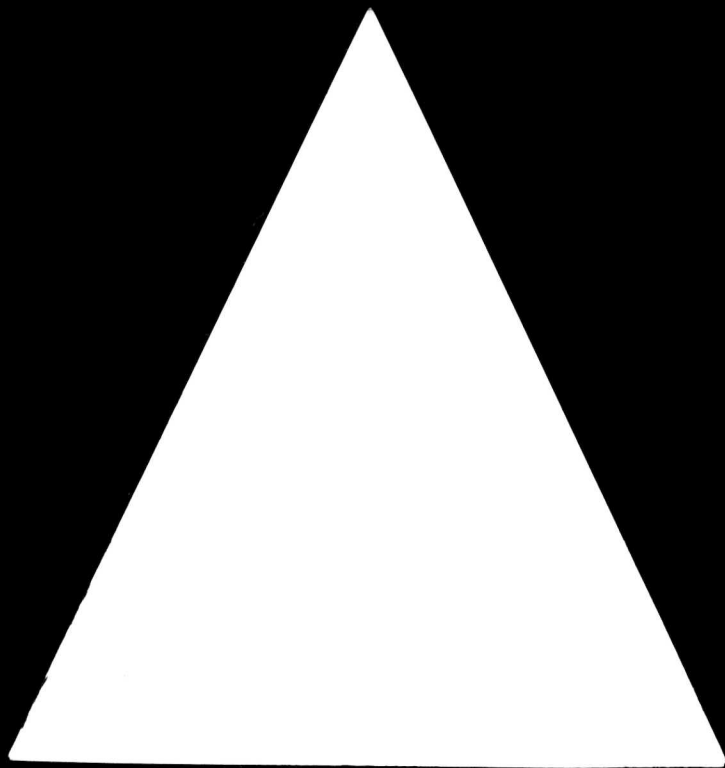
do certify that I am well acquainted with James L. Hughes the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

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

John A. Hickey Ordinary _____ County.



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



ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

COUNTY

I, *John W. Lindsey*, Ordinary of said County, do certify that I

know *Mrs. A. G. Douglas* 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 *19* day of *Oct* 19*22*

That I also know *John W. Lindsey* witnesses as to marriage, and I also know *Mrs. A. G. Douglas* that both of the foregoing were duly sworn by me

before signing of 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 *28* day of *Oct* 19*22*

(SEAL) *John W. Lindsey* Ordinary, *Cobb* County.

NOTES: 1. Before any questions are answered the Ordinary shall require 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 give is true and correct to the best of your knowledge and belief, and that you are not a party to any fraud or

2. All affidavits must be made before the Ordinary of the county of residence.

3. Additional affidavits may be attached if deemed proper.

4. Affidavits must be made before the Ordinary of the county of residence.

5. Affidavits must be made before the Ordinary of the county of residence.

6. Affidavits must be made before the Ordinary of the county of residence.

7. Affidavits must be made before the Ordinary of the county of residence.

8. Affidavits must be made before the Ordinary of the county of residence.

9. Affidavits must be made before the Ordinary of the county of residence.

10. Affidavits must be made before the Ordinary of the county of residence.

11. Affidavits must be made before the Ordinary of the county of residence.

12. Affidavits must be made before the Ordinary of the county of residence.

13. Affidavits must be made before the Ordinary of the county of residence.

14. Affidavits must be made before the Ordinary of the county of residence.

15. Affidavits must be made before the Ordinary of the county of residence.

16. Affidavits must be made before the Ordinary of the county of residence.

17. Affidavits must be made before the Ordinary of the county of residence.

18. Affidavits must be made before the Ordinary of the county of residence.

19. Affidavits must be made before the Ordinary of the county of residence.

20. Affidavits must be made before the Ordinary of the county of residence.

21. Affidavits must be made before the Ordinary of the county of residence.

22. Affidavits must be made before the Ordinary of the county of residence.

23. Affidavits must be made before the Ordinary of the county of residence.

24. Affidavits must be made before the Ordinary of the county of residence.

25. Affidavits must be made before the Ordinary of the county of residence.

26. Affidavits must be made before the Ordinary of the county of residence.

27. Affidavits must be made before the Ordinary of the county of residence.

John W. Lindsey
No. *14*
"OLD" CLASS 1923
Cobb County

Widow's Application

To Be Put on Roll in Her Own Right When
Husband Was on the Indigent Roll or
Put on Under Act of July 11, 1910—
As Amended by Act of 1919.

County *Cobb*
Name *Mrs. Rebecca Douglas*
Widow of *A. G. Douglas*
Company *E*
Regiment *14th Cal. vol*
Approved *John W. Lindsey*
Commissioner of Pensions

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

Cobb COUNTY

I, J. M. Camp Ordinary of said County, do certify that I know Mrs. H. A. Hughes 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 19 day of 1922.

That I also know My Mary L. Davis witness as to marriage, and I also know Mrs. A. J. Hughes that both of the foregoing were duly sworn by me before signing of 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 28 day of Oct 1922.

(SEAL)

J. M. Camp Ordinary.
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. All 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, 1861, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service because he made no proof of service and was not required to do so.

Widow's Application

To Be Put on Roll in Her Own Right When Husband Was on the Indigent Roll or Put on Under Act of July 11, 1910—As Amended by Act of 1919.

County

Name

Widow of

Company

Regiment

Approved

Commissioner of Pensions

J. W. LINDSEY
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

GEORGIA, HALL COUNTY.

To any Judge, Justice of the Inferior Court, Justice of the Peace or Minister of the Gospel—

You are hereby authorized to join in the holy state of Matrimony, H. A. Hughes and Rebecca M. Davis according to the Constitution and Laws of this State; and for so doing this shall be your sufficient License.

Given under my hand, this fourth day of October 1865.

A. M. Cochran, Ordinary.

GEORGIA, HALL COUNTY.

I Certify, That the above named parties ~~were~~ were duly joined in Matrimony by me this 8th, day of October 1865.

J. L. Chapman, M. G.

STATE OF GEORGIA Hall County.

ORDINARY'S OFFICE—

I, W. D. Wheeler Ordinary and Ex-Officio Clerk of the Court of Ordinary of said county, do hereby certify that I have compared the foregoing copy of Marriage License and Certificate of H. A. Hughes and Rebecca M. Davis

with the original record thereof, now remaining in this office, and the same is a correct transcript therefrom, and of the whole of such original record.

In testimony whereof, I have hereunto set my hand and affixed the Seal of the Court of Ordinary, this the 26 day of April 1922.

W. D. Wheeler

Ordinary and Ex-Officio C. C. O.

WIDOW'S AFFIDAVIT

STATE OF GEORGIA

Cobb COUNTY

Personally before me comes Mrs Rebecca Hughes of said County, who, after being duly sworn, says that she is the widow of A. Hughes to whom, in the County of Cobb State of Ga she was married on the 5 day of Oct 1885, and that she remained his wife, and resided with him to the date of his death in March 29 1922 and that she has not since his death remarried. At the time of his death he was a resident of Cobb County, in said State of Georgia, and he was on the General Pension Roll of the State and paid a pension of \$ 20 in Cobb County for 1922 per annum, on account of being a soldier in Company E Regiment 14 Vol Infs (Volunteers or State Militia).

That she is now a bona fide resident citizen of said County of Cobb and she has continuously resided since day of 1922

Sworn to and subscribed before me, this the

3 day of May 1922
J. M. Gamm Ordinary
at Cobb County

Mrs Rebecca Hughes

(SEAL)

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

STATE OF GEORGIA

Cobb COUNTY

Personally before me comes Mrs Mary C Dean known to be responsible and truthful persons, residing in said County, who after having been duly sworn, says that of their own personal knowledge Rebecca Hughes, who made the foregoing affidavit, is the lawful widow of A. Hughes who died in Cobb County in said State of Georgia on 29 day of March 1922 and that she has not since remarried. That she became the wife of A. Hughes on the 5 day of Nov 1885 and that she and he had resided together as man and wife continuously since 5 day of Nov 1885 and that the A. Hughes was the same man who was on the pension roll of said State General from Cobb County when he died.

Sworn to and subscribed before me, this the

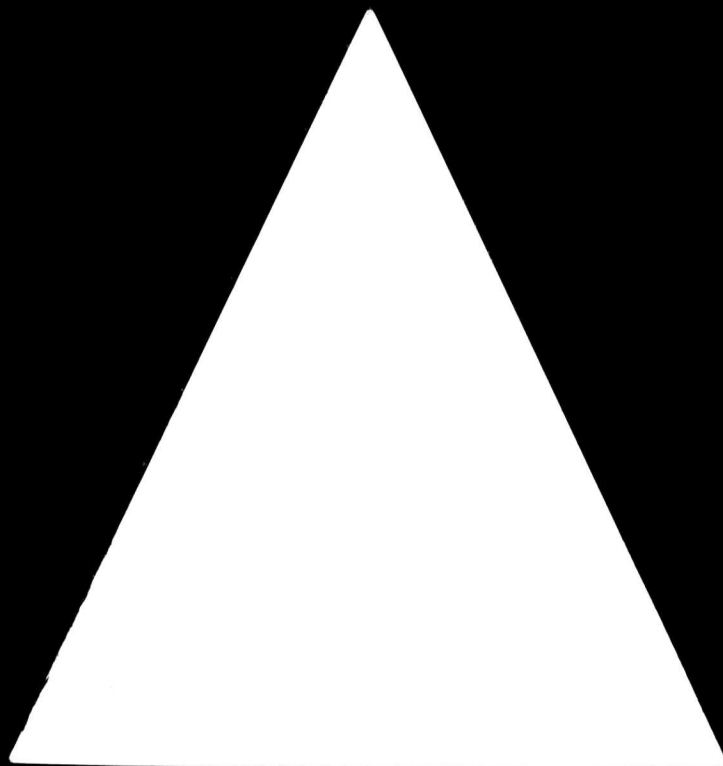
3 day of May 1922
Joe Abbott Ordinary
at Cobb County

Mrs Mary C Dean

(SEAL)

(SEAL)

22



POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb

County.

I, *Elizabeth Humphries*, hereby authorize

Cobb

County to receive and receipt for the pension allowed me that is

to me at *his office* by his check or registered mail.

Witness my hand this *22nd* day of *July* 1901.

Executed in presence of

Ordinary,

County.

Wm C. Little Humphries



Humphries, Elizabeth
Cobb Co

No. _____

WIDOW'S
Indigent Pension.
1901.

Name *Elizabeth Humphries*

County *Cobb*

Widow of *Edwin Humphries*

No 13-16301 Regd

Approved *4/8* 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

1901.

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

3/9/02

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb County.

I, *Elizabeth Humphries* hereby authorize *John Anthony* of *Cobb* County, to receive and receipt for the pension allowed and that he

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

Witness my hand this *22nd* day of *July* 190*1*.

Executed in presence of

Ordinary.

L. S.

County.

Wm. Elizabeth Humphries

{ REAL }

Questions for Applicant.

STATE OF GEORGIA.

Cobb County.

Wm. Elizabeth Humphries 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 1864, hereby submits to proof, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

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

Elizabeth Humphries, Reside in Cobb County, Ga.

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

All my life, about 25 years.

3. When and where were you born?

Newton County, Ga. in 1846.

4. When and where was your husband born—state his full name, and when were you and he married?

Edwin Humphries my husband, born in Newton County, 1836.

We were married Sept. 18th, 1864.

5. When and where, and in what Company and Regiment did your husband enlist or serve during the

war between the States? *He enlisted in Company B in 1861, 1st Regiment Georgia at date*

Co. B. 18th Regt. Ga. 1861.

6. How long did your husband serve in said Company and Regiment?

About 4 years.

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

In Virginia, at Appomattox, with Lee's Army, April 1865.

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

He was.

9. If not with his command at surrender, state, clearly and specifically where he was, when he left com-

mand, for what cause, and by what authority? *He was with his Command*

at the surrender.

10. When and where did your husband die?

He was drawing independent pension at his death.

11. Which of the following groups do you base your application for Pension, viz: First—Age and

Poverty; Second—Infirmary and Poverty; or Third—Blindness and Poverty? *Age, infirmity*

and poverty.

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

your support. If upon the second, give a full account of the 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 had heart*

disease and breathing trouble for about four years—this together with

advancing years, has rendered me unable to labor, except light housework

13. What has been your occupation since your husband's death? *not light work*

in the house.

14. How much can you earn gross, by your own exertion or labor? *Nothing.*

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

Nothing but one cow & few household goods.

16. What property, real or personal, did you possess at death of husband or his left you, and of the year

1899-1900 and what disposition, if any, by sale or gift, have you made of the same? *He left me a house*

which has since died. Nothing else except as named above.

17. In what county did you reside in 1899 and 1900, and what property did you return for taxation?

In Cobb County, returned no property.

18. How have you been supported since death of husband, and especially for 1899 and 1900?

By my children.

19. How much did your support cost for each of those years, and how much did you contribute by your

own labor or income? *Contributed nothing. Don't know what it cost.*

20. What was your employment during 1899 and 1900—how much did you receive for each year?

Did very little but wait on my husband until he died last June.

Since then have had no employment and received nothing.

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

any lands or other property? *Yes. 2 boys & 5 girls. They have no lands or other*

property. *Yes.*

22. Have you or made an application for pension before? *No.*

23. How many applications have you made for a Pension, and under what claim? *None.*

Sworn to and subscribed before me this *22nd*

day of *July* 190*1*.

John Anthony Ordinary,

of *Cobb* County.

WIDOW'S
Indigent Pension.
1901.

Name *Elizabeth Humphries*

County *Cobb*

Widow of *Edwin Humphries*

Law B-15-2a (Cobb)

Approved *4/8* 1901

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

1901

3/19/01

Questions for Witnesses.

STATE OF GEORGIA,
Rockdale County.

W.C. Bond & W.H. Camp of said State and County, having been presented as a witnesses in support of the Application of Mrs. Elizabeth Humphries for a Pension under the Act of 1900, and after having been duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? H.C. Perrin lewings Leathers
W.H. Leathers Rockdale Ga.
2. Are you acquainted with the applicant, Miss Elizabeth Humphries
If so, how long have you known her? H.C. Perrin does not know her. W.H. Leathers all
his life has known Elizabeth Leathers.
3. Where was she reared, and how long since when has she been a resident of this State? She resides
now in Cobb Co. Ga. Has resided in Ga. all her life.
4. When and where was she born? In Newton Ga. 13. Sept. 1846.
5. Were you ever acquainted with her husband? Yes Ed. Humphries, knew him.
6. Where did he reside in 1861? In Newton Co. Ga.
7. When and to whom was he married? 1845 Sept. 1846 to Elizabeth Leathers.
8. When and where was he born? In Newton Co. Ga. does not think date this
is right. He is now dead.
9. How long have you known him? H.C. Perrin since 1860.
10. When and where did Ed. Humphries
leave the States, and in what Company and Regiment did he enlist and how do you know that? Leathers Ga.
13. 18. May Ga. Vol. 1861. Early part of war. He was a member of some
unit. (Leathers Unit. (Hawes))
11. Were you a member of the same Company and Regiment? H.C. Perrin was.
W. Leathers was not.
12. How long did he perform regular military duty? H.C. Perrin. Ed. Humphries
served until war closed. about 4 years
13. When and where was his Company and Regiment surrendered and discharged from service?
At Appomattox Co. Va.
14. Were you with the command when it surrendered? H.C. Perrin was present.
W. Leathers was not.
15. Was Ed. Humphries
the husband of applicant present?
Yes. W.H. Leathers, W.H. Humphries, was captured and
was a prisoner in prison. at some time.
16. If not present, where was he? H.C. Perrin was not present but quite sure he was
in some place in the South.
17. When and where did he leave his Command? At Appomattox. Ed. Humphries stayed with
his command. He was not present at surrender. He was in prison
for some time. He left
W.H. Leathers was left. He was left the way a good soldier always at
his post. He never left the way a good soldier always at
his post. (State fully and clearly.)
18. How do you know all this? H.C. Perrin. Was a Cavalry
man. Ed. Humphries was a Cavalry man. He was a good soldier
and stayed at his post and study to it till the end
19. When and where did Ed. Humphries
die?
He died at Appomattox. He was in 1900. Cobb Co. Ga.
20. Where did he reside at his death and how long had he been a resident of Georgia at his death?
In Cobb Co. Ga. Had resided in Ga. all his life.
21. Do you of your own knowledge know that applicant is the lawful widow of Ed. Humphries
W.H. Leathers knows the so. from his own knowledge
and knows she has, and is now his widow?
22. What property, effects or income has the applicant, if any, and how do you know this of your
own knowledge? She has no property, income or effects. Her own
money is her own money. She has been to her home.
She has a cow and a pig and a horse. She has a horse.
23. What property, effects or income did applicant possess in 1889 and 1900 and what disposition did she
make of it? Had a cow, a pig or two, and a little household
goods. But know what she has done with them.
24. Has applicant conveyed any property in last two years or given any away, if so what was it and to
whom? She has not. Bought a horse but it
did.
25. What is applicant's physical condition and her chance and ability to earn a support?
She is very feeble and infirm. Has something
to do. She is not able to labor, and has no way
of making a support.

26. Is applicant able to earn a support at labor of any sort if not why? She is not
she is too feeble in health. Not able to work

27. How was she supported for 1999 and 2000? By her own working part time as a courier. It was a hard make ends meet.

28. How much did applicant contribute to her support for last two years? *Carri - Tell her husband draw a pension. Is not on file.*

29. Give a full and complete statement of applicant's physical condition? She suffers with Swindler in a shell

from General debility. very feeble and weakly.

30. What interest have you in the recovery of this pension by the applicant? N.C. Home Sw
N.C. Home, directly.

Sworn to and subscribed before me this 14 N.C. Penn mowers, guests
1.5. & 10.1.12. 13. 14. 15. 16.

day of Nov 1904
Am. Sal.

Ordinary, *Rockdale*

County.) W. H. Gamm Witnesses.

Affidavits of Physicians.

STATE OF GEORGIA,

County. }
M. L. S. }
S. A.

Personally before me comes W. J. Free MD and A. H. Kunk MD both known to me to be reputable

physicians of said county, who, being severally sworn, say on oath that they have examined carefully Mrs. Elizabeth Hunter applicant for a license to practice medicine in said county, and that she is a person well known to me to be reputable

such personal examination say that her physical condition is this fit

Failure to Enforce Law

Subject to shift at any time.

and we have no interest in said pension if allowed.

Sworn to and subscribed before me this 22
day of July 1904 W. S. Pae

John A. ... Ordinary, 11 11 11

County.) *W. H. Thompson*

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, }

County. }

I, John Austin Ordinary in and for said county, hereby

county, and has been a bona fide resident of this State since 1901 day of Jan

1879, and that the witnesses, Mr. _____

are entitled to full faith and credit.

oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses before the same was signed and subscribed.

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

of property, and in 1900 nothing dollars worth of property.

Witness my hand and official seal, this 16 day of March 1901

SEAL *John Anthony* Ordinary,

Notes—1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses to the following:

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

4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now

U. witnesses and two Physicians are necessary to make out claims.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }
Bibb

I, *Elizabeth Humphries*, hereby authorize
John A. Harty 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*th

day of *Jan* 1902.

Elizabeth D. Humphries

Executed in presence of

John A. Harty

Humphries Elizabeth

To Those Heretofore Paid.

1902.

No. *139*

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. Elizabeth Humphries

OF

Bibb
County,

Widow of

Co.

Regiment

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1902

AND HANDLED TO

Only

FILED IN HARRISON, MISSISSIPPI, 1902.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of *Cobb*

PERSONALLY COMES MRS.

Elisabeth Humphries

(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 *1846*.

Edwin Humphries That she is the Widow of *B* who was a soldier in Company *184* of the *184* Regiment of *ka vals*

Volunteers, that he enlisted in said regiment on or about the month of *1864* *1864* and served in the Army up to *1864* day of *June* *1864* that he died on the *22* day of *June* *1864*

Owing to Infirmary and poverty
she is unable to support her self

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*

There has been no other person as a resident of *Cobb* County, under Act 1900, for the year 1900 and now apply for the pension provided by law for the year ending December 31, 1902.

Sworn to and subscribed before me this *8th* day of *June* 1902. *E. L. L. Humphries*
John Hartley Ordinary of said County.

State of Georgia,

Cobb County.

John Hartley Ordinary of said County, certify that I am well acquainted with Mrs. *Elisabeth Humphries* 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 *10th* day of *June* 1902.
John Hartley
 Official Seal of *Cobb* County, Ordinary of

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

Georgia Rockdale County

I, J. M. Holmes, came before me A. M. Holmes
Ordinary in and for said County, J. F. Leamp
who being duly sworn as to pension claim
of Elizabeth Humphreys widow of Ed
Humphreys. Says on oath that he knows
that said applicant was the lawful wife
of said E. Humphreys, and that she has not
re-married since death of her said husband.
That she has no property effects or
income. Except a cow that she is in very
feeble health and not able to earn a support
and has no means of support outside of
her own exertions.

Given to and subscribed
before me this Feb 14th

1907.

A. M. Holmes

Ordinary

J. F. Leamp
witness

Georgia Rockdale County

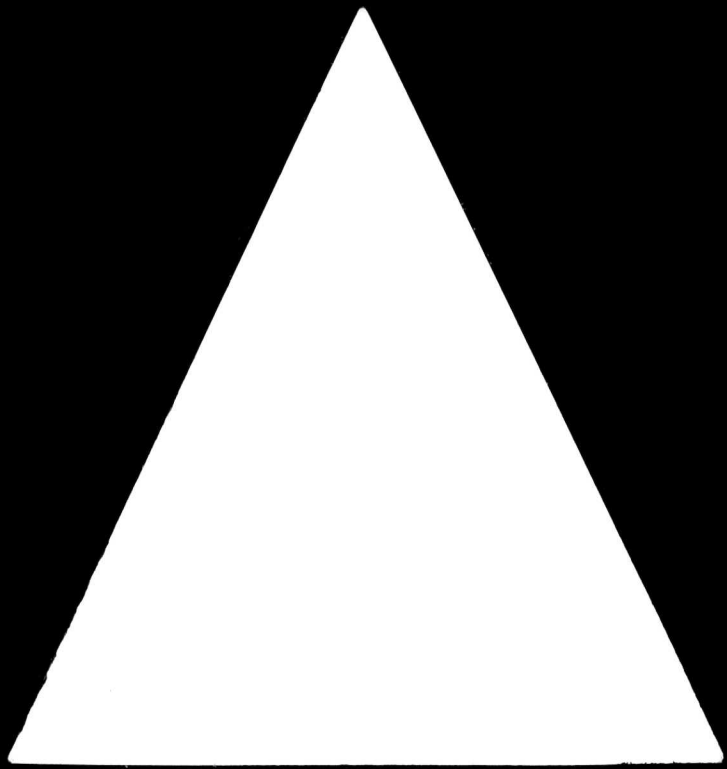
I, A. M. Holmes Ordinary of said County,
do certify that that the witnesses H. L. Penner
W. H. Leamp and J. F. Leamp came before me
and was duly sworn before signing affidavits
as to questions answered by them, and that
each of said witnesses are of trustworthy
character and worthy of belief.

Given under my hand and seal
this Feb 14th 1907.

A. M. Holmes

Ordinary

Ordinary



J. B. Humphries,
Private, K-41st Regt.
Mar. 4 1862.
Captured, Decatur,
Oct 31-1864,
(Released, Camp
Douglas, Ill.,
prison, May 13
1865. (W.R.)

return ok

Humphries, J. B.

Col. 6th Co.

No. 3357-51
att. for 419

Confederate

Soldier's Application.

UNDER ACT 1910.

County, Col. 6th
Name, J. B. Humphries
Company, K.
Regiment, 41st Regt. Inf.
Approved

J. W. LINDSEY,
Commissioner of Pensions.
CHAS. F. BYRD, State Printer, Atlanta.

11/1-1918

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

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

1. What is your name and where do you reside? (Give County and Post-office)
John B. Humphreys Camden, Ga.

2. How long and since when have you been a continuous resident citizen of this State?
As long as I live; 78 years now

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)
April 1862, Campbell's Co. 2d R. H. S. Co. 1st Regt.

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge)
Until Surrender

6. When and where was your Company and Regiment surrendered or discharged from the Service?

7. Were you actually present with your Command when it was surrendered or discharged?
8. If you were not actually present, state specifically and clearly where you were.

a. Where was your Command when you left it?

b. When did you leave the Command?

c. For what cause did you leave?

d. By whose authority did you leave?

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

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

g. In what way were you prevented?

h. What effort did you make to return?

i. Were you captured during the war?
Yes

j. If so, when, and where? In what prison were you held and when were you released?
Jan 1864, Danville, Campbell's Co. 2d R. H. S. Co. 1st Regt.

9. What property of every description was owned, in the use, possession and control of yourself and its cash value on the 4 Nov. 1908? (Make list by items and value).
None as of time Value 78000 June 7 1860 -

10. What property of any kind have you disposed of and for what purpose since 4 Nov. 1908. To whom and for what price?
Nothing

11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and its cash value? (Make itemized list).
Same as above

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

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

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

Sworn to and subscribed before me, this the
day of Oct 1918
J. M. Cramer Ordinary
of Cobb County.

1918
75
723

John B. Humphreys
Private, 1862.
Captured, Decatur
Oct 31-1864.
Released, Camp
Douglas, Ill.
Prison, May 13-
1865. (over)

John B. Humphreys
County, Camden
Name, John B. Humphreys
Company, 2d R. H. S. Co. 1st Regt.
Regiment, 1st Regt.
Approved, 1

Soldier's Application.
UNDER ACT 1910.

Confederate

John B. Humphreys, J.B.
Cobb Co. Ga.
3367-51
Oct 10/11/18

John B. Humphreys
County, Camden
Name, John B. Humphreys
Company, 2d R. H. S. Co. 1st Regt.
Regiment, 1st Regt.
Approved, 1

315
11/1 - 1915

J. W. LINDSEY
Commissioner of Pensions

CHAS. W. BETHUN, State Printer, Atlanta

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,

County.

Dough
J. H. Smith

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

1. What is your name and where do you reside? *J. H. Smith*
Dough Co Ga
2. How long and since when have you known *J. B. Humphris* the applicant?
56 years
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? *Avail Co Ga*
4. When, where and in what Company and Regiment did *J. B. Humphris* enlist during war from 1861 to 1865? (Give date and place). *Spring 1862 Campbell Co Ga B. H. Co*
5. How did you obtain your information of this Service?
I was member of same Co
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) *until Fall 1864 when applicant was captured*
7. When and where was his Command surrendered or discharged (give date and place).
in April 1865 in North Carolina
8. Were you personally present at the Surrender? *No. Was in prison*
9. If not, where were you and how came you there? *he was captured*
10. Was the applicant personally present with his Command at surrender? *No*
11. If not where was he and how came him there? *He had been captured*
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).
Chunges to same Co & Regiment
13. In what way was he prevented from returning to his Command? _____ How do you know?
14. What effort did he make to return to his Command and how do you know?
15. Was applicant captured as a prisoner? *Yes* If so, when and where? *Fall 1864*
In what prison was he held? *Camp Douglas Ill* and when released _____

Sworn to and subscribed before me, this the

28th day of *October*, 191*8*

J. H. McLeary, Ordinary,

of *Dough* County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

County.

Personally before me comes *Tom Jones & F. A. Daniel* who on oath says that they are freeholders residing in said County and we know *J. B. Humphris* the applicant for pension and we know the property that is now in the use, possession and control of himself and of the oath value to wit: (Make List by items and value.)

18 acres of land value 80.00
1 horse & buggy " 1.00

1. What property, if any, has been sold or given away by the applicant since Nov. 4, 1908? (State it fully by items). *No*
2. When and to whom was it sold or given to?
3. What was the price paid or stated to be paid?
4. What relation is the party to applicant?
5. What disposition was made of the proceeds of the sale?
6. Was the disposition of this property made in good faith and full value? or was it made to obtain a pension?

Sworn to and subscribed before me, this the

day of *Oct*, 191*8*

J. B. Humphris, Ordinary,

of *Dough* County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

County.

J. B. Humphris Ordinary of said County, certify that I know the applicant *J. B. Humphris* for Pension is the person he represents himself to be and reside in said County. That I also know _____ the witness swearing to the service and *Tom Jones & F. A. Daniel* 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 *Dough* shows that *J. B. Humphris* value for tax is in 1908 \$ _____ for 1909 \$ _____ for 1910 \$ _____ for 1911 \$ *2470* for 1912 \$ _____ for 1913 \$ _____ for 1914 \$ _____ for 1915 \$ *2420* 1917-2470-418-1400
Sworn under my hand and official seal of office this *30* day of *Oct*, 191*8*

J. B. Humphris, Ordinary,

of *Dough* County.

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

2.52 day of October 1918 } J. H. Smith
J. H. Smith, Ordinary,
of Douglas County.

POWER OF ATTORNEY.

STATE OF GEORGIA.

Paul County.

I *Edward W. Hunt*

herely authorize

Ed. W. Hunt

of

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

me *him*

at

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

day of *January*

1897.

Ed. W. Hunt

In presence of

John D. Hunt
Gray

Hunt, Thomas W.
Paul County
Shirley Co.

ACT OF 15 DEC. 1894.

(For Those Already Enrolled.)

No. *369*

INDIGENT
Soldier's Pension.
1897.

Name *Thos. W. Hunt*
County *P Cobb*

July 11 1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

at

ED. W. HARRISON, STATE PRINTER, ATLANTA.

Ms data

POWER OF ATTORNEY.

STATE OF GEORGIA,

Doyle County.

I Mrs W. Hunt

hereby authorize

of

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

by

at

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

day of

1897.

Executed in presence of

J. M. Stone
Comy

Hunt, Doyle Co. Me

Doyle County
Shirley Co.

(For Those Already Enrolled.)

No. 369

INDIGENT

Soldier's Pension.

1897.

Name Mrs W. Hunt
County Doyle

1897.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

Ally

WITNESSES, their names, states.

Mr. Stone

Draw from Cherokee County for 1897

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County,

Personally appears Mrs. W. Hunt 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 25 day of April, 1836 that he is 60 years old and
by occupation a farmer; that he enlisted in the military service of the Confed-
erate States (of of the State of _____) during the war between the States,
and served for the term of about 12 or 13 months in Company B, of 43th Regiment of

the 4th Vol.; that his physical condition is as
follows:

by paralysis, general de-
bility, poverty, &c.

that his property consists of the following items:

None

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

Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1897. I have heretofore as a resident of Cherokee
county been allowed a pension for the year 1896.

Sworn to and subscribed before me, this, the

30 day of May, 1897.

Wm. H. Hunt
Wm. Stone Ordinary.

STATE OF GEORGIA,

Cobb County,

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

Given under my official signature and seal, this

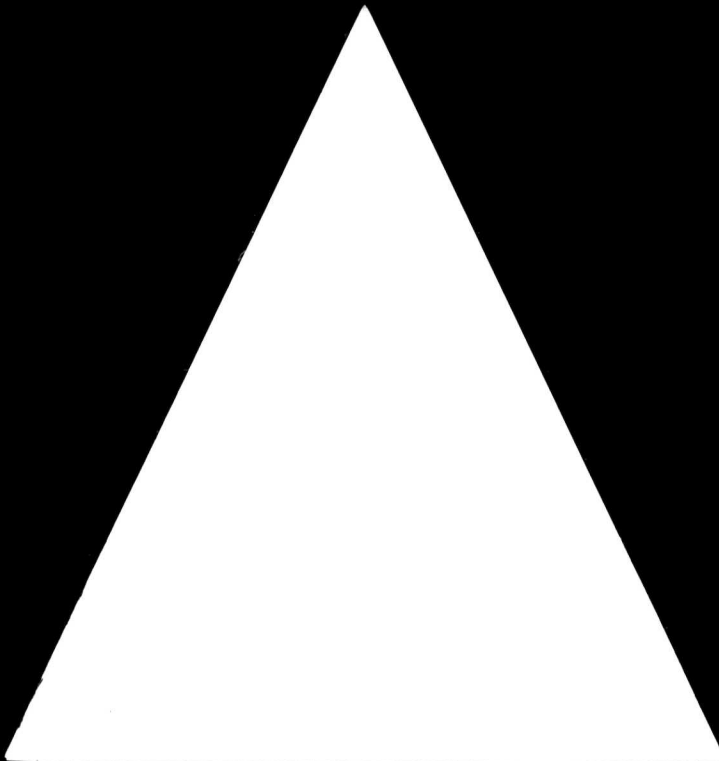
day of May, 1897.



Wm. Stone
Cobb County.
Ordinary.

Notes—The blank spaces must be filled.

Ordinary Cobb County.



POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____, hereby authorize

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

at _____ by _____

Witness my hand and seal, this _____ day of _____, 1908.

[L.S.]

Executed in the presence of _____

Huntton, J. T.
Major
10/24/05

INDIGENT PENSION.

1908.

Name *J. T. Huntton*
County *Cobb*
Co. *M. Phillips Legion Regt.*
Approved _____ 1908.

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.

10/24/05.

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 _____, 1908.

[L. S.]

Executed in the presence of

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

County.

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

1. What is your name and where do you reside? (give State, County and post-office)
J. H. Houston, Marietta, Cobb County, Ga.
2. How long and since when have you been a resident of this State?
All my life since 1833
3. When and where were you born?
Campbell District, Ga. May 10th 1833
4. When and where and at what company and regiment did you enlist or serve? *I first enlisted at Big Shanty, G. M. Phillips Legion in May 1862*
5. How long did you remain in such company and regiment?
I was in the 1st Georgia Infantry, 1st Regt. of Col. J. H. Houston, until it was discharged in G. M. Phillips Legion in May 1863
When and where was your company and regiment surrendered and discharged?
At Fort Fisher, May 9th 1865
7. Were you present with your company and regiment when it was surrendered?
I was present at Fort Fisher, May 9th 1865
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority?
I was sent off to the hospital at Fort Fisher, and I was discharged from the hospital at Fort Fisher, May 9th 1865
9. How much can you earn (gross) per annum by your own exertions or labor?
Nothing
10. What has been your occupation since 1865?
Nothing
11. Upon which of the following grounds do you base your application for pension, viz: First, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"?
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?
At about 4 or 5 years
13. What property, real and personal, or income, do you possess, and its gross value?
None
14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same?
I have none
15. In what County did you reside during those years, and what property did you then return for taxation?
I resided in Cobb County, Ga. and I have none
16. How were you supported during the years 1899, 1900, 1901 and 1902?
My wife and I have been supported by my wife's labor and I have been supported by my wife's labor
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income?
I have been supported by my wife's labor and I have been supported by my wife's labor
18. What was your employment during 1899, 1899, 1901 and 1902? What pay did you receive in each year?
I have been supported by my wife's labor and I have been supported by my wife's labor
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead, or other property? Their ages and how employed?
I have a wife and two children. My wife is 40 years old and my children are 10 and 8 years old. They are supported by my wife's labor and I have been supported by my wife's labor
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 claim?
3 or 4

Sworn to and subscribed before me this the _____ day of _____, 1908.
J. H. Houston
Applicant.
of _____ County.

Every question must be answered

and my children have helped me

10/24/05

10/24/05

INDIGENT PENSION.

1903.

1905.

Name: *J. H. Houston*

County: *Cobb*

and *G. M. Phillips Legion Dist.*

Approved: _____ 1908.

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. Houston, State Printer, Atlanta.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Cobb COUNTY.

B. J. Hamby of said State and County, having been presented as a witness in support of the application of Thomas Hinton for pension under section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside?
Marilla, Cobb County, Ga.
 2. Are you acquainted with B. J. Hamby, the applicant; if so, how long have you known him?
Ever since 1887.
 3. Where does he reside, and how long and since when has he been a resident of this State?
Has resided in State ever since before the war - lives now in Little Rock, Ark.
 4. When, where and in what company and regiment did he enlist, and how do you know?
Co. M. Phillips Legion, about May 1862; Marilla, Ga.
 5. Were you a member of the same company and regiment?
Yes.
 6. How long did he perform regular military duty?
Up to April 6th 1865.
 7. What was his command surrendered?
Appomattox, April 9th 1865.
 8. Were you present when it surrendered?
Yes.
 9. Was applicant present?
No - was captured 3 days before. (See above)
 10. If he was not present, where was he?
Prisoner at Point Lookout.
- When did he leave his command?
April 6th 1865 For what cause?
Capture
- By what authority he left?
See above How do you know all of this?

11. What property, effects or income has the applicant? (Give your means of knowledge).
None - know his circumstances well -
12. What property, effects or income did the applicant possess in 1898, 1897, 1896, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same?
Had none -
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom?
No -
14. What is the applicant's occupation and physical condition?
None - has not been able to do but very little for several years -
15. Is the applicant unable to support himself by labor of any sort, if so, why?
He is not able, on account of age and feebleness -
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902?
By his children -
17. What portion of his support for these four years was derived from his own labor or income?
Scarcely any - had no income and was unable to work.
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 60 years old, has nothing, and is unable to do labor for a support.
19. Who composes family? What property have they? Children's age and their earning capacity?
Wife & boy about 14 years old - have nothing but a little household goods -

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

Sworn to and subscribed before me, this the 13th day of May 1903.
John Hamby Ordinary. B. J. Hamby Witness.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Cobb COUNTY.

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

He is seventy years old and very infirm and is unable by reason of age and infirmity consequent on age to earn a living at this business of farming.

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

Sworn to and subscribed before me, this the 13th day of May 1903.
John Hamby Ordinary. Gilbert Clummet M.D. G. J. Grebe M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cobb COUNTY.

I, John Hamby Ordinary, in and for said County, hereby certify that the applicant Thomas Hinton resides in said County, and has been a bona fide resident of this State since the 13th day of May 1890 and that the witnesses, viz: B. J. Hamby

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

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

I further certify that the tax digest of Cobb County show that applicant returned for taxation in his name in 1899 Nothing Dollars of property, and in 1900 Nothing Dollars of property, in 1901 Nothing Dollars of property, in 1902 Nothing Dollars of property.

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

Witness my hand and seal of office, this 13th day of May 1903.
John Hamby Ordinary.
of Cobb County.

NOTE.

1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answers make to each of the questions asked of you, and the oaths 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.

day of May 1903.
John H. Harty Ordinary. W. H. Ashman Witness.

words: "You shall true answers, the Ordinary shall swear applicant and the witnesses in the following the whole truth, so help you God."
Additional affidavits may be attached if blank spaces are insufficient.
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.

Huntton J. J.
Cobb Co.
CODER ENROLLMENT FORM
(FOR THOSE ALREADY ENROLLED.)

No. 668

**INDIGENT
SOLDIER'S PENSION
1905.**

Name J. J. Huntton
County Cobb
Co. _____ Regiment _____

WARRANT ISSUED

1/23 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Orley

Geo. W. Harrison, Manager for State Printer, Atlanta.

no date

STATE OF GEORGIA.

POWER OF ATTORNEY.

I, _____

COUNTY. }

do hereby authorize _____

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

by _____ day of _____ 1906.

Witness my hand and seal, this _____ [L. S.]

Executed in the presence of _____

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County,

Personally appears

J. T. Hanton

of

Cherokee

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 18____; that he is _____ years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of _____ in Company _____ of _____; that his physical condition is as follows:

Age Infirmary & Poor

that his property consists of the following items:

Nothing

of the value of _____

Dollars. I am now earning,

by my labor, _____

Dollars per month. That by reason of his

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

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

Sworn to and subscribed before me, this the _____

John Anthony day of January 1905.

Ordinary.

STATE OF GEORGIA,

Cherokee 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 I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal, this _____

day of January 1905.

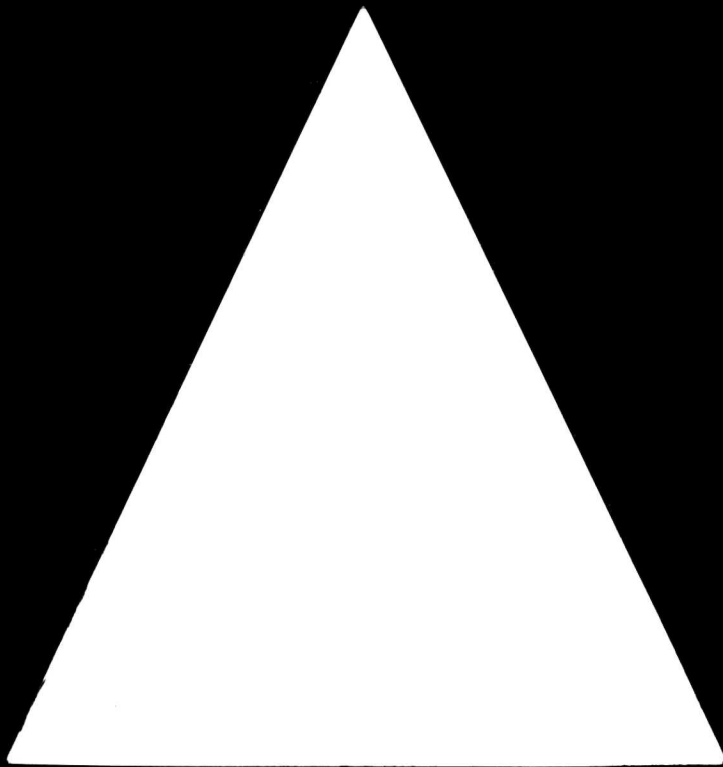
Ordinary

Cherokee County.



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

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



On for 1912
Cobb County

No.

Widow's Application

To Be Put on Roll in Her Own Right, when
Husband Was on Roll at Death.

For

County

Cobb

Name

Mrs M. E. Hamilton

Widow of

J. T. Hamilton
C. H. Phillips Legion

Approved

J. W. LINDSEY
Commissioner of Pensions

Chas. P. Byrd, State Printer, Atlanta.

5/14/11 5/16-1911

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

Cobb County.

Personally before me comes Mrs. J. E. Hunter of said County, who, after being duly sworn, on oath says, that she is the widow of J. E. Hunter to whom in the County of Cobb State of Ga. she was married on the 25th day of March 1868 and that she remained his wife, and resided with him to the date of his death on Oct 6 1870 and that she has not since his death remarried. At the time of his death he was a resident of Cobb County, in said State of Georgia, and he was on the Employment Pension Roll of the State and paid a pension of \$60.00 in Cobb County for \$10 per annum, on account of being a soldier in Company M. Phillips Legion (Volunteers of State Militia.)

At the death of J. E. Hunter he was in the use and possession of the following property None of the cash value of \$20

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

| | | |
|----------------------------------|-------------|----|
| Acres land | | \$ |
| Horses and Mules | <u>None</u> | \$ |
| Hogs, Cows, etc | | \$ |
| Total Cash value of all property | | \$ |

That she is now a bona fide resident citizen of said County of Cobb and she has so continuously resided since day of July 1886

Sworn to and subscribed before me, this the 17th day of April 1917 by J. M. Hunter Ordinary, of Cobb County.

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

STATE OF GEORGIA,

Cobb County

Personally before me come B. J. Hamby known to be responsible and truthful persons, residing in said County, who after having duly sworn on oath, say: that of their own personal knowledge Mrs. J. E. Hunter who made the foregoing affidavit, is the lawful widow of J. E. Hunter who died in Cobb County in said State of Ga on 6th day of Oct 1870 and that she has not since remarried. That she became the wife of J. E. Hunter on the 25th day of March 1868 and that she and he had resided together as man and wife continuously since 25 day of March 1868 and that the J. E. Hunter was the same man who was on the pension roll of said State from Cobb County, when he died.

Sworn to and subscribed before me, this the 17th day of April 1917 by B. J. Hamby Ordinary, of Cobb County.

Widow's Application

To Be Put on Roll in Her Own Right, when Husband Was on Roll at Death.

Cobb

Name Mrs. J. E. Hunter

Widow of J. E. Hunter

B. J. Phillips

Approved

J. W. LINDSEY
Commissioner of Pensions

Hunter, N. E. M. S.
Cobb, County
April 1917

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Cobb County.

County.

Personally before me come *J. J. Delk* who after being sworn on oath says, that they are freeholders of said County, and that they know *W. E. Hunter* of said County and knew her said husband *J. J. Hunter* at his death on the 6 day of *Oct* 1910 that she and he were in the use, possession and control of the following property at his death to wit: *No property*

of the value of \$ *No property* That she is now in the use, possession and control of the following property to wit: *No property*

of the value of \$

Sworn to and subscribed before me, this

17 day of *April* 191*1*

J. M. Gann Ordinary,
of *Cobb* County.

W. E. Hunter
X *Delk*
mark

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cobb County.

County.

J. M. Gann Ordinary of said County, do certify, that, I know Mrs. *W. E. Hunter* the applicant for this pension and that she is the person who represents herself to be, and that she is a bona fide continuing resident of said County and was on the *17* day of *April* 190*6*

That I also know *J. J. Delk* *W. E. Hunter* who I know to be a resident free holder of said County that all of the foregoing were duly sworn by me before signing the respective affidavits and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

That the tax Books of *Cobb* County shows that *Sh* returned property to the amount of *00* for 1908 \$ *00* for 1909 \$ *00* for 1910 \$ *00*

Sworn under my hand and official seal of office this *8* day of *May* 191*1*.

(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 present, or by general reputation.

Georgia,

Cobb County.

Court of Ordinary of Said County.

I, GORDON B. GANN, Clerk of the Court of Ordinary of said County, in said State, do hereby certify that the foregoing is a correct transcript of the record in the matter of

Copy of Marriage License and Certificate of John J. Hunter and Marley C. Ireland as found in Book "A" page 90.

and I further certify that I have compared said transcript with said record and that the same is a correct transcript therefrom. I further certify that under the laws of Georgia I am the keeper and custodian of said records and the proper party to make and certify transcript therefrom and that I am the duly appointed and qualified Clerk of said Court

In witness whereof I have hereunto set my hand and seal of office in the City of Marietta, Cobb County, State of Georgia

This *19th* day of *April* 191*1*

Gordon B. Gann
Clerk of the Court of Ordinary of Cobb County, Ga.

STATE OF GEORGIA,

Cobb County.

Court of Ordinary of Said County.

I, J. M. GANN, Ordinary and Judge of the Court of Ordinary of said County, in said State, hereby certify that GORDON B. GANN is the duly appointed and qualified Clerk of said Court of Ordinary, and as such Clerk is the custodian of the records and files of said Court. I further certify that the attestation made by him is genuine and in due form of law and by the proper officer, and that the seal thereto attached is the seal of said Court

In witness whereof I have hereunto affixed my name

This *2nd* day of *May* 191*1*

J. M. Gann
Ordinary of Cobb County, Ga.

MARRIAGE LICENSE.

STATE OF GEORGIA, COBB COUNTY.

TO ANY MINISTER OF THE GOSPEL, JUDGE OF THE SUPERIOR COURT, OR JUSTICE OF THE PEACE, TO CELEBRATE:

YOU ARE HEREBY AUTHORIZED TO JOIN IN THE HONORABLE STATE OF MATRIMONY

John T. Hinton AND *Nancy C. Ireland*
According to the rites of your church, provided there be no lawful cause to obstruct the same,
according to the constitution and laws of the state; and for so doing this shall be your sufficient license.

Given under my hand and seal *25* day of *March* 1868

John C. Campbell (Seal)
ORDINARY.

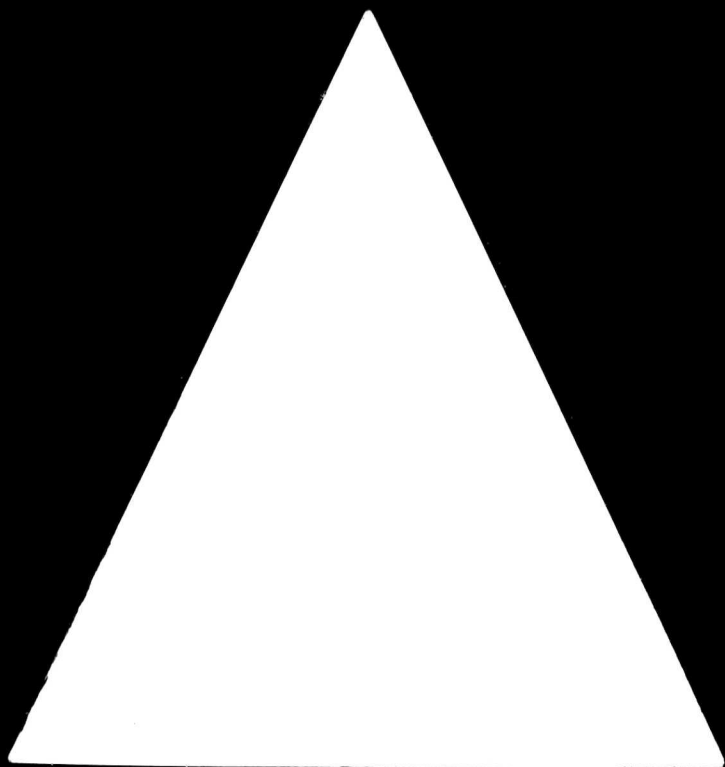
I hereby certify, that *John T. Hinton* and

Nancy C. Ireland were joined together in

HOLY BONDS OF MATRIMONY

on the *25* day of *March* 1868 by me.

H. B. Johnson



POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

Know all Men by these Presents, That I,

of

Cobb County,

do hereby appoint

my true and lawful attorney in fact, for

me and in my name, to receive and receipt for what ever amount of money I may be entitled to from the

State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby author-

izing 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 *Sept.* 1893

Executed in the presence of us

J. P. Poirer
E. M. Fleming

DIRECTIONS.

It allowed, send amount by

me at

, and oblige

to

Widows' Pension.

for year ending February 15th, 1893.

— PAID TO —

Mary Haunst
— OF —
Cobb COUNTY.

Warrant Issued

3/6

1893

AND HANDED TO

J. M. Stone

ONE HUNDRED, STATE PRINTER, ATLANTA.

Haunst, Mary
*Check 4188**1893*
*Cobb County**No. 4303*

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

Know all Men by these Presents, That I,

Mary Hurst
of Cobb County
my true and lawful attorney in fact, forCounty of said State, do hereby appoint
of Cobb County
me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 14th day of Feb'y, 1893Mrs. Mary X Hurst
[L. S.]

Executed in the presence of us

J. D. Power
J. M. Fleming

DIRECTIONS.

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

Affidavit to be Made by the Widow.

STATE OF GEORGIA,

COUNTY OF Cobb

In person came before me, the undersigned Ordinary

Mrs. Mary Hurst who being sworn according to law, says under oath that she is the widow of James G. Hurst, who was a soldier in the service of the Confederate States, and served as a member of Company 24, of the 1st Regiment of Ga. Volunteers; that he enlisted in said service on or about the day of August 1862, and was in the

Army up to _____ 1863. That while in the Army, he was on the day of November 1863, (See Note No. 1)

killed at Russellville Ky. He was killed by a true firing party on him. I was informed that he was killed as above stated. I know he never returned from the Army. Now was not heard from after the war. And your office information make this statement.

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 5th day of Dec'r, 1862, and that she has resided in Georgia continuously since the 25th day of October 1832 that Georgia is her home, and was such on the 23d day of December, 1890, and since said date she has not lived in any other state or locality. Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February 15th, 1893, and herewith tenders the proof of her right to receive the allowance granted by said Act.Sworn to and subscribed before me, this, the 10th day of Feb'y, 1893Mrs. Mary X Hurst
Ordinary.
Marrietta Ga.

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.

J. H. Humesaw Made Co.

Widow's Pension.

for year ending February 15th, 1893.

PAID TO —

Mary Hurst

Cobb County.

Warrant Issued

3/6 1893

AND HANDED TO

J. M. Fleming

Georgia Cobb County
 In Denson appears B. J. Mackey, Mary J. Mackey and
 Citizens of
 Cobb County and worthy of
 full faith and credit as wit-
 nesses. Long on oath depose
 and say that they are acquainted
 with Mrs. Mary Hunt the Appli-
 cant in the attached appli-
 cation for Pension - that she
 was the wife of Jas. E. Hunt
 while and during the time
 he served in the Confederate
 Army, that she is a resident
 of this County and that
 she has never married since
 the death of her husband.

B. J. Mackey
 M. J. Mackey

x M. M. Tield x

Shown to and Subscribed
 by me this 21st July 1893

J. M. Stow

Only

NOTARILY KNOWN

1. If the husband died after the war of wounds or disease, state fully and particularly how you, as witnesses, know the service as
 a soldier was the immediate cause of his death.

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

State of Georgia, } I, J. M. Stow Ordinary
 County of Cobb in and for said County of Cobb

State of Georgia, hereby certify that I am acquainted with Mrs. Mary Hunt
 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
14th day of July, 1893

SEAL

J. M. Stow

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, in any case.
- If proofs must be made out of the State, the witnesses must be sworn before a Judge of a Court of Record under Seal, and the witnesses must be certified to as reliable, and that their signatures are genuine.
- 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. En. Department.

1893

Affidavit for Three Witnesses.

Form No. 2.

State of Georgia,

County of Cummitt

Mitchell, M. E. Cummy, And G. B. Hilgore

and (each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say under oath, that, FROM THEIR OWN PERSONAL KNOWLEDGE, Mrs. May Hurst, of the County of Cobb, State of Georgia, is the widow of John S. Hurst, who was a soldier in Company 24 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 1862. That while in said service, or by reason of said service in the Army, he lost his life as follows: by having a tree cut on him by two of his comrades, while out on him in Camp near Russellville Tennessee. The accident was purely accidental, and to the best of our knowledge and belief, occurred about the month of November 1863, and shortly after the last of our knowledge he died in the hands of our troops in said accident. He was sent to the hospital and intelligence cannot be had within the time specified above.

Our opportunity for knowing the facts stated in reference to death of applicant's husband were that we were in Camp with him, and Mitchell Cummy and Hilgore saw the tree fall on him, and David Mitchell who was assistant surgeon of the regiment, was there in a few minutes. We further swear that Mrs. May Hurst to the best of our knowledge and belief 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 13 day of Feb, 1893,
G. B. Whitworth
Ordinary.

Notes. Witnesses must not testify about things they may believe, but confine their statements to such facts as they personally know.
2. If the husband died after the war of wounds or disease, state fully and particularly how you, as witnesses, know the service as a soldier was the immediate cause of his death.

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

Form No. 3.

State of Georgia,

County of Cobb

Ordinary John S. Hurst in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. May Hurst 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 14th day of July, 1893.

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

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

1893

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
State of Georgia, hereby certify that I am acquainted with Mrs.
Mary Hurst 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 *Jas. D. Hurst* 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 *July* 1894.

Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, *Cobb* County.

KNOW ALL MEN BY THESE PRESENTS, That I, *Mrs. Mary Hurst*
J. M. Stone
County in said State, do hereby appoint
of *Marionette* 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* 1894. *Mrs. Mary Hurst* [L. S.]

Executed in the presence of us:

J. J. Hurst
J. M. Stone

DIRECTIONS.

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

WARRANT ISSUED
7/13
AND HANDED TO
J. M. Stone
1894.

PAID TO
Mrs. Mary Hurst
OF
Cobb COUNTY.

for year ending February 15th, 1894.

WIDOW'S PENSION,

No. *192*

1894.

Hand in my
own country
THE THOSE HERETOFORE PAID.

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
State of Georgia, hereby certify that I am acquainted with Mrs.
Mary Hurst 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 *Jas. D. Hurst* 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 *27th* day of *July* 1895.

Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, *Cobb* County.

KNOW ALL MEN BY THESE PRESENTS, That I, *Mrs. Mary Hurst*
J. M. Stone
County in said State, do hereby appoint
of *Marionette* 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. *Mrs. Mary Hurst* [L. S.]

Executed in the presence of us:

J. J. Hurst

DIRECTIONS.

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

WARRANT ISSUED
7/24
AND HANDED TO
J. M. Stone
1895.

widow of
Jas. D. Hurst
County.

PAID TO
Mrs. Mary Hurst

for year ending February 15th, 1895.

WIDOW'S PENSION,

No. *457*

1895.

FOR THOSE HERETOFORE PAID.

Hurst Mary
Cobb Co

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Cobb*

Personally comes Mrs.

Mary Hurst

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*18 *32*

That she is the Widow of

Jas. G. Hurst

who was a Soldier in Company

of the

4th

Regiment of

Georgia

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

*August*186 *2* and served in the Army up to*Novr.*186 *3* That he lost his

life on the

day of

*Novr.*18 *63* (State here

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

That while in the Confed-
erate Army he was captured
as a prisoner in the State of
Virginia - was taken to
Prison Northern Prison and he
died then about Novr. 1863.

At any rate he never getting
from war was heard of after the
war

Deponent swears that she was the wife of said deceased soldier during his service in the
army as a soldier, and that she has never married since his death aforesaid, that she became
his wife in the year 18 *3* 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

day of

July 1894.

Ordinary.

Post-office

Mrs Mary Hurst
Monetta Ga

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Cobb*

Personally Comes Mrs.

Mary Hurst

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

*Jas. G. Hurst*18 *32* That she is the Widow of

of the

4th

Regiment of

Ga.

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

*August*186 *2* and served in the Army up to*Novr.*186 *3* That he lost his

life on the

day of

*Novr.*18 *63* (State here

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

That while in the Confed-
erate Army in the State
of Virginia in Novr. 1863,
this Gonzales cut down a
tree, which fell across his
tent and killed him while
he was asleep.

Deponent swears that she was the wife of said deceased soldier, during his service in the
army as a soldier, and that she has never married since his death aforesaid, that she became
his wife in the year 18 *3* 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.

Ordinary.

Post-office

Mary Hurst
Monetta Ga

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

Form No. 2.

STATE OF GEORGIA, County of *P Cobb*
 I, *J. H. Stone* Ordinary in and for said County of
Mary Hurst 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 *Jas. D. Hurst*
 deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1895.
 In Witness Whereof, I have heretofore set my hand and affixed the seal of my office, this
 4th day of *Feb'y* 1896.
J. H. Stone Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, County of *P Cobb*
 I, *Mary Hurst* hereby authorize *J. H. Stone*
 of *Monetta* to receive and receipt for the pension and hereon and request
 that he remit same to *me* by *him*
 IN WITNESS WHEREOF, I have heretofore set my hand and seal, this
 4th day of *Feb'y* 1896.
Mary Hurst
 Executed in the presence of
W. H. Fleming

WIDOW'S PENSION,
 No. 3534
 1896.
 PAID TO
Mary Hurst
 OF
Jas. D. Hurst County
 WIDOW OF
 WARRANT ISSUED
 27
 AND HANDLED TO
 1896.
 Hurst, Mary
 Cobb County
 FOR THOSE HERETOFORE PAID

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

Form No. 2.

STATE OF GEORGIA, County of *P Cobb*
 I, *J. H. Stone* Ordinary in and for said County of
Mary Hurst 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 *Jas. D. Hurst*
 deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1896.
 In Witness Whereof, I have heretofore set my hand and affixed the seal of my office, this
 4th day of *Feb'y* 1897.
J. H. Stone Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, County of *P Cobb*
 I, *Mrs. Mary Hurst* hereby authorize *J. H. Stone*
 of *Monetta* to receive and receipt for the pension and hereon and request
 that he remit same to *me* by *him*
 IN WITNESS WHEREOF, I have heretofore set my hand and seal, this
 4th day of *Feb'y* 1897.
Mrs. Mary Hurst
 Executed in the presence of
W. H. Fleming

WIDOW'S PENSION,
 No. 3656
 1897.
 PAID TO
Mary Hurst
 OF
Jas. D. Hurst County
 WIDOW OF
 WARRANT ISSUED
 27
 AND HANDLED TO
 1897.
 Hurst, Mary
 Cobb County
 FOR THOSE HERETOFORE PAID

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Cobb*

Personally Comes Mrs.

Mary Hurst

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

18 *32* That she is the Widow of

who was a Soldier in Company

of the

Regiment of

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

186 *4* and served in the Army up to

186 *3* That he lost his

life on the

day of *Novr.*

18 *63* (State here

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

But while in the Confederate Army in Virginia he was killed by the falling of a tree cut by his comrades - was killed in Novr. 1863

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier,

and that she has never married since his death aforesaid, that she became his wife in the year 18 *57*

that Georgia is her home and she resided in this State 23d day of December, 1890, and has not

lived in any other State or locality since that date. I have been allowed a pension 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, 1896.

Sworn to and subscribed before me, this

day of *July* 1896.

J. M. Starn Ordinary.

Post-office

Mary Hurst
Manetta Ga

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Cobb*

Personally Comes Mrs.

Mary Hurst

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

18 *35* That she is the Widow of

who was a Soldier in Company

of the

Regiment of

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

186 *4* and served in the Army up to

186 *3* That he lost his

life on the

day of *Novr.*

18 *63* (State here

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

But while in the Confederate Army in the State of Va. in Novr. 1863, a tree was felled on him and killed him

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier,

and that she has never married since his death aforesaid, that she became his wife in the year 18 *57*

that Georgia is her home and she resided in this State 23d day of December, 1890, and has not

lived in any other State or locality since that date. I have been allowed a pension 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

day of *July* 1897.

J. M. Starn Ordinary.

Post-office

Mrs. Mary Hurst
Manetta Ga

POWER OF ATTORNEY.

State of Georgia,

County,

I, Mary Hurst hereby authorize J. W. Stoue
of Cobb County, Ga. to receive and receipt for the pension paid hereon and request
that he remit same to me at his 11

In WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of July 1898.

Executed in the presence of

Mary & Stoue [L. S.]

Pay to J. W. Stoue
July 11/98
J. W. Stoue
only

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County,

I, Mary Hurst 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 at his

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 6
day of July 1900.

Executed in presence of

Mary Hurst X [L. S.]

Hurst Mary
Cobb County
For Those Herebefore Paid.

1898
1st Fullm. Co. 1899

NO. 3622

WIDOW'S PENSION,

For year ending February 16th, 1898.

AID TO
Mrs. Mary Hurst

Cobb County,
Widow of Jas. S. Hurst

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

2/12 1898.

AND HANDED TO
A. C. Irvine

W. W. HARRISON, STATE PRINTER, ATLANTA.

Hurst Mary
Cobb County
To Those Herebefore Paid.

1900
Green Fullm. Co. 1899

NO. 1922

WIDOW'S PENSION,

For year ending February 16th, 1900.

PAID TO

Mrs. Mary Hurst

Cobb County,
Widow of Jas. S. Hurst

JNO. W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

Feb 16 1900,

AND HANDED TO

him

W. W. HARRISON, STATE PRINTER, ATLANTA.

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,
County of Cobb } Personally Comes Mrs. Mary Hurst

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 18 32 That she is the Widow of Jas S Hurst who was a Soldier in Company 4th of the 1st Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of August 186 2 and served in the Army up to November 186 3 That he lost his life on the day of Novr 18 63 (State here

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

That while in the Confederate army in the State of Virginia the deceased husband died from a wound caused by tree falling on him while in camp in Virginia November 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 18 57

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 11 day of July 1898. Mary Hurst Ordinary. Manetta Ga Post Office.

State of Georgia, Cobb County, I J. M. Stone Ordinary of said County, certify that I am well acquainted with Mrs. Mary Hurst who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she

has continuously resided in this State since the day of July 18 32

Given under my official signature and seal this 11 day of July 1898.

Official Seal. Ordinary of Cobb County.

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,
County of Cobb } Personally Comes Mrs. Mary Hurst

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 18 32 That she is the Widow of Jas S Hurst who was a soldier in Company 4th of the 1st Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of August 186 2 and served in the Army up to November 186 3 That he lost his life on the day of November 18 63 (State here

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

That while in the Confederate army in the State of Virginia the deceased husband died from a wound caused by tree falling on him while in camp in Virginia November 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 18 57

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, 1900.

Sworn to and subscribed before me, this 10 day of July 1900. Mary Hurst x Ordinary. Manetta Ga Post Office.

State of Georgia, Cobb County, I J. M. Stone Ordinary of said County, certify that I am well acquainted with Mrs. Mary Hurst who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she

has continuously resided in this State since the day of July 18 32

Given under my official signature and seal, this 16 day of July 1900.

Official Seal. Ordinary of Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County. }
I, *Mary Hurst* hereby authorize
John Aubrey of *Marcella*
to receive and receipt for the pension paid hereon and request that he remit same to
me at *Marcella*

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *17*
day of *January* 1901.

Mary Hurst [L. S.]
Executed in presence of
Geo M. Gamm

Hurst, Mary
Cobb Co

To Those Heretofore Paid.

1901.
Graham Fuel Oil Co. 1901

No. *1267.*

WIDOW'S PENSION,

For year ending February 15th, 1901.

PAID TO

Mrs. Mary Hurst

County.

Cobb

Widow of *James W. Hurst*

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1901,

130. AND HANDED TO

Cydney

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County. }
I, *Mary Hurst* hereby authorize
John Aubrey of *Marcella*
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 *17*
day of *Jan* 1902.

Mary Hurst [L. S.]
Executed in presence of

Hurst, Mary
Cobb County

To Those Heretofore Paid.

1902.

No. *334*

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. Mary Hurst

OF

Cobb County,

Widow of

Co.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1902

AND HANDED TO

Ordy

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

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

Mary Hurst

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 1832.

That she is the Widow of James B. Hurst who was a soldier in Company 24th of the Georgia 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 November 1863. That he lost his life on the day of November 1863. (State here

particulars of the husband's death, when, where and from what cause) That while in the Confederate Army in the State of Virginia the deceased husband died from a wound caused by fire falling on him while in Camp in Virginia

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

I have been allowed a pension as a resident of Fuller 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 17th day of January 1901. John Astley Ordinary. Mary Hurst Post Office

State of Georgia,

Cobb County.

Ordinary of said County, certify that I am well acquainted with Mrs. Mary Hurst, 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 17th day of January 1901.

Official Seal.

Ordinary of Cobb County.

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

Mary Hurst

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 1832.

That she is the Widow of James B. Hurst who was a soldier in Company 24th of the Georgia 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 November 1863. That he lost his life on the day of November 1863. (State here

particulars of the husband's death, when, where and from what cause) That while in the Confederate Army in the State of Virginia the deceased husband died from a wound caused by fire falling on him while in Camp in Virginia November 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 1857.

I have been paid a pension as a resident of Fuller 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. John Astley Ordinary. Mary Hurst Post Office

State of Georgia,

Cobb County.

Ordinary of said County, certify that I am well acquainted with Mrs. Mary Hurst, 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 1832

Given under my official signature and seal, this the 4th 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.

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

I, Mary Hurst, hereby authorize
John Hurst 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.

Mary Hurst [L. S.]
John Hurst

Executed in presence of

J. M. Sam

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, Mary Hurst, hereby authorize
John Hurst 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 Jan 1904.

Executed in presence of

J. M. Sam

Mary Hurst [L. S.]

Hurst Mary
Cobb County

To Those Heretofore Paid

1903.

No. 210

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

Mrs. Mary Hurst

of Cobb County,

Widow of James Hurst
 Co. F Regiment 24

JOHN W. LINDSEY,

Comptroller of Penitentiaries.

WARRANT ISSUED

1/23 1903.

AND HANDLED TO

John Hurst

ALL WARRANTS MUST BE REMITTED TO

Hurst Mary
Cobb County

TO THOSE HERETOFORE PAID.

1904.

No. 261

WIDOW'S PENSION

FOR

YEAR ENDING DECEMBER 31, 1904.

PAID TO

Mrs. Mary Hurst

of Cobb County,

Widow of James Hurst
 Co. F Regiment 24 54

JOHN W. LINDSEY,

Comptroller of Penitentiaries.

WARRANT ISSUED

1/25 1904.

AND HANDLED TO

John Hurst

ALL WARRANTS MUST BE REMITTED TO

Allowed Pensions

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES Mrs.

Mary Hurst

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 1832 That she is the Widow ofJames A. Hurst who was a soldier in Company# of the 24th Regiment of GeorgiaVolunteers, that he enlisted in said regiment on or about the month of August1862 and served in the Army up to Nov 1863 That he lost hislife on the Nov day of 1863 (State here

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

in the White, in the Confederate Army
in the State of Virginia, the deceased
husband, died from a wound caused
by fire falling from this White in Camp
in VA Nov 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 1867

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 5 day of Jan 1903. Mary Hurst Ordinary. Post Office, Monrovia

State of Georgia,

County of CobbI, John Autrey

Ordinary of said County, certify that I am well

acquainted with Mrs. Mary Hurst, who made the above affidavit and

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

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

day of Jan 913Given under my official signature and seal, this 6 day of Jan 1903.

Official Seal.

Ordinary of

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.

Mary Hurst

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 1832 That she is the Widow ofJames A. Hurst who was a soldier in Company# of the 24 Regiment of GeorgiaVolunteers, that he enlisted in said regiment on or about the month of August1862 and served in the Army up to Nov 1863 That he lost hislife on the Nov day of 1863 (State here

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

Deceased husband died from
a wound caused by fire falling on him
while in camp in Virginia 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 1867

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 11 day of Jan 1904. Mary Hurst Ordinary. Post Office, Monrovia

State of Georgia,

County of CobbI, John Autrey

Ordinary of said County, certify that I am well

acquainted with Mrs. Mary Hurst, who made the above affidavit and

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

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

day of Jan 18Given under my official signature and seal, this 11 day of Jan 1904.

Official Seal.

Ordinary of

County.

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, Mary Kurot, 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 2
day of January 1905. Mary Kurot [L. S.]
Mark

Executed in presence of _____

Mary Kurot
John Lindsey
To Those Herebefore Paid.

1905.

No. 250

WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO Mrs. Mary Kurot

of both County, _____

Widow of _____

Co. _____ Regiment _____

JOHN W. LINDSEY,
Commissioner of Prisons.

WARRANT ISSUED

192 1905.

AND HANDED TO

Only

This Pension is Payable and Payable On, at _____
and is subject to the conditions of the Pension Act.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA.

County of Cobb

PERSONALLY COMES MRS.

Mary HurstCobbwho, 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 1832

That she is the Widow of

James S. Hurst

who was a soldier in Company

5

of the

24

Regiment of

1stVolunteers, that he enlisted in said regiment on or about the month of August1862, and served in the Army up to Nov 1863. That he lost hislife on the Nov day of Nov 1863. (State here

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

Died from wound caused by his
freedom on UnionDeponent swears that she was the wife of said deceased soldier, during his service in the Army as a
soldier, and that she has never married since his death aforesaid, and that she became his wife in
the year 1857.I have been paid a pension as a resident of Cobb County for the
year ending December 31, 1904, and now apply for the pension provided by law for the year ending
December 31, 1905.

Sworn to and subscribed before me,

this 3 day of May 1905.

Ordinary.

Post Office

State of Georgia,

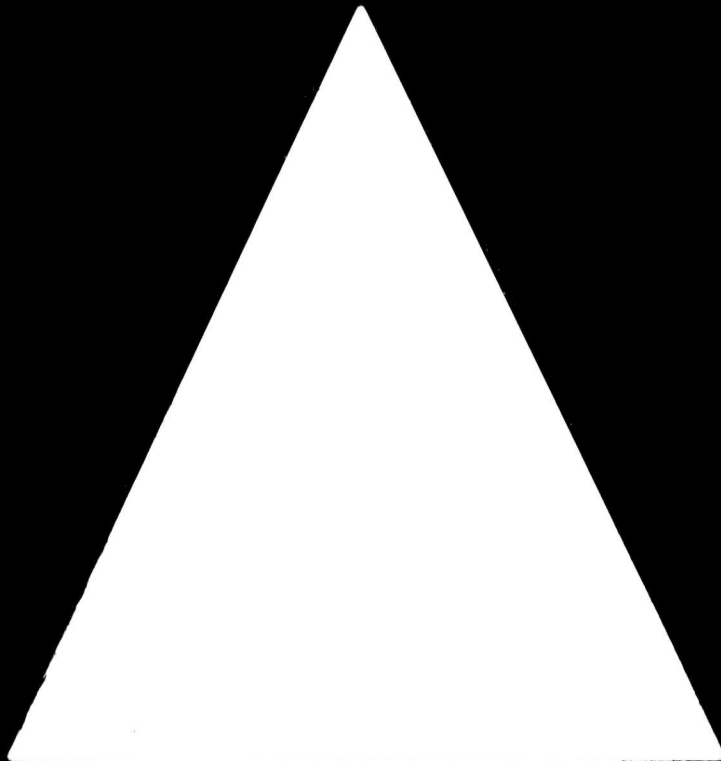
County.

I,

Ordinary of said County, certify that I am well

acquainted with Mrs. Mary Hurst, 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 3day of MayGiven under my official signature and seal, this the 3 day of May 1905.Official
Seal.Ordinary of Cobb County.NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1905.

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



Hyde, J. A.
Cobb Co.

OK for 1911

Confederate

Soldier's Application.

✓ UNDER ACT 1910.

County Robb
Name J. A. Hyde
Company 7
Regiment 1st G. Cavalry
Approved _____

J. W. LINDSEY,
Commissioner of Pensions

CHAR. F. BYRD, State Printer, Atlanta.

11/25/10

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

Cobb County.

J. A. Hyatt 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. A. Hyatt Lawrenceville Cobb Co. Ga.

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

36 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)

August 1864, Columbus Ga. into 4th Co. 26th Infantry

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

Until about April 20th 1865 about 9 months

6. When and where was your Company and Regiment surrendered or discharged from the Service?

April 26/1865 - Raleigh N.C.

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

Yes

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

I was captured a few days before surrender

a. Where was your Command when you left it?

Raleigh

b. When did you leave the Command?

c. For what cause did you leave?

d. By whose authority did you leave?

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

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

g. In what way were you prevented?

h. What effort did you make to return?

i. Were you captured during the war?

Yes

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

April 26th 1865, until surrendered and was held in prison there

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. 1865? (Make list by items and value.)

One horse \$25.00

One cow \$10.00

One wagon \$10.00

One horse \$25.00

10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov., 1865. To whom and for what price?

Nothing

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

Same as above

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

None

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

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

No

Sworn to and subscribed before me, this the

7 day of October 1910

J. A. Hyatt Ordinary,

of Cobb County.

Soldier's Application.

Confederate

UNDER ACT 1910.

County

Name

Company

Regiment

Approved

J. W. LINDSEY,
Commissioner of Pensions

WILLIAM B. WHITE, STATE PRINTER, ATLANTA

11/3-10

5861.12 10-02-1910
J. A. Hyatt
Cobb Co. Ga.

STATE OF GEORGIA, *Conover*
Pickens County.

1. What is your name and where do you reside? OP Field at

2. How long and since when have you known.....9. A. Nyd.....the applicant?

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? Maricopa, Arizona 1946

4. When, where and in what Company and Regiment did 1st Regt. N.Y. enlist during
war from 1861 to 1865? (Give date and place). 1st. 1862. 1865

5. How did you obtain your information of this Service? *Talked with him.*

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) March 1942 - 11 months

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

8. Were you personally present at the Surrender?..... *yes*

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

10. Was the applicant personally present with his Command at surrender? *No*

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

12. When did he leave his Command? 2 days before sunrise Where was his Command when he left it? Smithfield NC for what cause did he leave? There was a murder

By whose authority did he leave Jelichauk's house 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? None stated
How do you know? _____

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

15. Was applicant captured as a prisoner no If so, when and where?

In what prison was he held? and when released?

Sworn to and subscribed before me, this the 11th day of May, 1964

27 day of Sept 1910 } Chas. Miller

13. *Keener* *Ordinary* *J. S. Keener*

P.P.E

_____ County.

_____ County

Personally before me on _____ day of _____ 19____, _____ who on oath says that they are freeholders residing in said County and we know _____ the applicant for pension and we know the property that is now in the use, possession and control of himself and wife and of its cash value to wit: (Make List by items and value)

| No. of Yrs. | | (Make List of Items and Value) | |
|---------------|-------|--------------------------------|----------------|
| One old horse | Value | 35.00 | Hornshill pass |
| One horse | | 10.00 | |
| " | Cart | 25.00 | |

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

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? Wife

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

8. Was the disposition of this property made in good faith and full value? _____
or was it made to obtain a pension? _____

Sworn to and subscribed before me, this the 3rd day of Oct. 1911, at _____
 J. M. Gann Ordinary
 of _____ County

County

1. John A. Smith Ordinary of said County, certify that I know the persons John A. Smith for John A. Smith person he represents himself to be and resides in John A. Smith County. That I also know John A. Smith the witness according to the service and John A. Smith who are freeholders, that John A. Smith residents of said County and were duly sworn by me before signing the foregoing affidavit and they are truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Rolls of John A. Smith shows that John A. Smith and wife John A. Smith for 1900 a John A. Smith 1900

Sworn under and the official seal of office this 12th day of Oct 1912
J. M. Lamm Ordinary,
 of Cobb County.

NOTES:

1. Before any questions are answered the Ordinary shall answer questions 1 and 2 all responses in the following words: "I solemnly swear that I will true answers make to each question asked you and the evidence you shall give shall be the truth to the best of my knowledge and belief."
2. A candidate may only be asked one question at a time.
3. All answers must be made under the Ordinary and without aid.
4. It is against the law for property of all in the congregation, the members of the hall and with authority of the congregation to be used for any other purpose than that for which it was given.

27 day of Sept 1918
J. B. K. K. K.
J. B. K. K. K.
Ordinary, J. B. K. K. K.
of _____ County

NOTES:
1. Before any questions are answered the Ordinary shall answer questions and all witnesses in the following words:
"I do solemnly swear that you will show everyone truth in each question asked you and the evidence you
shall give shall be the truth as far as you know."
2. All witnesses must be sworn before the Ordinary and certified by him.
3. If against the property of all in his possession, use or control of self and wife, children or householders
and family.

Ingram, Hugh
 RECORDED & INDEXED
Cobb County
 4 938

Widow's Application

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

County *Cobb*
 Name *Mrs. Hugh Ingram*
 Widow of *Hugh Ingram*
 Date of Marriage *Nov. 6, 1881*
 Date of Husband's Death *Feb. 18, 1932*
 Company *9th Regt. Ga. Militia*
 Regiment
 Approved *DEC 27 1937* 1937
R. T. Fellen
 Director.

State Dept. Public Welfare,
 Atlanta, Oct. 28, 1937.

Hugh Ingram enlisted as a private in Co. G, 9th Regt. Ga. Militia July 1864. With company when it was disbanded in S. C., across the river from Augusta, Ga., Moh. 1865. Was a pensioner.

William D. Kuylenstierna
 Director Confederate Records Div.

AUG 13 1937

Ordinary's Certificate

STATE OF GEORGIA,
 Cobb
 COUNTY.

I, *Jas. J. Dandell*

that I know *Mrs. Hugh Ingram* 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

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 *27* day of *Aug* 1937.

(SEAL OF ORDINARY)

Ordinary,
 of
 County.

INSTRUCTIONS.

1. Before any questions are answered the (Ordinary shall read applicant and the witness in the following words: "You do solemnly swear that you are the person named in the foregoing affidavits, and that you are entitled to the pension for which you apply." To help you (Ord.), witness make up each of the questions asked you and the evidence you shall give will be the whole truth."
2. Only witnesses who are qualified to swear to the facts stated in the affidavits are competent to swear to the facts stated in the affidavits.
3. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by the Ordinary.
4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by the Ordinary.
5. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by the Ordinary.
6. Do not take an application from any witness who is already receiving a pension.

Hugh Ingram enlisted as a
private in Co. G, 9th Regt.
Ga Militia July 1864. With
company when it was disbanded
in S. C., across the river
from Augusta, Ga., Moh. 1865,
was a pensioner.

Director of Confederate Records
Div.

about to
1912

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.

(see Emma Perkins)

Personally appears before me, *Mrs. Hugh Ingram* 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. Hugh Ingram, 1212 Central Ave. S.E.
2. How long and since when have you been, continuously, a bona fide resident citizen of the State
of Georgia? *Seventy-seven years*
Give date, or year, of your birth. *Oct. 6, 1859* Age? *77*
3. (1) When, (2) where and (3) to whom were you married?
Nov. 6, 1881, Talbot Co. Ga. Hugh Ingram
- a. Have you married since the death of first and soldier husband? *no*
- b. When and where did your first husband die? *Feb. 18, 1932, Harris Co. Ga.*
- c. Were you residing together when he died? *Yes*
- d. If not, how long had you resided apart?
- e. Are you now a widow? *yes*
- f. Have you or your husband heretofore been paid a pension by the State? *Yes, he was*
- g. If so, when and for what cause were you or your husband placed on the roll? *husband was in*
Conf. soldier pension roll in Talbot Co. Ga. and I
drew for Oct. of year 1932.

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

28 day of *Aug*, 1937.
Jas. J. Daniell Ordinary
of *Cobb* County.
(SEAL OF ORDINARY)

Mrs. Hugh Ingram
Applicant.

Widow's Application

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

County. *Cobb*
Name *Mrs. Hugh Ingram*
Widow of *Hugh Ingram*
Date of Marriage *Nov. 6, 1881*
Date of Husband's Death *Feb. 18, 1932*
Company *9th Regt. Ga. Militia*
Regiment *9th Regt. Ga. Militia*
Approved *Jas. J. Daniell*
Director.

Ordinary's Certificate

STATE OF GEORGIA,

Cobb

COUNTY.

I, *Jas. J. Daniell*, Ordinary of said County, do certify
that I know *Mrs. Hugh Ingram* 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
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 *Aug*, 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. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1920, are entitled.
4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be
certified by such Ordinary.
5. Attach certified copy of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Fill out the back of the application carefully.
7. Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.
8. Do not take an application from any widow who is already receiving a pension.

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLANTA

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

WHEREAS:

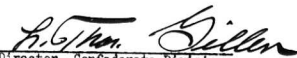
MRS. HUGH INGRAM, WIDOW OF HUGH INGRAM,

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.


Director, Confederate Division
State Department of Public
Welfare

GEORGIA TALBOT COUNTY.

In person appeared before the undersigned officer,
duly authorized to administer oaths C. Z. Hendrick
of said County, who being duly sworn deposes and says:

That deponent is 79 years of age and has been a
resident of Flint Hill District of Talbot County, Georgia,
all of his life.

That deponent knows Mrs. Emma Jenkins Ingram, widow
of Hugh Ingram, deceased, and knew Hugh Ingram, deceased,
all of deponent's life.

That the said Hugh Ingram and Emma Jenkins were
married in Talbot County, Georgia, in the winter of 1881,
and lived together as husband and wife, in the same neighbor-
hood with deponent from the date of their marriage until
the death of Hugh Ingram which occurred on the 18 day
of Feb 1932.

That the said Hugh Ingram and his wife, Emma Jenkins
Ingram were never separated, having lived together as husband
and wife for the entire period from the date of their marriage
to the date of the death of Hugh Ingram.

That the said Mrs. Emma Jenkins Ingram has been a
resident of the State of Georgia for the past 60 years to
the personal knowledge of deponent.

That the said Mrs. Emma Jenkins Ingram is now a
widow and has not remarried since the death of her soldier
husband, Hugh Ingram.

Sworn to and subscribed before
me this July 27th, 1937.

C. Z. Hendrick
ORDINARY TALBOT COUNTY, GA.

GEORGIA TALBOT COUNTY.

In person appeared before the undersigned officer,
duly authorized to administer oaths C. E. Garrett
of said County, who being duly sworn deposes and says:

That deponent is 68 years of age and has been a
resident of Flint Hill District of Talbot County, Georgia,
all of his life.

That deponent knows Mrs. Emma Jenkins Ingram, widow
of Hugh Ingram, deceased, and knew Hugh Ingram, deceased,
all of deponent's life.

That the said Hugh Ingram and Emma Jenkins were
married in Talbot County, Georgia, in the winter of 1881,
and lived together as husband and wife, in the same neighbor-
hood with deponent from the date of their marriage until
the death of Hugh Ingram which occurred on the 18 day
of Feb 1932.

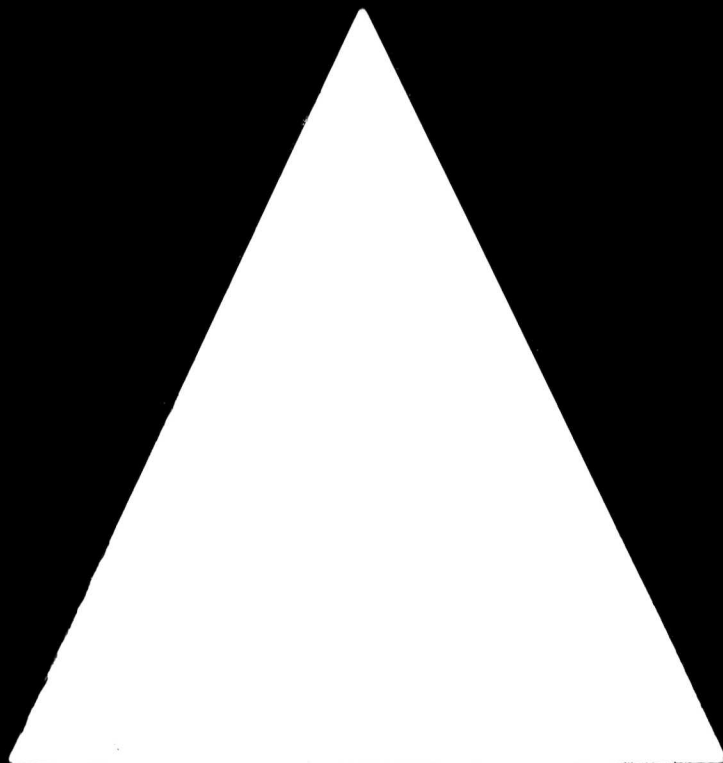
That the said Hugh Ingram and his wife, Emma Jenkins
Ingram were never separated, having lived together as husband
and wife for the entire period from the date of their marriage
to the date of the death of Hugh Ingram.

That the said Mrs. Emma Jenkins Ingram has been a
resident of the State of Georgia for the past 60 years to
the personal knowledge of deponent.

That the said Mrs. Emma Jenkins Ingram is now a
widow and has not remarried since the death of her soldier
husband, Hugh Ingram.

Sworn to and subscribed before
me this July 27th, 1937.

C. E. Garrett
ORDINARY TALBOT COUNTY, GA.



POWER OF ATTORNEY.
STATE OF GEORGIA.

Know all Men by These Presents, That I, John L. Ingers,
COUNTY, Wilkes

Have all Men by These Presents, That I, John L. Ingers

County in said State, do hereby appoint John L. Ingers
of Marion Co. Wilkes

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 28th day of August, 1865.

John L. Ingers
Subscribed in presence of us:

John L. Ingers
Marion

DIRECTIONS:

If aforesaid, equal amount by John L. Ingers or John L. Ingers to Marion Co., and oblige.

John L. Ingers
Marion

Ingers, John
3264
Cable Co.

SOLDIER'S PENSION
1895.

Name John L. Ingers
County Wilkes
Disability Shot Leg
Amount, \$ 50

3/27 1895.
RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO

John L. Ingers

POWER OF ATTORNEY.
STATE OF GEORGIA.

Catta COUNTY.

Know all Men by These Presents, That I,

J. L. Ingers
of *Muscogee* Co., hereby appoint *B. J. Ingers*

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 *August*, 1865.

J. L. Ingers
Subscribed in presence of us:

J. M. Ingers
Chas. Ingers

J. M. Ingers
Chas. Ingers

DIRECTIONS:

If allowed, send amount by *Western Union* or in *check* to me at *Muscogee*, Ga., and oblige

Edw. Ingers
Aug. 1st

Ingers, J. L.
3264
Catta Co.

SOLDIER'S PENSION
1895.

Name *J. L. Ingers*
County *Catta*
Disability *Shot*
Amount, \$ *50*

3/27 1895.
RICHARD JOHNSON,
Secretary Revenue Department.

WARRANT HANDED TO

J. M. Ingers
Geo. W. Harrison, State Printer, Atlanta.

Form A

COUNTY.

Know all Men by These Presents, That I,

County in said State, do hereby appoint

Manilla, Ga. _____, my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to, from the State of Georgia by reason of the injury done to me 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 August 1895

Executed in presence of us

DIRECTIONS

If allowed, send amount by Express Money order or Check to me
at Maricopa Ca. and oblige.

E. W. Gray, atty. in fact.

For Use of Applicants Who Have Not Heretofore Drawn

STATE OF GEORGIA.

PERSONALLY appears F. L. Lises

County, State of Georgia, who being duly sworn says on oath that he was born on the

day of June 1844, that he is a bona fide citizen and resident of Georgia, and has been continuously since the 4th day of June 1844.

that he enlisted in the military service of the Confederate States (or the State of

) during the war between the States, and served as a _____
in Company E of 8th Regiment
of Georgia Cavalry, Kennesaw Brigade; that whilst engaged in
such military service, at the battle of John's Island
of S. C., on the 9th day of July, 1864 he was

[illegible]

Deponent desires to participate in the benefits of the Act approved October 24th, 1887, and the Acts amendatory thereof, and makes application for the allowance to which he is entitled for the year thereunder, ending October 26th, 1895.

Sworn to and subscribed before me, this the

28th of August 1895.
J. L. Stone
Ordinary.

NOTE.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability. If claim is based on disease, give full and connected history of disease, tracing it directly to the service.
NOTE.—Do not trouble to mention wounds which do not disable.
NOTE.—The Ordinary will see that all blank spaces are filled when the affidavits are made.

SOLDIER'S PENSION

1895.

Xiam

Cont

Diminability

Abstract

RICHARD JOHNSON

Secretary Executive Department

WARRANT HANDED TO

15

Form 9

County.

severally say, under oath, that they are personally well acquainted with F. J. Dugan whose application is herewith presented for a pension, that he served in Company "E" of the 1st Regiment of Tham's

[illegible]

We personally know above stated facts. We were with him in the army and have known him ever since. He was honorably discharged or retired from the service on 26th day of April 1906. Applicant is permanently disabled as stated and has been so to our certain knowledge ever since 1864. We have no interest in the recovery of a pension by him.

287 day of August 1895.
M. Stone
ORDINARY.

8. All blank spaces must be filled when signed.

Turn to and report to them on the 1st of 10th
of the 2nd. Mr. M. and I were the first to
be with you in the 1st of 10th.

Form 1

STATE OF GEORGIA

Capt. County.

PERSONALLY comes before me James M. Stone, Ordinary of said County, Wm. L. Egbert and C. A. Beal, both known to me as reputable physicians of said county, who being severally sworn, say on oath, that they have carefully examined Ed. Leger, and after such personal examination, say that the present condition of applicant is as follows: Not sane for

at some time with a ball in his left leg, thigh, and from all evidences, appearances, and examinations, some part of the bone has been taken out, which renders the leg left by useless, that the right and subject rheumatic aches, and pains of which he complains in said leg, which Mr. Oliver are caused solely by the gun shot mentioned above. Locomotion is impeded by said shot and said rupture, and condition is no doubt permanent. Mr. Oliver further states under the law and in said condition Mr. Singer is fully entitled to a Pension.

We have treated applicant professionally for twelve years, and his condition, as above stated, does not arise from any hereditary or congenital cause, nor from any vicious or intemperate habits.

Sworn to and subscribed before me, this
28th day of August 1895.
J. H. Stone
Ordinary

NOTE 1.—The physicians will state fully the extent of the wound, and then give facts to show the extent of the disability resulting therefrom.

NOTE 2.—If claim is for disability resulting from disease, state how the disease is known to result from the service as a soldier. Also state how long physicians have known and treated applicant.

NOTE 3.—The physicians will be careful to fill every blank space in oath.

STATE OF GEORGIA,
Cobb County.

I, John M. Stoney, Ordinary of said County,
do certify that I am well acquainted with E. J. Dyer, the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his
said affidavit are true, and he is disabled, as he claims, and I know he is the individual he represents
himself to be, and that he resides in this County. I also certify that the foregoing witnesses, to-wit:
W. A. Amfield, R. C. Brown, and John J. Dyer
are persons of respectability, and that their statements are worthy of full credit and belief.

Given under my official signature and seal this 28th day of August, 1900.

J. M. Glavin
Ordinary 100th County.

10

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize _____

of _____

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

by _____

at _____

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

day of _____ 1897.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize _____

of _____

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

by _____

at _____

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

day of _____ 1898.

[L. S.]

Executed in presence of _____

Engel, H. J.
ACTED IN OCT. 1897.
(For Those Already Enrolled.)

No. 1768

INVALID

SOLDIER'S PENSION.

1897.

Name *H. J. Engel*
County *Cobb*
Disability *Left thigh*
Amount, \$ *50*

1897.

42.3

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

affid

NOT A VALIDATION, STATE ARCHIVES, ATLANTA.

No data

SOLDIER'S PENSION.

1898.

Name *H. J. Engel*
County *Cobb*
Disability *Left thigh*
Amount, \$ *50*

1898.

42.3

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

affid

NOT A VALIDATION, STATE ARCHIVES, ATLANTA.

Re-write

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Personally appears

Cobb County. *J. J. Inger* 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 *7* day of *June* 18 *64*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *E*, of *1*th Regiment of *Volunteers*, *S.C.*'s Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *9* day of *July* 1864, he was wounded, injured or diseased as follows:

By bullet, struck left thigh fracturing bone and driving said bullet so that said deponent was rendered practically incompetent to perform the 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 pension to which he is entitled for the year ending October 26th, 1897. I have heretofore under said law as a resident of *Cobb* county been allowed an invalid pension of

Sworn to and subscribed before me, this, the

day of

1897.

NOT OFFICE

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

1897.

Ordinary

County.

AM
Faint
and
here

*Loc. 1st Regt. Pa. Regulars
and Co. J. B. Bather, Gr. Reg. Artillery*

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears

J. J. Inger 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 *7* day of *June* 18 *64*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *E*, of *1*th Regiment of *Volunteers*, *Harrison's* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *9* day of *July* 1864, he was wounded, injured or diseased as follows:

By gun shot in left thigh and bursting bone and rendering applicant practically incompetent to perform the 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 pension to which he is entitled for the year ending October 26th, 1897. I have heretofore under said law as a resident of *Cobb* county been allowed an invalid pension of

\$50.

Dollars, for the year 1897.

Sworn to and subscribed before me, this, the

day of

1898.

NOT OFFICE

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

1898.

Ordinary

County.

AM
Faint
and
here

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

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

by _____

at _____

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

day of _____ 1899.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

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

by _____

at _____

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

day of _____ 1900.

[L. S.]

Executed in presence of _____

Ingraham, J. J.
Cobb Co.

COUS SECTION 126.
(For Those Already Enrolled.)

No. *2671*

INVALID
SOLDIER'S PENSION.
1899.

Name *J. J. Ingraham*
County *Cobb*
Disability *Leg*
Amount, \$ *50*
2/20 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
affid

REC. W. HARRISON, STATE PRINTER, ATLANTA

No data

Ingraham, J. J.
Cobb Co.

COUS SECTION 126.
(For Those Already Enrolled.)

No. *4500*

INVALID
SOLDIER'S PENSION.
1900.

Name *J. J. Ingraham*
County *Cobb*
Disability *Leg*
Amount, \$ *50*
Warrant issued *Mar 8* 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
affid

REC. W. HARRISON, STATE PRINTER, ATLANTA

No data

Co. B, 1st Regt. - In Regulars
and Co. D, 28th Batta. In
Leige artillery

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears Tr. J. Suger 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 7 day of June 1844; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a private in Company 21, of 13th Regiment of Co. Reg. Volunteers, Harrison's Brigade; that whilst engaged in such military service in the State of S. C., on the 9 day of July 1864, he was wounded, injured or diseased as follows:

By gun-shot striking left thigh and bursting the bone thereby rendering applicant practically incompetent to perform the ordinary manual avocations of life.

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1899. I have heretofore under said law as a resident of Cobb County been allowed an invalid pension of \$50 Dollars, for the year 1898.

Sworn to and subscribed before me, this, 15th day of Feb'y 1899, at Tr. J. Suger Post Office Dunwoody, Ga.

Notary Public for the 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 7 day of June 1844; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a private in Company 21, of 13th Regiment of Co. Reg. Volunteers, Harrison's Brigade; that whilst engaged in such military service in the State of S. C., on the 9 day of July 1864, he was wounded, injured or diseased as follows:

STATE OF GEORGIA,
Cobb County.

I, J. M. Stone Ordinary of said County, do certify that I am well acquainted with Tr. J. Suger the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 Feb'y 1899.

Ordinary Cobb County.

Co. B, 1st Regt. - In Regulars and
Co. D, 28th Batta. In Leige artillery

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears Tr. J. Suger of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State and County, and has resided therein continuously ever since the 7 day of June 1844; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a private in Company 21, of 13th Regiment of Co. Reg. Volunteers, Harrison's Brigade; that whilst engaged in such military service in the State of S. C., on the 9 day of July 1864, he was wounded, injured or diseased as follows:

By gun-shot striking left thigh and bursting the bone thereby rendering applicant practically incompetent to perform the ordinary manual avocations of life.

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1900. I have heretofore under said law as a resident of Cobb County been allowed an invalid pension of \$50 Dollars, for the year 1899.

Sworn to and subscribed before me, this, 2nd day of March 1900, at Tr. J. Suger Post Office Dunwoody, Ga.

Notary Public for the 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 7 day of June 1844; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a private in Company 21, of 13th Regiment of Co. Reg. Volunteers, Harrison's Brigade; that whilst engaged in such military service in the State of S. C., on the 9 day of July 1864, he was wounded, injured or diseased as follows:

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 2nd day of March 1900.

Ordinary Cobb County.

FOR APPLICATIONS HEREFOROBE ATTORNEY GENERAL

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears T. J. Suger 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 7th day of June 1864; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a private in Company A, of 1st Regiment of Cal. Reg. Volunteers, Harrison's Brigade; that whilst engaged in such military service in the State of Fla., on the 9th day of July 1864, he was wounded, injured or diseased as follows:

By gun shot striking left thigh and bursting the bone thereby rendering applicant practically incompetent to perform the ordinary manual avocations of life

Deponent makes application for the pension to which he is entitled for year ending October 26th, 1901. I have heretofore under said law as a resident of Cobb County been allowed an invalid pension of \$50 Dollars, for the year 1900.

Sworn to and subscribed before me, this the 10th day of January 1901. Post-office John Anthony

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

STATE OF GEORGIA,

Cobb County.

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

Given under my official signature and seal, this 10th day of January 1901.

John Anthony Ordinary Cobb County.



BOHEK OF VLOKIFEA

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears T. J. Suger 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 7th day of June 1864; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a private in Company A, of 1st Regiment of Cal. Reg. Volunteers, Harrison's Brigade; that whilst engaged in such military service in the State of Fla., on the 9th day of July 1864, he was wounded, injured or diseased as follows:

By gun shot striking left thigh and bursting the bone thereby rendering applicant practically incompetent to perform the ordinary manual avocations of life

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1902. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of \$50 Dollars, for the year 1901.

Sworn to and subscribed before me, this the 10th day of January 1902. Post-office John Anthony

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

STATE OF GEORGIA,

Cobb County.

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

Given under my official signature and seal, this 10th day of January 1902.

John Anthony Ordinary Cobb County.

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

BOHEK OF VLOKIFEA

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 2

day of Jan 1903.

F. J. Lindsey [L. S.]

Executed in presence of

James McManis

(FOR THOSE ALREADY ENROLLED.)

No. 2254

DISABLED

SOLDIER'S PENSION

1903.

Name F. J. Lindsey

County Cherokee

Co. A Regiment 15th

Disability 100

Amount, \$ 50

1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

John W. Lindsey

Gen. W. Harrison Shaw Printer, Atlanta.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 5th

day of Jan 1904.

F. J. Lindsey [L. S.]

Executed in presence of

(FOR THOSE ALREADY ENROLLED.)

No. 335

DISABLED

SOLDIER'S PENSION

1904.

Name F. J. Lindsey

County Cherokee

Co. A 1st Regiment 4th

Disability 100

Amount, \$ 50

JAN 25 1904.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

John W. Lindsey

Gen. W. Harrison Shaw Printer, Atlanta.

No data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.
Personally appears F. L. Dugan 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 1844; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company 1, of 1th Regiment of 1st Volunteers, Dugan's Brigade; that whilst engaged in such military service in the State of Georgia, on the 9th day of July, 1864, he was wounded, injured or diseased as follows:

By being shot through left thigh and bursting the bone thereby rendering applicant incapable to perform the manual occupations of life.

Deponent makes application for the pension to which he is entitled for the year ending October 30th, 1903. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of \$37.50 Dollars, for the year 1902.

Sworn to and subscribed before me, this the 2nd day of Jan, 1904. Post-office Anytown

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

STATE OF GEORGIA,

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

Given under my official signature and seal, this 2 day of Jan, 1904.
John Dugan Ordinary Cobb County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.
Personally appears F. L. Dugan 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 Jan, 1844; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company 1, of 1th Regiment of 1st Volunteers, Dugan's Brigade; that whilst engaged in such military service in the State of Georgia, on the 9th day of July, 1864, he was wounded, injured or diseased as follows:

By being shot through left thigh and bursting the bone thereby rendering applicant incapable to perform the manual occupations of life.

Deponent makes application for the pension to which he is entitled for the year ending October 30th, 1904. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of \$37.50 Dollars, for the year 1903.

Sworn to and subscribed before me, this the 5th day of Jan, 1904. Post-office Anytown

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

STATE OF GEORGIA,

Cobb County.
I, John Dugan Ordinary of said County, do certify that I am well acquainted with F. L. Dugan the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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, 1904.
John Dugan Ordinary Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bob COUNTY }
I, *F. J. Linger* hereby authorize
John W. Lindsey of _____
to receive and receipt for the pension paid hereon, and request that he remit same, to
by _____

at _____
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 3

day of *Jan* 1905. *F. J. Linger* [L. S.]

Executed in the presence of
J. M. Gamm

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bob COUNTY }
I, *F. J. Linger* hereby authorize
John W. Lindsey of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
by _____
at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 8
day of *Jan* 1905. *F. J. Linger* [L. S.]

Executed in the presence of
J. M. Gamm

Linger, F. J.
Bob
CROSS SECTION 1246
(FOR THOSE ALREADY ENROLLED.)
No. 333
DISABLED
SOLDIER'S PENSION
1905.
Name *F. J. Linger*
County *Bob*
Co. *A* Regiment *1st*
Disability *100*
Amount, \$ *10*
Jan 23 1905.
John W. Lindsey,
Commissioner of Pensions.
WARRANT HANDLED TO
Andy
no date

Linger, F. J.
Bob
CROSS SECTION 1246
(FOR THOSE ALREADY ENROLLED.)
No. 272
DISABLED
SOLDIER'S PENSION
1906.
Name *F. J. Linger*
County *Bob*
Co. *7-49* Regiment
Disability *100*
Amount, \$ *10*
1906.
John W. Lindsey,
Commissioner of Pensions.
WARRANT HANDLED TO
no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb COUNTY.

Personally appears H. J. Ingers 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 7 day of June 1864; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company A, of 12th Regiment of Ca. Regt. Volunteers Harrison's Brigade; that whilst engaged in such military service in the State of S. C., on the 7th day of July 1864, he was wounded, injured or diseased as follows:

By him that striking left thigh, and causing the bone to be displaced, and he was unable to perform the ordinary manual avocations of life

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1905. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of 50 Dollars, for the year 1904.

Sworn to and subscribed before me, this the 1st day of June 1905.

Post-office Mont.

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

STATE OF GEORGIA,

Cobb COUNTY.

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

Given under my official signature and seal, this 1st day of June 1905.

Ordinary John H. Ingers County.

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

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

AMT
FOOT
SHE
HERE

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Cobb County.

Personally appears H. J. Ingers 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 18 day of June 1864; that he enlisted in the military service of the Confederate States, (or of the State of Georgia) during the war between the States, and served as a Private in Company A, of 12th Regiment of Ca. Regt. Volunteers Harrison's Brigade; that whilst engaged in such military service in the State of Georgia, on the 7th day of July 1864, he was wounded, injured or diseased as follows:

Left leg disabled

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1905. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of 50 Dollars, for the year 1905.

Sworn to and subscribed before me, this the 1st day of June 1905.

Post-Office Mont.

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

State of Georgia,

Cobb County.

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

Given under my official signature and seal, this 1st day of June 1905.

Ordinary John H. Ingers County.

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

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

AMT
FOOT
SHE
HERE

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, F. J. Linger, hereby authorize

John Lindsey of

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

by

at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 10

day of January 1907.

Executed in presence of

[L. S.]

Chas. H. G.
Coll. Co.,

(FOR THOSE ALREADY ENROLLED)

No. 223

DISABLED
SOLDIER'S PENSION
1907.

Name F. J. Linger
County Book
Co. E. 1st Regiment A. 186
Disability Left leg
Amount, \$ 50

JAN 21 1907

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Gen. W. H. Lindsey, North Platte, Nebraska.

no etc

FOR THE STATE OF GEORGIA

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Cobb County.

Personally appears F. J. Ingers of Cobb

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of 18; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company A. E. of 14th Regiment of Georgia Volunteers' Brigade; that whilst engaged in such military service in the State of Georgia, on the 1st day of 1864, he was wounded, injured or diseased as follows:

Lieut. Lieut. Duval

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1907. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of 50 Dollars, for the year 1906.

Sworn to and subscribed before me, this the 10 day of January, 1907. F. J. Ingers Postoffice Monroe

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

State of Georgia,

Cobb County.

I, John Hurley Ordinary of said County,

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

Given under my official signature and seal this 10 day of January, 1907.

John Hurley County.

AM.S.
2007
and
1897

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

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

County, Cherokee

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

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

John J. Lindsey, Cherokee Co. Ga.

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

Eight 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)

August 1863, Marietta, Ga. Co. B, 1st Regt. Ga. Inf.

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

Until April 24, 1865

6. When and where was your Company and Regiment surrendered or discharged from the Service?

April 24, 1865, Cumminsborough, N. C.

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

Yes

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

I was present

a. Where was your Command when you left it?

At Cumminsborough, N. C.

b. When did you leave the Command?

Johnson, Surrendered April 24/65

c. For what cause did you leave?

By whose authority did you leave?

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

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

g. In what way were you prevented?

h. What effort did you make to return?

i. Were you captured during the war?

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

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

2 Horses, Value 200.00, Household Goods, 25.00

1 Cow, 25.00, 1 Hog, 15.00, Total 265.00

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

Sold 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)

2 Horses, Value 115.00, Household Goods, 20.00

1 Cow, 25.00, 2 Hogs, 20.00, Total 180.00

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

Very little, from 30

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

Yes

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

Yes, and was now drawing on United States Pension

Sworn to and subscribed before me, this the

21st day of April, 1910

John J. Lindsey

of Cherokee County.

Soldier's Application.

UNDER ACT 1910.

County

Name

Residence

Register of

Approved

J. W. LINDSEY,
Commissioner of Pensions.

THAS F. BIRTH, STATE PRINTER, ALBANY.

QUESTIONS FOR WITNESS AS TO SERVICE

STATE OF GEORGIA,

County,

Coch
H. A. Barfield of said State and County is hereby presented as a witness in support of the application of J. J. Leger for the pension provided by the Act of 1910, in said State, and after being sworn true and answers to the questions propounded answers as follows:

1. What is your name and where do you reside?
H. A. Barfield, Monksville, Ga.
2. How long and since when have you known J. J. Leger the applicant?
Over 60 years
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know?
Coch County, near Rome
I know him
4. When, where and in what Company and Regiment did J. J. Leger enlist during war from 1861 to 1865? (Give date and place)
August 1863, Monksville, Ga. 1st Regt. of the same Co. and Regiment
5. How did you obtain your information of this Service?
I was a member of the same Co. and Regiment
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date)
From August 1863 to April 26, 1865
7. When and where was his Command surrendered or discharged (give date and place)
April 26, 1865 - at Gretna, Virginia, U.S.
8. Were you personally present at the Surrender?
Yes
9. If not, where were you and how came you there?
I was present
10. Was the applicant personally present with his Command at surrender?
Yes
11. If not where was he and how came him there?
He was present
12. When did he leave his Command?
Surrender April 26, 1865 Where was his Command when he left it?
for what cause did he leave?
By whose authority did he leave and how long was he granted leave? How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically)
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 1st day of May 1922 at Monksville Ga.
J. J. Leger Ordinary
of Coch County.

STATE OF GEORGIA,

County,

Ordinary of said County, certify that I know H. A. Barfield who on oath says that they are freeholders residing in said County, and we know J. J. Leger the applicant for pension and we know the property that is now in the use, possession and control of himself and wife and of her heirs, value to wit: (Make list of lands and value.)
2 acres 200
2 negroes 200

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov 1906? (State fully by items).
None
2. When and to whom was it sold or given to?
3. What was the price paid or stated to be paid?
4. What relation is the party to applicant?
5. What disposition was made of the proceeds of the sale?
6. Was the disposition of this property made in good faith and full value?
or was it made to obtain a pension?
Sworn to and subscribed before me, this 1st day of May 1922 at Monksville Ga.
J. J. Leger Ordinary
of Coch County.

ORDINARY'S CERTIFICATE.

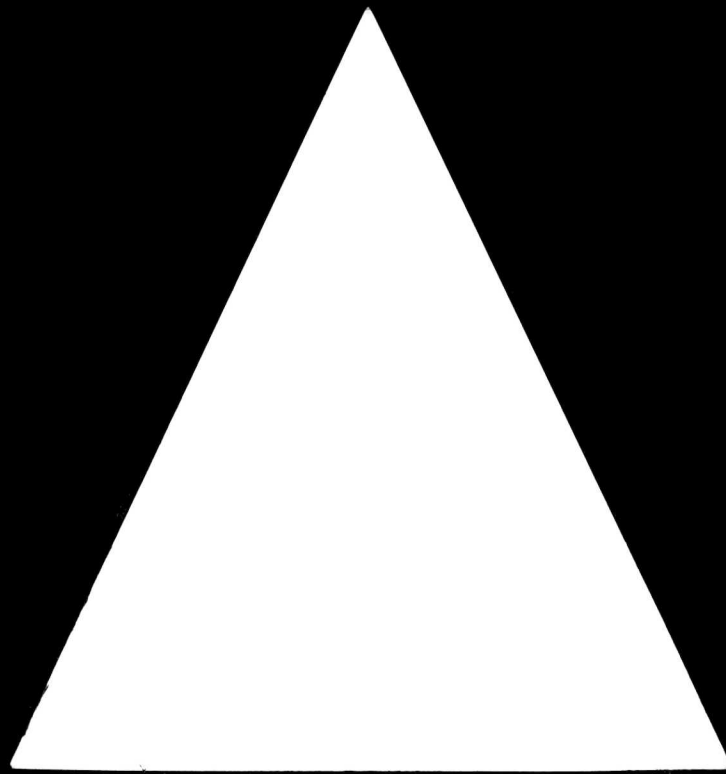
STATE OF GEORGIA,

County,

Ordinary of said County, certify that I know the applicant J. J. Leger for Pension is the person he represents himself to be and resides in said County. That I also know H. A. Barfield the witness swearing to the service and H. A. Barfield 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 Coch shows that and wife value for tax is in 1906 \$7.00 for 1908 \$7.00 for 1916 \$200
Sworn under my seal and official seal of office this 1st day of May 1922
J. J. Leger Ordinary
of Coch County.

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words which shall be the whole oath, to wit: 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 as all in his possession, use or control of said and wife, affidavit of freeholders necessary.

Signature: *J. M. Gann*
Date: *1912*
City: *St. Louis*
State: *Mo.*
Country: *U.S.A.*



POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby 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 _____

M.B. - Report to me as to this applicant's true story

Irrelan, P.O.

No. *2123*
Cobb County

INDIGENT PENSION

1897.

Name

B. A. Irrelan

County

Cobb

Approved

7/1

1897.

WARRANT HANDED TO

Applicant

CHAS. V. HARRISON, STATE PRINTER, ATLANTA.

11/16/97

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 _____ 1897.

Executed in presence of

W.B. - Report to me as to this Applicant. J.M. Stone

Irishman, C.D.

Cast No. 2/123

INDIGENT PENSION

1897.

W.B. Irishman
Cobb

1897.

7/11

WARRANT HANDLED TO

Applicant

1/16/197

Questions for Applicant.

STATE OF GEORGIA,

Cobb 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?
W.B. Irishman, Smyrna, Cobb Co.
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State?
Smyrna, Cobb Co. Ga. - for 1 1/2 years
3. When and where were you born?
July 19th 1826 - Ireland Co. N.C.
4. When and where and in what company and regiment did you enlist or serve?
April 1864 - Cobb Co. - Co. D. 4th Regt. Ga. & Trans.
5. How long did you remain in such company and regiment?
until April 1865
6. For how long a period did you discharge regular military duty?
One year
7. When, where and under what circumstances were you discharged from service?
was not discharged till close of war
8. What is your present occupation?
farmer, when busy
9. How much can you earn (gross) per annum by your own exertions or labor?
\$100 - 1200 per year
10. What has been your occupation since 1865?
farmer when I could work
11. Upon which of the following grounds do you base your application for pension, viz.: first "age and poverty," second "infirmary and poverty" or third "blindness and poverty"?
on 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 am now nearly 71 years of age - have lost my hearing & my eyesight and cannot work. No property, no income - Can not do work by me
13. What property, effects or income do you possess and its gross value?
No property, no income
14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any, did you make of same?
I had a piece of land and some little stock worth about \$1000 or \$1300 - had to dispose of them to pay my debts, now have nothing
15. In what County did you reside during those years and what property did you then return for taxation?
I resided in Cobb Co. - I disposed of my property and of the same in 1890
16. How were you supported during the years 1895 and 1896?
some by my own work and by my own
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?
probably \$125 - \$20 or \$25
18. What was your employment during 1895 and 1896? What pay did you receive in each year?
worked a little in garden & farm - \$15. or \$20
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead?
Yes - Wife, daughter and myself - some by their work and some by my son - No homestead
20. Are you receiving any pension, if so what amount and for what disability?
No pension

Sworn to and subscribed before me this

day of

1897.

Ordinary.

of

Cobb County.

Applicant.

Every Question MUST be Answered.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA.

County.

L. J. Kehely of said State and County, having been presented as a witness in support of the application of B. O. Inman 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? L. J. Kehely
Anyona, Cobb County, Ga.
2. Are you acquainted with B. O. Inman, the applicant, is of how long have you known him? Yes - for 30 years or more
3. Where does he reside, and how long has he been a resident of this State? Anyona Cobb County Ga - for 30 years or more
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? I do know of it - I was in the Army with him
5. When, where and in what company and regiment did he enlist? April 1864
In Cobb Co. - Co. D. 1st Regt. Ga. Drums
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? One Year
- Served faithfully - was relieved at close of war

8. What property, effects or income has the applicant? (Give your means of knowledge.)
He has nothing - I saw his neighbor and hear him say for many years

9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if any did he make of same? He owned \$200. or \$300. of property in 1895 or 1896 - he has disposed of it to his son

10. What is the applicant's occupation and physical condition?
Former when he worked - his physical condition is bad - aged infirm and broken down

11. Is the applicant unable to support himself by labor of any sort, if so, why?
He is - because of age, disease, infirmity and no income

12. How was he supported during the years 1895 and 1896? by his son and a little by his own work

13. What portion of his support for these two years was derived from his own labor or income?
Very little by labor - no income

14. Give full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? He is 71 years of age - diseased, infirm and broken down - unable to work and no income

15. What interest have you in the recovery of a pension by this applicant? None
Sworn to and subscribed before me, this 8th day of May 1897. L. J. Kehely Witness.
J. M. Stone Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

County.

Personally came before me John W. McKens and J. M. Stone, both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully B. O. Inman, applicant for pension under the Act of 1894, and after

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

Have known B. O. Inman for 8 years. He is a great sufferer of muscular rheumatism and Obliquus is able to walk on ground. Confirmed to have a great deal of the trouble. He also has some signs of the right leg. He also has a condition which renders him unable to perform any work. 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 13 day of May 1897.

J. M. Stone Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County.

I, J. M. Stone, Ordinary in and for said County, hereby certify that the applicant B. O. Inman resides in said County, and is a bona fide resident of this State on the first day of January, 1894, and that the witnesses, viz: L. J. Kehely

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 heron prescribed, and that the full text of the affidavits was read to the applicant and witnesses before same was signed.

I further certify that the tax digests of Cobb County show that applicant returned for taxation in his name in 1895 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 13th day of May 1897.

J. M. Stone 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, *B. O. Ireland* hereby authorize *John Stone*
Manitoway Ga. of
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 *31st*
day of *January* 1898.
B. O. Ireland [L. S.]
Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb County. }
I, *B. O. Ireland* hereby authorize
J. G. Hamby of *Manitoway Ga.*
to receive and receipt for the pension allowed, and request that he remit same to
me at
by *him*

Witness my hand and seal this *19th* day of *January* 1899.

Executed in presence of
John Stone } *B. O. Ireland* (L. S.)

(For Those Already Enrolled.)

NO. *2579*

INDIGENT

SOLDIER'S PENSION,

1898.

Name *B. O. Ireland*
County *Cobb*

WARRANT ISSUED

July 8 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

John Stone
GEO. WOODBURN, STATE PRINTER, ATLANTA.

No data

Ireland, B. O.,
Cobb Co.

9032 REG. 1294.

(For Those Already Enrolled.)

No. *2503*

INDIGENT

SOLDIER'S PENSION,

1899.

Name *B. O. Ireland*
County *Cobb*

WARRANT ISSUED

1/21 1899

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

J. G. Hamby
GEO. WOODBURN, STATE PRINTER, ATLANTA.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears *B.O. Ireland* 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* *March* *1841*; that he is *72* years old and by occupation a *Farmer*; that he enlisted in the military service of the Confederate States (or of the State of *Ga.*) during the war between the States, and served for the term of *18 Mos.* in Company *B*, of *8th Regt Ga Res*

follows: *On account of age infirmity and disease he is deemed incompetent to perform labor* that his property consists of the following items *Nothing*

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1898. I have heretofore as a resident of *Cobb* county been allowed a pension for the year 1897

Sworn to and subscribed before me, this, the *31st* day of *Jan* 1898. *B.O. Ireland* Ordinary.

State of Georgia,

Cobb County.

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

Given under my official signature and seal, this *31st* day of *Jan* 1898. *J.M. Stone* Ordinary *Cobb* County.



NOTE.—The blank spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears *B.O. Ireland* 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* *March* *1840*; that he is *72* years old and by occupation a *Farmer*; that he enlisted in the military service of the Confederate States (or of the State of *Ga.*) during the war between the States, and served for the term of *18 Mos.* in Company *B*, of *4th Regiment of*

follows: *On account of age infirmity and poverty he is unable to support himself* that his property consists of the following items *Nothing*

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1899. I have heretofore as a resident of *Cobb* county been allowed a pension for the year 1898

Sworn to and subscribed before me, this, the *19th* day of *Jan* 1899. *B.O. Ireland* Ordinary. *Smymna Ga.*

State of Georgia,

Cobb County.

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

Given under my official signature and seal, this *19th* day of *Jan* 1899. *J.M. Stone* Ordinary *Cobb* County.



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

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb County, }
I, B. O. Ireland hereby authorize
J. M. Stone of Monetta Ga
to receive and receipt for the pension allowed, and request that he remit same to
by him at one

Witness my hand and seal, this 25 day of July 1900.

B. O. Ireland [L. S.]

Executed in presence of

J. H. Harty

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County, }
I, B. O. Ireland hereby authorize J. Ireland
of Anyona of
to receive and receipt for the pension allowed and request that he remit same to
by me at Anyona
hand

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

B. O. Ireland [L. S.]
must

Executed in presence of

Jas M Gann

CODE SEC. 1284.

(For These Already Enrolled.)

NO. 2637

INDIGENT

SOLDIER'S PENSION,

1900.

Name B. O. Ireland

County Cobb

WARRANT ISSUED

July 26 1900.

JOHN. W. LINDSEY,

Commissioner of Pensions.

WARRANT HAND TO

Jul 3

JOHN W. LINDSEY, State Printer, Atlanta.

No date

Ireland, B. O.
Cobb Co.

CODE SECTION 1284

(For These Already Enrolled.)

NO. 184

INDIGENT

SOLDIER'S PENSION.

1901.

Name B. O. Ireland

County Cobb

WARRANT ISSUED

Jan 15 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HAND TO

B. O. Ireland

JOHN W. LINDSEY, State Printer, Atlanta.

No date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears B. O. Ireland 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 _____ 1840; that he is 73 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 18 Mos. in Company D, of 4th Regiment of Geo. a Reserves; that his physical condition is as follows: On account of age, infirmity and poverty he is unable to support himself; that his property consists of the following items _____

Nothing

of the value of _____ 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 1892.

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

Ordinary.

State of Georgia,

Cobb County.

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

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears B. O. Ireland 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 _____ 1840; that he is 75 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 18 Mos. in Company D, of 4th Regiment of Georgia Reserves; that his physical condition is as follows: On account of age, infirmity and poverty he is unable to support himself; that his property consists of the following items _____

Nothing

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

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

Sworn to and subscribed before me, this the 9th day of January, 1901, B. O. Ireland x
John Dwyer Ordinary.

STATE OF GEORGIA,

Cobb County.

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

Given under my official signature and seal, this 9th day of January, 1901.

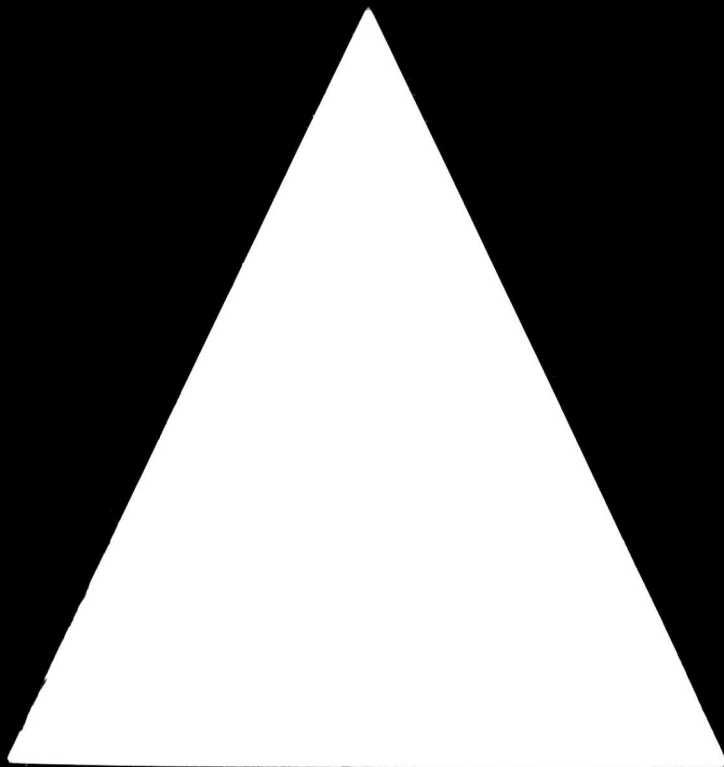


Ordinary John Dwyer County.

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

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

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



POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize _____

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

remits the same to me at _____ day of _____ 190 _____ by his check or registered mail.

Witness my hand this _____

Executed in presence of _____

County, _____

{ SEAL }

Ireland, N.Y.
Cable
D.K.

No. _____

WIDOW'S
Indigent Pension.
1901.

Name *Mary Ireland*

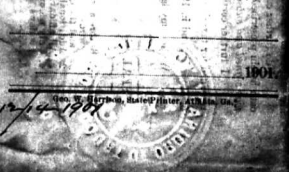
County *Cable*

Widow of *Benj. Q.*
Capt. 4th Regt.

Approved _____ 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO



POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, hereby authorize

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

Witness my hand this day of 190

Executed in presence of

Ordinary,

L. S.

County

Questions for Applicant.

STATE OF GEORGIA,

Cobb County.

Mrs. Nancy Ireland of said State and County, desiring to
avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly,
passed 1900, hereby submits her proofs, and after being duly sworn true answers to make to the
following questions, depose and answers as follows:

1. What is your name and where do you reside? *(Give State, County and Post Office.)*
Nancy Ireland - Smyrna Cobb Co Ga
2. How long and since when have you been a resident of this State?
Born and raised in this state
3. When and where were you born?
Cobb Co. Ga. In 1832 - In
4. When and where was your husband born - state his full name, and when were you and he married?
In 1825 - In N.C. - Benjamin
Ogden Ireland
5. When and where, and in what Company and Regiment did your husband enlist or serve during the
war between the States? In about 1863 - In Cobb Co Ga
Company 15, 4th Regt Ga. Cavalry
6. How long did your husband serve in said Company and Regiment?
Eighteen months (18)
7. When and where did your husband's Company and Regiment surrender and was discharged?
In 1865 - At Andersonville Ga.
8. Was your husband present at the time and place when his Company and Regiment surrendered?
He was at Columbus Ga. with at surrender
9. If not with his command at surrender, state clearly and specifically where he was, when he left com-
mand, for what cause, and by what authority? He was sick and was
permitted on furlough to go to Columbus
Ga. where his family was at that time.
10. When and where did your husband die?
At Smyrna Cobb Co. Ga. August 29, 1901
11. Which of the following grounds do you base your application for Pension, viz: First - Age and
Poverty; Second - Infirmary and Poverty; or Third - Blindness and Poverty? Age, Infirmary
and Poverty
12. If upon the first ground, state how long you have been in such a condition that you cannot earn
your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the
third, state whether you are totally blind, and when and where you lost your sight? For several
years she has been unable to do any
work - she has no property nor means of support
13. What has been your occupation since your husband's death?
Nothing - Not able to do anything
14. How much can you earn now, by your own exertion or labor?
Nothing
15. What property, real or personal, or income do you have or possess, and its gross value?
No property at all
16. What property, real or personal, did you possess at death of husband or he left you, and of the year
1899-1900, and what disposition, if any, by sale or gift, have you made of the same? None -
made no disposition - had nothing
17. In what counties did you reside in 1899 and 1900, and what property did you return for taxation?
Cobb County - No property
18. How have you been supported since death of husband, and especially for 1899 and 1900?
Since husband's death by my son
19. How much did your support cost for each of those years, and how much did you contribute by your
own labor or income? Probably \$0.00 - Contributed nothing
20. What was your employment during 1899 and 1900 - how much did you receive for each year?
No employment - Could do nothing -
my husband's Pension & his help supported me
21. Have you a family? If so, who composes such family? (Give their means of support? Have they
any lands or other property? No - Children are married -
22. Have you ever made an application for Pension before? No
23. How many applications have you made for a Pension, and under what class?
None

Sworn to and subscribed before me this 26th

day of November 1901
John A. Murray Ordinary,
of Cobb County.

WIDOW'S
Indigent Pension.
1901.

Name Nancy Ireland

County Cobb

Widow of Benjamin O.

Cobb & Old Records

Approved 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

1901

Ireland, Nancy
Cobb Co.
O.K.

Questions for Witnesses.

STATE OF GEORGIA,

County.

L. J. Kehley and W. H. Medlin of said State and County, having been presented as a witness in support of the Application of Mrs. *Arcey Ireland* for a Pension under the Act of 1900, and after having been duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? *L. J. Kehley and W. H. Medlin Surgeons, Georgia County, Ga.*
2. Are you acquainted with the applicant, Mrs. *Arcey Ireland*? *Yes. We have known her ever since the war.*
3. Where does she reside, and how long and since when has she been a resident of this State? *She resides at Sugma, Ga. Has lived here ever since the war.*
4. When and where was she born? *Don't know of our own knowledge.*
5. Were you ever acquainted with her husband? *Yes.*
6. Where did he reside in 1861? *At Sugma, Georgia County, Ga.*
7. When and to whom was he married? *To the applicant, Mrs. Arcey Ireland.*
8. When and where was he born? *Don't know of our own knowledge.*
9. How long have you known him? *Ever since before the war.*
10. When and where did *Benjamin O. Ireland* enlist in the war between the States, and in what Company and Regiment did he enlist and how do you know this? *He enlisted in Co. B, 1st Regt. 1563, in Co. B of the 1st Regt. Ga. Militia.*

11. Were you a member of the same Company and Regiment? *Yes.*
12. How long did he perform regular military duty? *About 18 months.*

13. When and where was his Company and Regiment surrendered and discharged from service? *At Sugma, Ga. May 1865.*

14. Were you with the command when it surrendered? *Yes.*
15. Was *Benjamin O. Ireland* the husband of applicant present?

16. If not present, where was he? *At Columbus, Ga. On sick furlough.*

17. When and where did he leave his Command? *At Columbus, Ga. a few days before surrender.*
- For what cause? *He had duty to perform - was furloughed 30 days, which had not expired.*
- By whose authority he left? *He was furloughed by Col. Bradley, Col. of Regt.*
- How do you know all this? (State fully and clearly.) *We were all there together. Members of same Co. & Regt. and know the facts personally.*

18. When and where did *Benjamin O. Ireland* die?

19. Where did he reside at his death and how long had he been a resident of Georgia at his death? *At Sugma, Ga. Had lived here since before the war.*

20. Do you of your own knowledge know that applicant is the lawful widow of *Benjamin O. Ireland*?

21. Has she remained unmarried since her soldier husband's death, and is now his widow? *Yes.*

22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge? *He don't know.*

23. What property, effects or income did applicant possess in 1899 and 1900 and what disposition did she make of it? *He don't know.*

24. Has applicant conveyed any property in last two years or given any away, if so what was it and to whom? *He don't know of any.*

25. What is applicant's physical condition and her chances and ability to earn a support? *She is very feeble and totally unable to labor at any thing - She cannot earn a support.*

26. Is applicant able to earn a support at labor of any sort, if not why? *No. She is too old and feeble to be able to work.*

27. How was she supported for 1899 and 1900? *By her husband - He was drawing a pension.*

28. How much did applicant contribute to her support for last two years? *None.*

29. Give a full and complete statement of applicant's physical condition? *She is old and feeble and generally broken in health. Totally disabled from work.*

30. What interest have you in the recovery of this pension by the applicant? *None.*

Sworn to and subscribed before me this *26th* day of *November* 190*1*.
L. J. Kehley
W. H. Medlin Ordinary,
 County. Witness.

Affidavits of Physicians.

STATE OF GEORGIA,

County.

Personally before me comes *M. J. Price M.D.* and

physicians of said county, who, being severally sworn, say on oath that they have examined carefully Mrs. *Arcey Ireland* applicant for a Pension under Act of 1900, and after such personal examination say that her physical condition is this: *that the applicant has chronic bronchitis and general weakness of the system, and that she is unable to perform any kind of manual labor, and that she is generally broken in health, and that we have no interest in said pension if allowed.*

Sworn to and subscribed before me this *26th* day of *November* 190*1*.
John H. Price Ordinary,
 County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County.

I, *John H. Price* Ordinary in and for said county, hereby certify that the applicant, Mrs. *Arcey Ireland* resides in said county, and has been a bona fide resident of this State since *1864* day of *January* 18*64*, and that the witness, Mr. *L. J. Kehley, W. H. Medlin* are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digest of *Georgia* county shows that applicant returned for taxation in her own name in 1899 *no* dollars worth of property, and in 1900 *no* dollars worth of property.

Witness my hand and official seal, this *26th* day of *Nov* 190*1*.

John H. Price Ordinary,
 County.

Notes—1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth; So help you God."
 2. Additional affidavits may be attached, if blank spaces are insufficient.
 3. All affidavits must be made before Ordinary.
 4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 2nd April, 1861, not entitled.
 5. Witnesses and two Physicians are necessary to make out claims.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }
Cobb

I, *Nancy Ireland*, hereby authorize
John D. Harty of *Marietta, Ga.*
to receive and receipt for the pension paid hereon, and request that he remit same to
me at *Anytime*

In Witness Whereof, I have hereunto set my hand and seal, this *2nd*
day of *Jan* 1903.

Nancy Ireland [L. S.]

Executed in the presence of

J. W. Lamm

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }
Cobb

I, *Nancy Ireland*, hereby authorize
John D. Harty 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 *15th*
day of *January* 1904.

Nancy Ireland [L. S.]

Executed in presence of

J. W. Lamm

Nancy Ireland
Cobb County
To Those Herebefore Paid
1903.

No. *164*

**INDIGENT
WIDOW'S PENSION,**

For year ending Dec. 31, 1903.

PAID TO

Mr. Nancy Ireland
OF

County,

Widow of *B. O. Ireland*
Co. *4th Regt*

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1/23 1903

AND HANDSD TO

Cody

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

TO THOSE HERETOFORE PAID.

1904.

No. *284*

**INDIGENT
WIDOW'S PENSION**

FOR YEAR ENDING DECEMBER 31, 1904

PAID TO

Mr. Nancy Ireland
OF

County,

Widow of *B. O. Ireland*
Co. *4th Regt*

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

JAN 25 1904

AND HANDSD TO

Cody

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

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES MRS.

Nancy Ireland

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 all her life That she is the Widow ofRay D. Ireland

who was a soldier in Company

of the

Regiment of

Co. 1st Regt

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

1865, and served in the Army up to 1865 That he diedon the 29 day of August 1861On account of age, infirmity, & poverty she is unable to earn a subsistence

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

I have been allowed an Indigent pension as a resident of Cobb County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 31, 1903.

Sworn to and subscribed before me, this 22d day of January 1903.

John A. Dickey Ordinary.

Post-Office

Nancy Ireland

State of Georgia,

Cobb

County.

I, John A. Dickey

Ordinary of said County, certify that I am well

acquainted with Mrs. Nancy Ireland, 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 1861Given under my official signature and seal, this 22d day of January 1903.

Ordinary of

County.

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

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES MRS.

Nancy Ireland

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 all her life That she is the Widow ofRay D. Ireland

who was a soldier in Company

8of the 4th Co. ReserveRegiment of the 1st Regt

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

1865, and served in the Army up to 1865 That he diedon the 29 day of August 1861Owing to age, infirmity, and poverty unable to support herself

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

I have been allowed an Indigent pension as a resident of Cobb County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me,

this 15th day of January 1904.

John A. Dickey Ordinary.

Post-Office

Nancy Ireland

State of Georgia,

Cobb

County.

I, John A. Dickey

Ordinary of said County, certify that I am well

acquainted with Mrs. Nancy Ireland, 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 many yearsGiven under my official signature and seal, this 15th day of January 1904.

Ordinary of

County.

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1904.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb

COUNTY.

Agnes Ireland
John Purdy of *Marble, Ga.*, hereby authorize
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 *16*
day of *January* 1905.

Executed in presence of

Nancy Ireland [L. S.]

Georgia Cobb County
In Person appears
Jm. Stone, resident of said
County, who on oath says
he is acquainted with Mrs.
Nancy Ireland this Applicant
for Pension, and has been
well acquainted with her
for 25 years or more - that
the said Applicant has no
property of any kind nor
has she had any property
of any kind for several
years past - that she
has no means of support
nor any income whatever.
She is quite feeble and
has been for a number of
years so much so that
she can not do any work
or follow any employment of
any kind - being so feeble that
she often can not leave her room.
She is supported by her married
son. I have no interest in
the recovery of this Pension.
Jm. Stone
Sworn to and Subscribed
before me this 16th day of January 1905
Blue Notary

To Those Heretofore Paid.

1905.

No. *274*

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO
Mrs Nancy Ireland

OF

County,

Widow of *John Ireland*

Cord 4th *Regiment*

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

Jan 19 05

1905.

AND HANDLED TO

The Public Accounting and Auditing Office, Atlanta,
Ga. in accordance with the Act of the 22d March, 1902.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 2

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES MRS.

Nancy Ireland

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

That she is the Widow of

John Ireland

who was a soldier in Company

D of the 4th

Regiment of 24th Infantry

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

186, and served in the Army up to

186 That he died on

the

day of

Age Infirmary Proctor

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

I have been allowed an Indigent pension as a resident of

Cobb

County, under Act 1900, for the year 1904, and now apply for the pension provided by law for the year ending December 31, 1905

Sworn to and subscribed before me,

this 16th day of January, 1905.

John Dutton Ordinary.

Post Office Lawrence, Ga.

State of Georgia,

Cobb

County.

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

acquainted with Mrs. Nancy Ireland, 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 January, 1894.

Given under my official signature and seal, this the 16th day of January, 1905.

{ Official }
{ Seal. }

Ordinary of Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

I, Nancy Ireland, hereby authorize John Lindsey of _____ 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 17 day of Jan, 1906.

Nancy Ireland [L. S.]

Executed in presence of

John Lindsey

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

I, Nancy Ireland, hereby authorize John Lindsey of _____ 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 9 day of Jan, 1907.

Nancy Ireland [L. S.]

Executed in presence of

John Lindsey

To Those Heretofore Paid.

1906.

No. 313

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1906.

PAID TO

Mrs. Nancy Ireland

of _____ County,

Widow of B. O. Ireland

Co. D. 4 _____ Regiment.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1/12 1906,

AND HANDLED TO

any

SEE FRANKLIN PRINTING AND PUBLISHING CO., ATLANTA, GA.

To Those Heretofore Paid.

1907.

No. 300

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1907.

PAID TO

Mrs. Nancy Ireland

B. O. Ireland County,

Widow of B. O. Ireland

Co. D. 4 _____ Regiment.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1/13 1907.

AND HANDLED TO

SEE FRANKLIN PRINTING AND PUBLISHING CO., ATLANTA, GA.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 1

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES MRS.

Nancy Ireland

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

B. O. Ireland who was a soldier in Company D of the 4th Ca 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 died on the 18 day of 18.

Age and poverty

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

I have been allowed an Indigent pension as a resident of Cobb County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1906.

Sworn to and subscribed before me this 17th day of June 1906. John H. Harty Ordinary. Post Office Nancy Ireland

State of Georgia, Cobb County. I, John H. Harty Ordinary of said County, certify that I am well acquainted with Mrs. Nancy Ireland, 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 17th day of June 1906. John H. Harty Ordinary of Cobb County.



NOTE—All blanks must be filled. Vouchers and Affidavits must bear date after January 1st, 1906.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 1

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES MRS.

Nancy Ireland

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

B. O. Ireland who was a soldier in Company D of the 4th Ca 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 died on the 18 day of 18.

Age and poverty

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

I have been allowed an Indigent pension as a resident of Cobb County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me this 9th day of June 1907. John H. Harty Ordinary. Post Office Nancy Ireland

State of Georgia, Cobb County. I, John H. Harty Ordinary of said County, certify that I am well acquainted with Mrs. Nancy Ireland, 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.

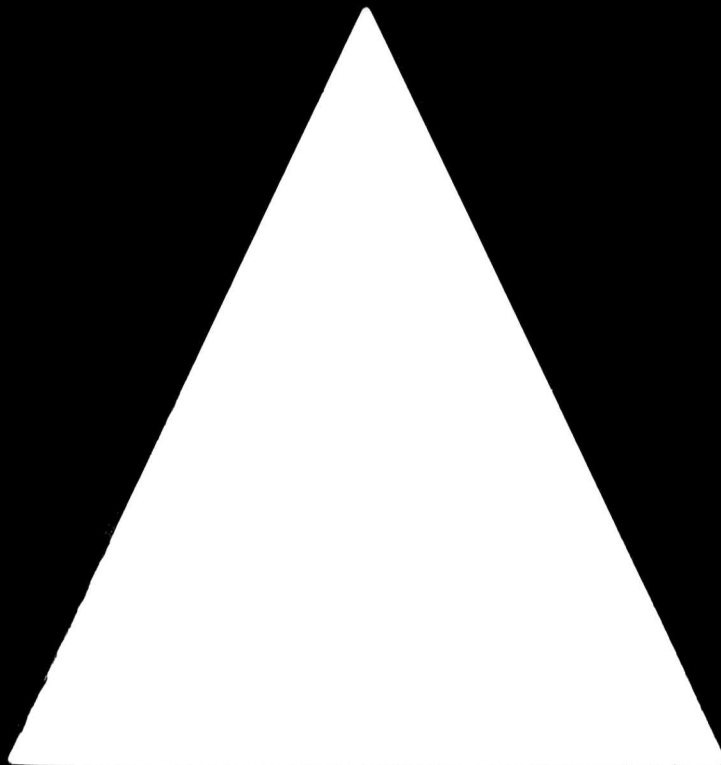
Given under my official signature and seal, this the 9th day of June 1907. John H. Harty Ordinary of Cobb County.



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

NOTE—All blanks must be filed.
Vouchers and Affidavits must bear date after January 2nd, 1904.

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



Pension office 11-17-13

Applicant must furnish some evidence of marriage to husband if must be proven, cannot be presumed.

J. W. Lindsey Com of Pension

Private Apr 25, 1860
Widow's Pension
J. W. Lindsey Com of Pension
1/1860 v. Exchange &
Rec'd 1865. Washington
Record

Widow's Pension

UNDER ACT 1910

County

Cobb

Name

Mrs. F. C. Lindsey

Widow of

C. J. Lindsey

21-60. F. C. Lindsey

J. W. LINDSEY,

Commissioner of Pension.

Chas. F. Byrd, State Printer

ENTERED ROSTER OFFICE
4/1/1913

Pension office 11-17-13

Applicant must furnish some evidence of marriage to husband. If must be proven, cannot be presumed.

J. W. Lindsey Com. of Pensioners

Widow's Pension

UNDER ACT 1910

J. W. LINDSEY,

Commissioner of Pensioners

State of Georgia

ENTERED ROSTER OFFICE

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

STATE OF GEORGIA,

Cobb County.

Personally before me comes Mrs. H. C. Ireland 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? M. C. Ireland
How long and since when have you been a continuing resident of the State of Georgia? all my life 44 years

2. When, where and to whom were you married? Sept. 8, 1867
B. J. Ireland Columbus, Jefferson, Ireland

3. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) April, 1867
At Columbus, Ga. Co. H. 60. En. 1st Reg.

4. When and where did the Commands of your husband surrender or discharge from the army?
Appomattox Va

5. Was your husband personally present at the time of the surrender or discharge of this Command?
Yes

6. If he was not present state clearly where he was? He was present

7. Where was his command when he left?
error

a. For what cause did he leave his Command? ---

b. By whose authority did he leave his Command? ---

c. For how long was he granted leave of absence? ---

d. What was his physical condition when he left his Command? ---

e. What effort did he make to return to his Command? ---

f. In what way was he prevented from going back to Command? ---

g. Was he captured by the enemy at any time? no error

h. If so, when and where captured and where held as a prisoner, and when and for what cause released?
Released at Ft. Monmouth, Md. June 16, 1867

i. When and where did your husband die? July, 1897 Cobb County, Ga

j. Were you residing together when he died? Yes

k. If not, how long had you resided apart? never living together

8. What property of any description did you own, hold or control for your use and its cash value, Nov. 4, 1908? (State same by items.) none

9. 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

10. What property of any description of any value have you now?
Give list and cash value. none

11. What are your annual earnings or income and their value? none

12. Have you heretofore been paid a pension by the State? no

If so, when and for what cause were you struck from the Roll? none

Sworn to and subscribed before me this the 29 day of September 1913

J. W. Lindsey Ordinary.
of Cobb County.

Ordinary.

of Cobb County.

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

STATE OF GEORGIA,

Fulton County.

Personally before me comes J. L. Ireland 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. L. Ireland Atlanta Ga
2. How long and since when have you known Mrs. V. C. Ireland applicant? all her life 60 years
3. How long and since when has she continuously resided in this State? (Give date.) all her life 60 years
4. When and to whom was she married? J. L. Ireland How do you know? the I. Ireland
5. How long and since when did you know J. L. Ireland her husband? all his life
6. When and where did J. L. Ireland the husband of Applicant die? 1867 near Waynesboro Ga
7. Were the applicant and her husband living together as husband and wife at the date of his death? yes
8. If not, how long did they live apart before his death? No
9. Were they divorced? No
10. When, where and in what Company and Regiment did J. L. Ireland enlist? at Gordon Mills Ga April 1862 60th Reg Co H.
11. Were you a member of the same Company? yes
12. How long within your personal knowledge did he perform actual military service with his Company and Regiment? 3 1/2 years 6 months
13. When and where did his Command surrender, and was discharged? at Appomattox Court House
14. Were you personally present when it was surrendered? yes If not where were you and how came you there?
15. Was the husband of applicant personally present at surrender? yes If not where was he? he was present when, where and for what cause did he leave Command? (Give date.) error was in prison By whose authority did he leave his Command? and how long was he granted leave? How do you know all this?

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

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how?

Sworn to and subscribed before me this the

38 day of Oct 1913

John P. Robinson Ordinary.

of Fulton County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Cobb County.

Personally before me comes J. L. Ireland & H. B. Moore who on oath says that they are freeholders of said County and that they know Mrs. V. C. Ireland 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 none \$
Notes and accounts due none \$
Total none \$

Schedule (B).

We know the property sold or given away since Nov. 4th 1904, its cash value to be as follows:

Personal property none \$
Money, Notes and Accounts none \$

Schedule (C).

We also know what property she has now in her possession, use and control to-wit:

Acres of land worth 7 \$
Horses and Mules none \$
Cows and Hogs none \$
Other Property none \$
Income and Earnings none \$
Total Value of all property and effects none \$

Sworn and subscribed before me this the

29 day of October 1913

J. M. Gause Ordinary.

of Cobb County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cobb County.

I, J. M. Gause Ordinary of said County do certify that I know Mrs. V. C. Ireland the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th Nov. 1908 for more than 50 years

That I also know J. L. Ireland & H. B. Moore the witness who swears to the service of husband, and J. L. Ireland & H. B. Moore who are freeholders. That all of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they all are truthful, trustworthy, and their statements are entitled to full faith and credit.

That the Tax Returns Cobb Returned for Tax is for 1908 \$0 for 1910 \$0

Sworn under my hand and official seal of office this 29 day of Oct 1913

(SEAL.)

(SEAL.)

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

day of Oct 1913
John W. Lindsey Ordinary.
of Fulton 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 licenses if obtainable. If not, prove marriage, by some person, or by general reputation.



12/20/1913.

Judge J.W.Lindsey,

Atlanta,

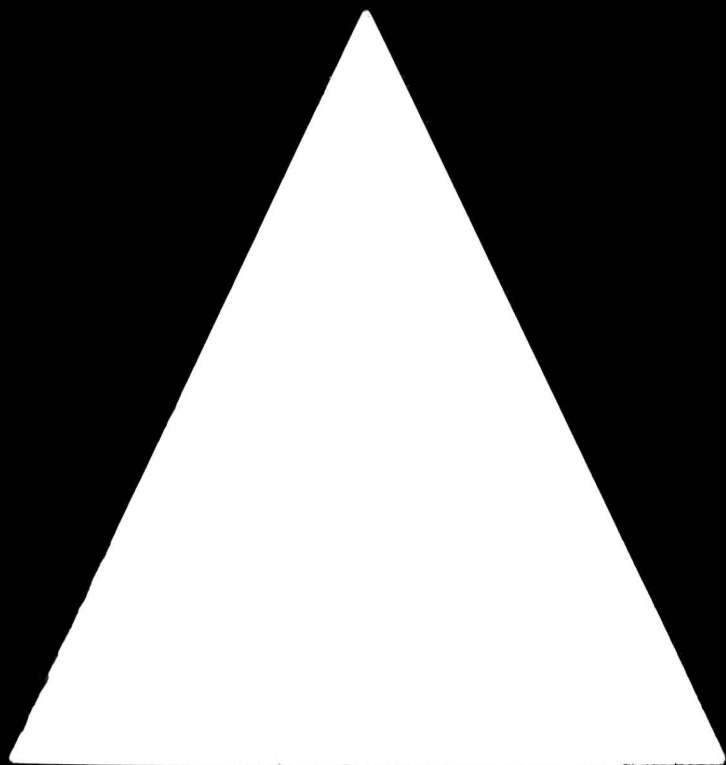
Ga.

Dear Judge:-

Mrs E.A.Camp, widow, on your approved list for 1914, died on December the 12th, so I will not return her name on my list. I am returning Mrs, N.C.Irelands, application, with Certified Copy of her Marriage, hope you will put this widow on in as much as Mrs, Camp comes off: Merry Christmas to You.

Yours truly

J. M. Gann



POWER OF ATTORNEY,

STATE OF GEORGIA.

Cobb County.

Know all Men by these Presents, That I,

S. E. Irvine
of *Cobb County* State of *Georgia*

County, in said State, 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

1891
12th day of May

Executed in the presence of us,

S. E. Irvine & Son

DIRECTORS.

If allowed, send amount by

me at

and oblige,

to

Ex. Deft. Affidavit
June 3, 1891

To sustain a claim for a pension the law requires that witnesses, not less than three, must show that the death of applicant husband was directly a result of the service in the Army.

The witnesses whose testimony has been presented, do not state anything which would indicate that they were present when Mr Irvine died, or that they personally knew of the immediate cause of his death.

His death having occurred 12 years ago, it is probable that the fullest & most positive proof furnished having his death personally to the service. Dr. Childress, however, is general & not definite, stating only that it does give much light as a history of the case calls for.

Irvine Susan E.
Cobb County
1891.
S. E. Irvine

No. *8113*

Widows' Pension

PAID TO

Mrs. Susan E. Irvine
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.

Colt County.

Know all Men by these Presents, That I,

S. E. Irvine
of *Colt County Ga.*
my true and lawful attorney in fact, for

County, in said State, 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
day of May, 1891.

Executed in the presence of us:

J. C. Irvine
J. C. Irvine, Clerk.

[L. S.]

If allowed, send amount by

to

me at, and oblige.



Warrant Issued

\$200.00.

OF
Colt County

Widow's Pension

210. 8/15

Colt County
1891.

Irvine Susan E

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA

County of Colt

In person came before me, the undersigned Ordinary

and for the County of Colt

Mrs. Susan E. Irvine, who being sworn according to law, says under
oath that she is the widow of A. F. Irvine, who was a soldier in

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

4th Regiment of Sa Reserves Volunteers; that he enlisted in said

service on or about the day of May, 1864, and was in the

Army up to 1864 That while in the

Army, he was on the day of in Summer, 1864, (See Note No. 1)

while in the Army at Andersonville, Ga.
he was attacked with Chronic Dysentery,
after lingering for some time in the Army,
he was sent home as being unable for
duty - After remaining at home, a while
he returned to the Army, but was removed of
said disease, he returned to the Army in
the fall of 1864. After returning home
at the close of the war, in the Spring
of 1865 he was still suffering with said
Chronic Dysentery - he continued to be severely
afflicted with said disease - was never
able to do any work from his return home till
his death. He died of said disease in May
1866.

Deponent further swears that she was the wife of said deceased soldier during his term of service in
the Army, and that she has never married since his death; that she became his wife on the 11th

day of January, 1848, and that she has resided in Georgia continuously since the

day of November, 1849, 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

day of May, 1891.

J. C. Irvine
Ordinary.

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

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

Know all Men by these Presents, That I,

County in said State, do hereby appoint

of

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

1891

J. C. Irvine

at

to

and oblige,

me at

If allowed, send amount by

DIRECTIONS.

Executed in the presence of us:

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

Form No. 5.

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

Know all Men by these Presents, That I,

County in said State, do hereby appoint

of

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

1891

J. C. Irvine

at

to

and oblige,

me at

If allowed, send amount by

DIRECTIONS.

Executed in the presence of us:

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

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J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

J. C. Irvine

By Deft. Affidavit
June 8 1891
To sustain a claim for
a pension, the law requires
that witnesses, not less than
three, must show that the
death of applicant's husband
was directly a result of the
service in the Army.
The witnesses whose testimony
here presented, do not state
anything which would
indicate that they
were present when Mr Irvine
died, or that they personally
knew of the immediate cause
of his death.
His death having occurred
12 years ago, it has been
much the fullest & nearly
positive proof furnished
having his death positively
to the service. Dr. Childers'
statements is general & not sat-
isfying in that it does give such
data as a history of the case calls
for. J. C. Irvine

Irvine Susan E.
Cobb County
1891.
J. C. Irvine
No. 3113
Widows' Pension
PAID TO
Mrs. Susan E. Irvine
OF
Cobb COUNTY.
\$100.00.
Warrant Issued
1891
AND HANDED TO
Geo. W. Harrison, State Printer Atlanta.

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. L. Reed

(each known to said Attesting Officer as truthful,

Mrs. Susan E. Irvine, of the County of Cobb

State of Georgia, is the widow of A. J. Irvine, who was a soldier in

Company D. of the 4th Regiment of En. Reserve Volunteers.

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

about the day of May 1864. That while in said service, or by

reason of said service in the Army, he lost his life as follows: On 1864 while stationed

at Andersonville, Ga. he contracted the disease of
Chronic Dysentery; that he was sick in hospital several
weeks from said disease and came near dying;
that he recovered sufficiently to go to his Company,
but was not able to do duty. This passed all day
both days. Reed says he remained disabled for the
remainder of the war. Balan says that about
the year 1868 said A. J. Irvine stayed all night
with him and then had chronic dysentery
like he had in Camp; that about a year later
said A. J. Irvine again stayed all night with
said Irulan & was still suffering from the
same disease.

J. L. Reed swears that he was in the Army with
A. J. Irvine, that said Irvine was sick with a lingering
disease - was sent home from the Army and remained
away for one or two months & then returned to the Army
but was never able for duty after returning to the Army.

We further swear that Mrs. Susan E. Irvine 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

26th day of May 1891.

J. M. Stone

Ordinary

as to B. O. Irulan and
J. L. Reed

B. O. Irulan

J. L. Reed

(see to what is in)

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

Form No. 3.

STATE OF GEORGIA,

County of Cobb

I, J. M. Stone

Ordinary

in and for said County of Cobb

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

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

26th

day of May

1891

SEAL

J. M. Stone
Irulan & Reed witnesses Ordinary.

Form No. 4.

NOTES.

The pension is only payable to certain classes of widows.

Those whose husbands were killed in service.

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

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

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

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

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

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

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

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

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

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

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

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

By order of the Governor.

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

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

Form No. 2.

STATE OF GEORGIA, County of Cobb

I, J. H. Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. Susan E. Irvine 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, 1893, and has not lived out of the State since that date. That she is the widow of Abraham F. Irvine deceased, and as such has heretofore been allowed a pension for the year ending February 15th 1892.

In Witness Whereof, I have hereto set my hand and affixed the seal of my office, this, the 6th day of July, 1894.

SEAL

J. H. Stone Ordinary.

POWER OF ATTORNEY.

Form No. 3.

STATE OF GEORGIA, County of Cobb

KNOW ALL MEN BY THESE PRESENTS, That I, Susan E. Irvine of Cobb County, in said State, do hereby appoint J. H. 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 6th day of July, 1894.

Susan E. Irvine x [L.S.]

Executed in the presence of us:

x R. V. Cameron
x J. B. Humphrey

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. H. Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. Susan E. Irvine 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, 1893, and has not lived out of the State since that date. That she is the widow of A. F. Irvine deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1893.

In Witness Whereof, I have hereto set my hand and affixed the seal of my office, this, the 12th day of July, 1894.

SEAL

J. H. Stone Ordinary.

POWER OF ATTORNEY.

Form No. 3.

STATE OF GEORGIA, County of Cobb

KNOW ALL MEN BY THESE PRESENTS, That I, Susan E. Irvine of Cobb County, in said State, do hereby appoint J. H. 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 12th day of July, 1894.

Executed in the presence of us:

x J. H. Irvine x
x J. B. Humphrey x

DIRECTIONS.

Send amount by Check to
me at Austell Ga, and oblige

Susan E. Irvine

Widow's Pension,
for year ending February 15th, 1893.
PAID TO
Susan E. Irvine
of
Cobb County.
Warrant Issued
1893.
AND HANDED TO
J. H. Stone
Cobb County, Georgia.

Widow's Pension,
for year ending February 15th, 1894.
PAID TO
Susan E. Irvine
of
Cobb County.
WARRANT ISSUED
2/12
AND HANDED TO
J. H. Stone
1894.
Cobb County, Georgia.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Cobb*

Personally comes Mrs.

} *Susan E. Irvine*

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 *November* 18*49* That she is the Widow of*Abraham F. Irvine*

who was a Soldier in Company

D. of the *4th*Regiment of *Ga. Heavy*Volunteers, that he enlisted in said Regiment on or about the month of *May*186*2* and served in the Army up to *May 5* 186*5* That he lost his

life on the day of 18 (State here

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

named Confederate soldier died on the 1st
day of May 1866 from Chronic Dysentery
Contracted while in service at Andersonville
Ga. He was in ill health from about June
when he left the army and was never
well until his death

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 18*48*, 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

day of *July*, 1893.*6th*

Ordinary.

Post-office

Susan E. Irvine
Austell Ga.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Cobb*

Personally comes Mrs.

} *Susan E. Irvine*

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 *November* 18*49* That she is the Widow of*A. F. Irvine*

who was a Soldier in Company

D. of the *4th* *Rego* Regiment of *Georgia*Volunteers, that he enlisted in said Regiment on or about the month of *May*186*2* and served in the Army up to *May 5* 186*5* That he lost hislife on the day of *May* 1876 (State herefull particulars of the husband's death, when, where and from what cause.) *(X)*

He died at home in Cobb County
Ga from Chronic Dysentery
Contracted at Andersonville
Prison while in the Confederate
Service

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 18*48*, 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

day of *July*, 1894.*12th*

Ordinary.

Post-office

Susan E. Irvine
Austell Ga.

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

Form No. 1

I, *John Stone* Ordinary in and for said County of *Cobb* State of Georgia, hereby certify that I am acquainted with Mrs. *Susan E. Irvine* 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 *A. J. Irvine* 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 *31st* day of *July*, 1895.

John Stone Ordinary.

POWER OF ATTORNEY.

Form No. 2

STATE OF GEORGIA, *Cobb* County.

KNOW ALL MEN BY THESE PRESENTS, That I, *Susan E. Irvine*

County in said State, do hereby appoint *Marionetta Yu* 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 *31st* day of *July*, 1895.

Susan E. Irvine X [L. S.]

Executed in the presence of us:

W. H. H. of Davis

DIRECTIONS.

Send amount by *check* of *J. B. Humphreys* to me at *Austell Ga*, and oblige *Susan E. Irvine*

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

Form No. 1

STATE OF GEORGIA, County of

I, _____ 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 _____

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 _____ day of _____, 1896.

SEAL

Ordinary.

Form No. 2

POWER OF ATTORNEY.

STATE OF GEORGIA, *Cobb* County.

I, *Susan E. Irvine* hereby authorize *Marionetta Yu* of *Cobb* County, to receive and receipt for the pension paid hereon and request that he remit same to *me by Tim*

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

Susan E. Irvine X [L. S.]

Executed in the presence of

W. H. H. of Davis

Irvine, Susan E.
Cobb County
FOR THOSE HERETOFORE PAID
1895.
No. *458*
WIDOW'S PENSION.
for year ending February 15th, 1895.
PAID TO
Susan E. Irvine
widow of *A. J. Irvine* County, *Cobb*
WARRANT ISSUED
24 July 1895.
AND HANDED TO
W

Irvine, Susan E.
Cobb County
FOR THOSE HERETOFORE PAID
1896.
No. *3530*
WIDOW'S PENSION.
for year ending February 15th, 1896.
PAID TO
Susan E. Irvine
widow of *A. J. Irvine* County, *Cobb*
WARRANT ISSUED
24 July 1896.
AND HANDED TO
W
GIVEN BY CLERK OF COURT, STATE PRISON.

For Widows' Heretofore Allowed Pensions.

Form 1.

STATE OF GEORGIA,

Personally Comes Mrs.

County of Cobb Susan E. Irvine

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 Novr. 1849 That she is the Widow of

A. F. Irvine who was a Soldier in Company "D" of the 4 Regiment of Ca. Reserves

Volunteers, that he enlisted in said Regiment on or about the month of May 1864 and served in the Army up to May 1865 That he lost his life on the Fri day of May 1876 (State here

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

From Chronic Dysentery
Contracted at Andersonville
In year 1864 From which he
died on Fri-day of May 1876

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

30th day of Jan 1895.

J. M. Stone Ordinary.

Post-office Austell Ga

For Widows' Heretofore Allowed Pensions.

Form 1.

STATE OF GEORGIA,

Personally Comes Mrs.

County of Cobb Susan E. Irvine

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 Novr. 1849 That she is the Widow of

A. F. Irvine who was a Soldier in Company "D" of the 4 Regiment of Ca. Reserves

Volunteers, that he enlisted in said regiment on or about the month of May 1864 and served in the Army up to May 1865 That he lost his life on the Fri day of May 1876 (State here

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

That while in the Con-
federate Army, he contracted
Chronic Dysentery from which
disease he never recovered
and died from said
disease in May 1876.

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

8th day of Feb 1896.

J. M. Stone Ordinary.

Post-office

Susan E. Irvine

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

Form No. 2.

STATE OF GEORGIA, County of Cobb
 I, John E. Irvine Ordinary in and for said County of
 State of Georgia, hereby certify that I am acquainted with Mrs. A. F. Irvine
 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, 1899, and has not
 lived out of the State since that date. That she is the widow of A. F. Irvine
 deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1896.
 In Witness Whereof, I have heretofore set my hand and affixed the seal of my office, this
 15th day of July 1897.
John E. Irvine Ordinary.

POWER OF ATTORNEY.

Form No. 3.

STATE OF GEORGIA, County of Cobb
 I, Susan E. Irvine hereby authorizing John E. Irvine
Marionette me to receive and receipt for the pension paid hereon and request
 that he remit same to me by him
 In Witness Whereof, I have heretofore set my hand and seal, this
 15th day of July 1897.
Susan E. Irvine
 Executed in the presence of
A. F. Irvine
J. B. Humphries

Susan E. Irvine
Cobb County
 For Those Heretofore Paid
 1897.
 No. 3757
 WIDOW'S PENSION,
 For year ending February 15th, 1897.
 PAID TO
Susan E. Irvine
 of Cobb County.
 RICHARD JOHNSON,
 Commissioner of Pensions.
 WARRANT ISSUED
 9/25
 AND HANDLED TO
John E. Irvine
 1897.

POWER OF ATTORNEY.

State of Georgia, County of Cobb
 I, Susan E. Irvine hereby authorizing John E. Irvine
Marionette me to receive and receipt for the pension paid hereon and request
 that he remit same to me by him
 In Witness Whereof, I have heretofore set my hand and seal, this
 16th day of July 1898.
Susan E. Irvine
 Executed in the presence of
A. F. Irvine
J. B. Humphries

Susan E. Irvine
Cobb County
 For Those Heretofore Paid
 1898.
 No. 3757
 WIDOW'S PENSION,
 For year ending February 15th, 1898.
 PAID TO
Susan E. Irvine
Cobb County,
 Widow of A. F. Irvine
 RICHARD JOHNSON,
 Commissioner of Pensions.
 WARRANT ISSUED
 9/16
 AND HANDLED TO
Susan E. Irvine
 1898.
Richard Johnson, State Printer, Atlanta

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of

Personally Comes Mrs.

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 *Novr* 18 *49* That she is the Widow of

A. H. Irvine who was a Soldier in Company
 of the *4th* Regiment of *Pa. Reserves*
 Volunteers, that enlisted in said regiment on or about the month of *May*
 186 *7* and served in the Army up to *May* 186 *7* That he lost his
 life on the *First* day of *May* 18 *76* (State here

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

*That while in the Confed-
 erate Army he contracted Chronic
 Dysentery from which disease
 he died May 1876.*

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

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

day of

1897.

Ordinary.

Post office

15th July *1897* *X Susan E. Irvine*
John H. Stone Ordinary. *Post office* *Chastell Ga*

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of

Personally Comes Mrs.

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 *Novr* 18 *49* That she is the Widow of

A. H. Irvine who was a Soldier in Company
 of the *4th* Regiment of *Pa. Reserves*
 Volunteers, that he enlisted in said regiment on or about the month of *May*
 186 *7* and served in the Army up to *May* 186 *7* That he lost his
 life on the *First* day of *May* 18 *76* (State here

(full particulars of the husband's death, when, where and from what cause.) *He died
 of Chronic Dysentery contracted
 while in the Confederate Service
 and stationed at Andersonville
 Georgia between the years of
 1862 and 1865*

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

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

Sworn to and subscribed before me, this
 day of *July* 1898. *X Susan E. Irvine*
John H. Stone Ordinary. *Post-Office* *Chastell Ga*

State of Georgia,

Cobb County. I, *John H. Stone*
 Ordinary of said County, certify that I am well acquainted
 with Mrs. *Susan E. Irvine* who made the above affidavit and am satis-
 fied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she
 has continuously resided in this State since the day of *Novr* 18 *49*

Given under my official signature and seal this the *16th* day of *July* 1898.

Official
 Seal.

Ordinary of *Cobb* County.

POWER OF ATTORNEY.

State of Georgia.

Cobb County.

I, E. E. Irvine hereby authorize Jul Stone
of Winnetta Ga

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

me by himself

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

day of Feb 1890.

Executed in presence of

Henry Connor

WIDOW'S PENSION,

For year ending February 10th, 1890.

Mrs E. E. Irvine

Cobb County
Widow of A. H. Irvine

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

2/8
AND HANDLED TO
Jul S

1890.

USE OF HARRISON STATE PRINTER, ATLANTA

PAID TO ORDER

NO 748 S. BROAD ST

Atlanta, Ga. May 27th 1891

I hereby certify that A. H. Irvine
was a member of My Coyt Andersonville
Prison in 1864 & 1865 and that he contracted
Chronic dysentery while in service and
that it became chronic. With Irvine
and he was taken to Hospital and there over
two months and came very near dying. He was
then sent home on furlough and afterwards
Returned to Cambridge and was still sick
with same disease and was not able but
duty anymore and when the surrender
came he left Cambridge very much emaciated
and went home suffering with same
disease.

P. J. Bowie
Capt, Co. D, 4th Geo. Reserves

Examined and subscribed before me.
May 27th 1891

W. B. Ballman
Clerk of
Hillsboro

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

Lusaw E. Irvine

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 1800

1849 That she is the Widow of

A. F. Irvine

who was a soldier in Company

S. of the 4th Regiment of Georgia

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

May

1862 and served in the Army up to

1865 That he lost his

life on the

May

1876 (State here

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

That while in the Confed-
erate Army, they deceased hus-
band contracted Chronic
Dysentery from which disease
he never recovered and died
from said disease in May
1876.

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 allowed a pension as a resident of

Cobb

County for the year ending

February 15th, 1898, and now apply for the pension provided by law for the year ending February 15th, 1899.

Subscribed and sworn to before me, this

1st day of July 1899.X Lusaw E. Irvine X

Ordinary.

Post-Office Austell Ga.

State of Georgia,

Cobb

County.

Ordinary of said County, certify that I am well acquainted

with Mrs. Lusaw E. Irvine who made the above affidavit and am sat-
isfied 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 Nov 1849

Given under my official signature and seal this the

1st day of July 1899.

Ordinary of

Cobb

County.

{ Official
Seal }

M

W. A. Childress,

Physician and Surgeon

604 Marietta Street.

I hereby Certify That I Attended
A. F. Irvine from the end of
the War up until his death
on May 1st 1876 when he died
with Chronic dysentery which
he contracted in the War
between and
before
Mr. May 27
1899

W. A. Childress
Physician
Austell Ga.
Ga.

Georgia Fusion County

Personally came W. A. Childress who on oath says, That he has known A. F. Irvine since 1859, that he attended him as his family Physician before the war & has attended him since the war up to the time of his death. That when first called after the war he found said A. F. Irvine suffering from chronic dysentery which had been contracted during the war & in the Confederate Service, that said A. F. Irvine never recovered from said disease and was treated by me for the same up to the time of his death, and that said death was caused from said disease, ^{which} was the immediate cause of his death. I was called in, in a short time after the war & attended him regularly up to the time of his death May 1st 1876 & was present at his death & know it to have been caused by said disease & that said disease was contracted in Confederate Service.

W. A. Childress M.D.

Sworn to & Subscribed
before me June 5th 1891
W. L. Ballou
Ordinary

Georgia Fusion County

Personally came J. M. Jordan who after being duly sworn and says that he personally knew A. F. Irvine from the year of 1866 to his death in 1876 and that he was suffering with chronic dysentery from the time of his first acquaintance up to his death and that said A. F. Irvine has repeatedly told me that he contracted said disease while in the Confederate Service at Andersonville and Defendant is satisfied that said A. F. Irvine died from the effects of chronic dysentery that Defendant lived near him when he died and that from the first acquaintance up to his death he never was able to work nor at anything on the account of dysentery. Sworn to and Subscribed before me this J. M. Jordan
June 5th 1891

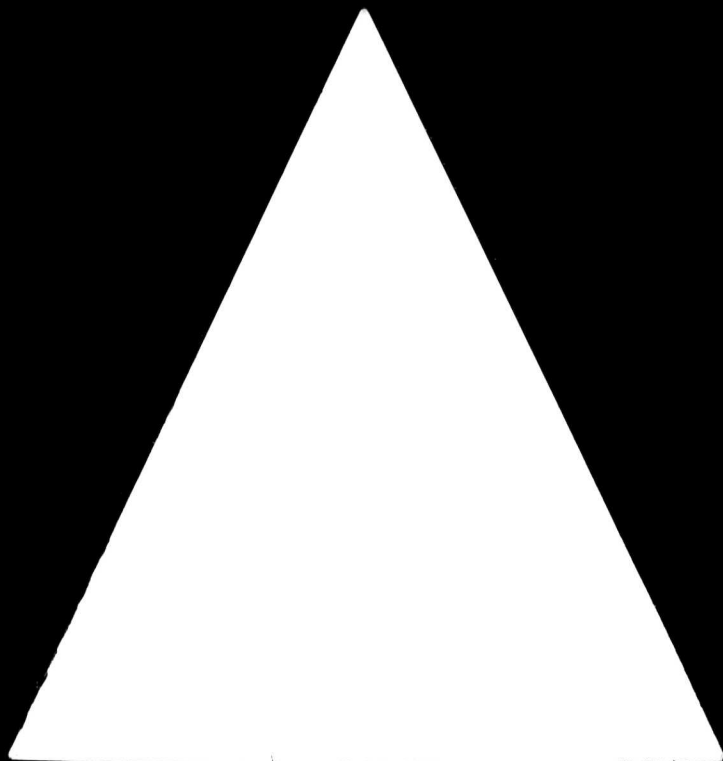
W. L. Ballou
Ordinary

Crossin } Personally came before the
 Fulton Co } undersigned Mr R. A. Irvine who being
 duly sworn depoth and says - That he is a son
 of A. P. Irvine, that the said A. P. Irvine enlisted in
 the service of the Confederate States and was stationed
 at Andersonville, Ga where he contracted the dis-
 ease of Chronic dysentery, that he was sent
 home by the officers in command as unfit
 for service by reason of said disease, but
 returned to Andersonville to avoid capture
 as the said he knew that if he was captured
 and taken to a northern prison he would
 die. He was near the for several often his
 return by reason of the disease. At the close
 of the war he was paroled at Macon Ga
 and returned home, but from that time to the
 day of his death was never able to do any
 work as he was still suffering from the above
 mentioned disease from which he died May
 1st 1876. That in the month of March previous
 to he visited the home of his father, the father
 on that visit was so debilitated that he was
 unable to leave he had been since the war
 and doubted whether he would be able to
 stand the disease through the summer
 During the latter part of April my mother
 wrote me that my father was still suffering
 from the same disease and liable to die
 at any time and that she wished to see him
 a time what better could come, I did not
 see him the late time him at Andersonville
 then informed by the physician and my
 mother that he had died from the dysentery.

Given to me subscribed
 before me this 11th day

J. W. H. to witness
 Crossin

A. P. Irvine



Ordinary's Certificate

STATE OF GEORGIA

City

COUNTY

John H. Hume Ordinary of said County, certify that I know the applicant *Robert C. Lewis* for pension in the person he represents himself to be and resides in said county. That I also know *John R. Rife* the witness swearing to the service; that they are both residents of said county and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this *25* day of *Oct* 18*19*

John H. Hume Ordinary
County

(SEAL)

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and witnesses in the following words: "You are sworn to tell the truth, the whole truth, and nothing but the truth, so help you God." 2. All affidavits must be sworn to in the presence of the Ordinary of the county in which the applicant or witness resides and must be verified by each Ordinary.

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-30-1919

Lewis, Robert C.
City

No. *Oct 1920*

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1918.

County *City*
Name *Robert C. Lewis*
Company *C. I.*
Regiment *72d Inf.*
Approved _____

*Test May 31-61, Rep-
fainted South Master 62
Pension-63, Tel.
2nd Lieut., 63, Retired
to 1st Lieut. Feb. 14-65
(Dr. R.)*

Ordinary's Certificate

STATE OF GEORGIA.

Cobb COUNTY.

I, J. M. Gamm Ordinary of said County, certify that I know the applicant R. L. Gamm for pension is the person he represents himself to be and resides in said county. That I also know Joe Dashi the witness swearing to the service, that they are both residents of said county and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 29 day of Oct 1919

J. M. Gamm Ordinary
of Cobb County
(SEAL)

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

Application for Soldier's Pension Under Act 1910

Amended by Act 1919

Questions For Applicants to Answer

STATE OF GEORGIA,

Cobb COUNTY.

Cobb of said State and County, hereby applies for the pension provided by Act of 1910, as amended by Act of 1919, to Confederate Soldiers, and submits his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? (Give County and Post-office).
Robert L. Gamm Marietta Cobb County Ga
2. How long and since when have you been a continuous resident citizen of this State?
All my life. Since the year 1842
3. Did you enlist in the Army of the Confederate States or in the organized militia of this State from 1861 to 1865?
I did join 12 Months

Apr 2 1861 When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service)
At Marietta, Company I 7th Ga Reg, Inf

5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge)
Twelve Months, then appointed Drill Master.

6. When and where was your Company and Regiment surrendered or discharged from the Service?
At Appomattox

7. Were you actually present with your command when it was surrendered or discharged? No

8. If you were not actually present, state specifically and clearly where you were I was put on the retired list upon being discharged by the Medical Board - Drs. Roach and Brown on account of ill health.

a. Where was your command when you left it? At Fort Monroe Virginia

b. When did you leave the command? April 1862

c. For what cause did you leave? The Regiment was reorganized and I was appointed Drill Master by that body. The Regiment was reorganized and I was appointed Drill Master.

d. By whose authority did you leave? By the authority of the Medical Board.

e. For how long was your leave granted? In what way?
I was ordered to be ordered to any point.

f. Why did you not return to your command after leave expired? I was placed on the retired list on a medical board on account of ill health.

g. In what way were you prevented? As stated above on account of ill health.

h. What effort did you make to return? My health was such as to enable me to serve.

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? None

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

10. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? I have never applied for a pension.

Sworn to and subscribed before me, this the

29 day of October 1919

J. M. Gamm Ordinary
of Cobb County.

(SEAL)

Confederate

Soldier's Application

Under Act 1910 - As Amended by Act of 1919.

No. 0. N. Jan 1920
County Cobb
Name Robert L. Gamm
Company I 7th Ga. Inf
Regiment
Approved

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

10-30-1919

Vol. my report to Cobb Co

Part May 1-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-00-01-02-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-

Questions for Witness as to Service

STATE OF GEORGIA

Colt COUNTY }
San Derby

of said State and County is hereby presented as a witness in support of the application of Robert P. Jarmon for the pension provided by the Act of 1910, as amended by the Act of 1919 in said State, and, after being sworn true answers to make to the questions propounded, answers as follows:

1. What is your name and where do you reside? San Derby
Massachusetts, En

2. How long and since when have you known R. P. Jarmon the applicant?
forty years

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

4. When, where and in what Company and Regiment did R. P. Jarmon enlist during war from 1861 to 1865? (Give date and place.) Co. I, 7th Regiment, Mass., April 1861

5. How did you obtain your information of this Service? From San Derby's Regiment and from R. P. Jarmon before he went into service, and from him since

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

7. When and where was his command surrendered or discharged (give date and place) April 9, 1865, Appomattox

8. Were you personally present at the surrender? Yes

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

10. Was the applicant personally present with his command at surrender? No

11. If not where was he and how came him there? He had been appointed Drill

12. When did he leave his command April or May, 1865 Where was his command when he left it? at Appomattox For what cause did he leave? Appomattox Drill

By whose authority did he leave by his own and how long was he granted leave? He was not

How do you know all that you have stated to be true? If of your own knowledge, tell clearly and specifically

13. In what way was he prevented from returning to his command? —

How do you know? —

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

15. Was applicant captured as a prisoner? No If so, when and where? —

In what prison was he held? — and how long was he held?

when released

Sworn to and subscribed before me, this the

25 day of October 1919 } San Derby, En

J. M. Jarmon Ordinary

of Colt County. }

(SEAL)

Twelve months
 before he went into service
 and I did not keep up with them
 after that

NAME Irwin, Robert C.

YEAR 1920 COUNTY Cobb.

WHEN AND WHERE BORN?

A resident of Georgia all my life,
since 1842.

ENLISTED WHEN AND WHERE?

April, 1861, Marietta, Georgia.

RANK:

Drill Master.

Regiment was re-organized

and I was appointed Drill Master, Sec'y of War making the appointment.

COMPANY AND REGIMENT?

Company I, 7th Georgia Regiment Inf.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? April 1862 - Was examined by Dr. Roach and Dr. Brown ;
on account of my ill health and was put on the retired list.
Left my command at Bottom's Bridge, Virginia.

CAPTURED, WHEN AND WHERE?

RELEASED:

WHEN AND WHERE SURRENDERED?

Command surrendered April 9, 1865,
Appomattox, Virginia.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? On account of ill
health I was put on the retired list

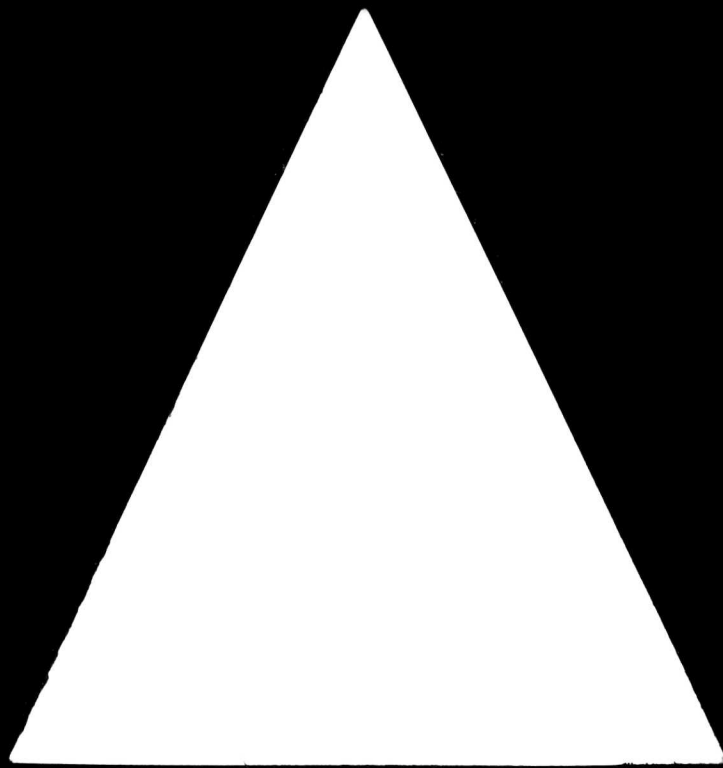
DIED, WHEN AND WHERE?

BURIED:

WITNESSES: Asa Darby, Sr., same service -----applicant..

..No data.

SB.



POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb Co

County.

I, *Martha A. Lindsey*, hereby authorize *John A. Lindsey*

of *Cobb Co* County to receive and receipt for the pension allowed and that he remit the same to me at *his office* by his check or registered mail.

Witness my hand this *7th* day of *July*, 1901.

Executed in presence of

Ordinary,

County.

Martha A. Lindsey, S.

{
Seal
}

Lindsey, Martha A.
Cobb Co
572

No. _____

WIDOW'S
Indigent Pension.
1901.

Name *Martha A. Lindsey*

County *Cobb*

Widow of *James Lindsey*

Cobb Co *1st Dist*

Approved *48* 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

1901.

8/19/01

POWER OF ATTORNEY.

STATE OF GEORGIA.

I, Martha A. Jacy County. }
 hereby authorize John Lindsey
 of Cobb County to receive and receipt for the pension allowed and that he
 remit the same to me at his office by his check or registered mail.
 Witness my hand this 7th day of Aug. 1901.
 Executed in presence of
Ordinary,
County.

{ REAL }

WIDOW'S
 Indigent Pension.
 1901.

Name Martha A. Jacy
 County Cobb
 Widow of James Jacy
3rd in Regt. 1st
64th
 Approved 64th 1901.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO

1901.

Printed at the State Printer, Atlanta, Ga.

Questions for Applicant.

STATE OF GEORGIA,

Cobb County. }
Martha A. Jacy of said State and County, desiring to
 avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly,
 passed 1900, hereby submits the proof, and after being duly sworn true answers to make to the
 following questions, deposes and answers as follows:
 1. What is your name and where do you reside? (Give State, County and Post Office.)
Martha A. Jacy Cobb County
 2. How long and since when have you been a resident of this State? All my life
since 1830
 3. When and where were you born? 1830 St. Albans Co. Vt.
 4. When and where was your husband born—state his full name, and when were you and he married?
Cobb Co. 1832 James Jacy
 5. When and where, and in what Company and Regiment did your husband enlist or serve during the
 war between the States? 1862 Marilla Co. Co. A 1st Regt. Va. State Troops
 6. How long did your husband serve in said Company and Regiment? Six Months and then he was discharged
 7. When and where did your husband's Company and Regiment surrender and was discharged?
Do not know
 8. Was your husband present at the time and place when his Company and Regiment surrendered?
He was not
 9. If not with his command at surrender, state clearly and specifically where he was, when he left com-
 mand, for what cause, and by what authority? After being 6 months he was detailed
to work on the road which he followed until he was
captured at Vicksburg, Miss. and was sent to Camp
 10. When and where did your husband die? In 1866 at Vicksburg
 11. Which of the following grounds do you base your application for Pension, viz: First—Age and
 Poverty; Second—Infirmary and Poverty, or Third—Blindness and Poverty? Age, Infirmary
and Poverty
 12. If upon the first ground, state how long you have been in such a condition that you cannot earn
 your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon
 the third, state whether you are totally blind, and when and where you lost your sight. Up the
past three years I am nearly blind
 13. What has been your occupation since your husband's death? House work, cooking
picking cotton & has in all until about three years
 14. How much can you earn gross, by your own exertion or labor? Nothing
 15. What property, real or personal, or income do you have or possess, and its gross value?
Nothing
 16. What property, real or personal, did you possess at death of husband or he left you, and of the year
 1899-1900 and what disposition, if any, by sale or gift, have you made of the same? None had
nothing and nothing was left by him
 17. In what counties did you reside in 1899 and 1900, and what property did you return for taxation?
Cobb County Nothing
 18. How have you been supported since death of husband, and especially for 1899 and 1900?
My son and brother has supported me
 19. How much did your support cost for each of those years, and how much did you contribute by your
 own labor or income? fifty or sixty dollars I only done what little house
 20. What was your employment during 1899 and 1900—how much did you receive for each year?
Nothing Nothing
 21. Have you a family? If so, who composes such family? Give their means of support. Have they
 any lands or other property? No
 22. Have you ever made an application for pension before? Yes
 23. How many applications have you made for a Pension, and under what claim? Twice, as
Widow of Union Soldier
 Sworn to and subscribed before me this 6th
 day of February 1901
John Lindsey Ordinary,
Cobb County.

work 8 months ago since which I have been unable to work when able I should have wanted to work

Questions for Witnesses.

STATE OF GEORGIA,

County.

Cobb County, having been presented as a witness in support of the Application of Mrs. Martha A. Levy for a Pension under the Act of 1900, and after having been duly sworn true answer to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? S. R. Beasley, Cobb County, Georgia.
2. Are you acquainted with the applicant, Mr. Martha A. Levy? Ever since she was born.
3. Where does she reside, and how long and since when has she been a resident of this State? She resides in Cobb County, Georgia, and has been in Georgia all her life.
4. When and where was she born? She was born in Cobb County, Ga., in 1830.
5. Were you ever acquainted with her husband? I was.
6. Where did he reside in 1861? in Cobb County.
7. When and to whom was he married? He was married to the applicant in 1853.
8. When and where was he born? in Cobb County, Ga., in 1832.
9. How long have you known him? Since 1853.
10. When and where did James Levy enlist in the war between the States, and in what Company and Regiment did he enlist and how do you know this? He enlisted in the 6th Regt. of the 1st Div. of the 1st Army, and was with him on the 1st of March, 1862, at the Battle of Shiloh. He was with him on the 1st of March, 1862, at the Battle of Shiloh. He was with him on the 1st of March, 1862, at the Battle of Shiloh.
11. How long did he perform regular military duty?
12. When and where was his Company and Regiment surrendered and discharged from service?
13. Were you with the command when it surrendered?
14. Was James Levy the husband of applicant present?
15. If not present, where was he?
16. When and where did he leave his Command?
17. For what cause?
18. By whose authority he left?
19. How do you know all this? (State fully and clearly.)

18. When and where did James Levy die? He died in Cobb County, Ga., in 1886.
19. Where did he reside at his death and how long had he been a resident of Georgia at his death? He resided in Cobb County, Georgia, and had lived in this State all his life.
20. Do you of your own knowledge know that applicant is the lawful widow of James Levy? I do.
21. Has she remained unmarried since her soldier husband's death, and is now his widow? Yes.
22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge? She has no property or income. I know it by being a close neighbor, and well acquainted with her circumstances.
23. What property, effects or income did applicant possess in 1899 and 1900 and what disposition did she make of it? She had none.
24. Has applicant conveyed any property in last two years or given any away, if so what was it and to whom? She has had none.

25. What is applicant's physical condition and her chances and ability to earn a support? She is 70 years old, very frail and infirm, and totally unable to earn a support by labor.

26. Is applicant able to earn a support at labor of any sort, if not why? She is not on account of age and infirmity, as above stated.
27. How was she supported for 1899 and 1900? By her Mother for part of time, and by her brother for the rest of time.
28. How much did applicant contribute to her support for last two years? Nearly anything.
29. Give a full and complete statement of applicant's physical condition? She is very old and infirm, and in very bad health most of the time, and I know she is totally unable to work of any consequence.
30. What interest have you in the recovery of this pension by the applicant? None at all.

Sworn to and subscribed before me this 7th

day of July 1901
John C. Gentry Ordinary,
Cobb County.

S. R. Beasley
 Witness.

Affidavits of Physicians.

STATE OF GEORGIA,

Cobb County.
 I, John H. Simpson, M.D., both known to me to be reputable physicians of said county, who, being severally sworn, say on oath that they have examined carefully Mrs. Martha A. Levy applicant for a Pension under Act of 1900, and after such personal examination say that her physical condition is such as to render her unable to perform the usual avocations of life.
 and we have no interest in said pension if allowed.
 Sworn to and subscribed before me this 7th
 day of July 1901
John C. Gentry Ordinary,
Cobb County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cobb County.
 I, John C. Gentry, Ordinary in and for said county, hereby certify that the applicant, Mrs. Martha A. Levy, resides in said county, and has been a bona fide resident of this State since 1853 day of March 1901, and that the witnesses, Mr. S. R. Beasley and John C. Gentry are entitled to full faith and credit.
 I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavit was read to the applicant and witnesses before the same was signed and subscribed.
 I further certify that the tax digest of Cobb county shows that applicant returned for taxation in her own name in 1899 no dollars worth of property, and in 1900 no dollars worth of property.
 Witness my hand and official seal, this 7th day of July 1901
John C. Gentry Ordinary,
Cobb County.

NOTES—1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth; so help you God."
 2. Additional affidavits may be attached, if blank spaces are insufficient.
 3. All affidavits must be made before Ordinary.
 4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 30th April, 1865, not entitled.
 5. Witnesses and two Physicians are necessary to make out claims.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }
Cobb

I, Martha A. Gray

, hereby authorize

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 Jan 1902.

Martha A. Gray [L. S.]

Executed in presence of

J. M. Gamm

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }
Cobb

I, Martha A. Gray

, hereby authorize

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 Jan 1905.

Martha A. Gray [L. S.]

Executed in presence of

Martha A. Gray

Gray, Martha A.
Cobb County
To Those Heretofore Paid

1902.

No. 147

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. Martha A. Gray
Cobb

County,

Widow of

Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1902

AND HANDLED TO

Gray

DEPT. OF WAR, BUREAU OF PENSIONS, WASHINGTON, D. C.

Gray, Martha A.
Cobb County
To Those Heretofore Paid.

1905.

No. 207

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO

Mrs. Martha A. Gray
Cobb

County,

Widow of James Gray

Regiment.

1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1905.

AND HANDLED TO

Gray

DEPT. OF WAR, BUREAU OF PENSIONS, WASHINGTON, D. C.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA.

County of Cobb

PERSONALLY COMES Mrs.

Martha A. JoryCobb

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

1880

That she is the Widow of

who was a soldier in Company

Regiment of

49th Regt

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

July, 1862, and served in the Army up toon the 1886 day ofJune

That he died on

Owing to age & infirmity
and poverty, Dependent is unable to
support herself

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, and that she became his wife in
the year 1853.

Dependent has been resided in said County, under Act 1900, for the year 1903, 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 June, 1902.

John A. Jory, Ordinary.

Post Office

State of Georgia,

Cobb

County.

Ordinary of said County, certifies that I am well

acquainted with Mrs. Martha A. Jory, 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

1st

Given under my official signature and seal, this

9th day ofJune

1902.

Official

Seal.

Ordinary of

Cobb

County.

NOTE.—All blanks must be filled.

Vouchers and affidavits must bear date after January 1st, 1902.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA.

County of Cobb

PERSONALLY COMES Mrs.

Martha A. JoryCobb

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

That she is the Widow of

who was a soldier in Company

Regiment of

49

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

July, 1862, and served in the Army up toon the 1886 day of

That he died on

age & poverty

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, and that she became his wife in
the year 18

I have been allowed an Indigent pension as a resident of Cobb
County, under Act 1900, for the year 1904, and now apply for the pension provided by law for the
year ending December 31, 1905.

Sworn to and subscribed before me,

this 1st day of January, 1905.

John A. Jory, Ordinary.

Post Office

State of Georgia,

Cobb

County.

Ordinary of said County, certifies that I am well

acquainted with Mrs. Martha A. Jory, 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, 1874.Given under my official signature and seal, this 21st day of January, 1905.

Official

Seal.

Ordinary of

Cobb

County.

NOTE.—All blanks must be filled.

Vouchers and Affidavits must bear date after January 1st, 1905.

POWER OF ATTORNEY.

STATE OF GEORGIA

Cobb 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.

Martha A. Lindsey [L. S.]

Executed in presence of

[Signature]

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, _____, hereby authorize

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 _____ 1904.

Martha A. Lindsey [L. S.]

Executed in presence of

[Signature]

1903.

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

Martha A. Lindsey
Widow of _____
Cobb County,
Co. A, Regiment _____

JOHN W. LINDSEY,
(Commissioner of Pensions)

WARRANT ISSUED
1/23/1903
AND HANDER TO
[Signature]

MADE BY AUTHORITY OF THE BOARD OF PENSIONS, 1903.

TO THOSE HERETOFORE PAID.

1904.

WIDOW'S PENSION

FOR
YEAR ENDING DECEMBER 31, 1904.

Martha A. Lindsey
Widow of _____
Cobb County,
Co. A, Regiment _____

JOHN W. LINDSEY,
(Commissioner of Pensions)

WARRANT ISSUED
JAN 25 1904
AND HANDER TO
[Signature]

MADE BY AUTHORITY OF THE BOARD OF PENSIONS, 1904.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of

PERSONALLY COMES Mrs.

Martha A. Long

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 *1850*. That she is the Widow of

James Long who was a soldier in Company

A of the *1st* Regiment of *Co. Va.*

Volunteers, that he enlisted in said regiment on or about the month of *July 1862*

186*2*, and served in the Army up to *Jan 1863*. That he lost his

life on the *1st* day of *1866* (State here

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

Owing to an infirmity called

Paralysis

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 *1853*.

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 *2* day of *Jan* 1903.

John Anthony Ordinary. Post-Office *Mark*

State of Georgia, I, *John Anthony*

County. Ordinary of said County, certify that I am well

acquainted with Mrs. *Martha A. Long*, 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* 18*53*.

Given under my official signature and seal, this *2* day of *Jan* 1903.

John Anthony 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

PERSONALLY COMES Mrs.

Martha A. Long

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 *1850*. That she is the Widow of

James Long who was a soldier in Company

A of the *1st* Regiment of *Co. Va.*

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

186*2*, and served in the Army up to *Jan 1863*. That he lost his

life on the *1st* day of *1866* (State here

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

Owing to exposure

in U.S. prison he contracted some lung

disease from which he died

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a

soldier, and that she has never married since his death aforesaid, and that she became his wife in

the year *1853*.

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 *2* day of *Jan* 1904.

John Anthony Ordinary. Post-Office *Mark*

State of Georgia, I, *John Anthony*

County. Ordinary of said County, certify that I am well

acquainted with Mrs. *Martha A. Long*, 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* 18*53*.

Given under my official signature and seal, this *2* day of *Jan* 1904.

John Anthony 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, Martha A. Levy, 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 _____

day of January, 1906.

Martha A. Levy [L. S.]
John Lindsey

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

I, Martha A. Levy, 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 _____

day of January, 1907.

Martha A. Levy [L. S.]
John Lindsey

Executed in presence of _____

To Those Heretofore Paid.

1906.

No. 214

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1906.

Mrs. Martha A. Levy

Cobb County,

Widow of James A. Levy

Co. A. 1st Regt.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
1/22 1906,

AND HANDED TO

Levy

THE PATENT OFFICE AND PUBLISHED BY, ATLANTA, GA.

Levy, Martha A.

Cobb County

To Those Heretofore Paid.

1907.

No. 214

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1907.

Mrs. Martha A. Levy

Cobb County,

Widow of James A. Levy

Co. A. 1st Regt.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
1/21 1907.

AND HANDED TO

THE PATENT OFFICE AND PUBLISHED BY, ATLANTA, GA.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 2

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES Mrs.

Martha A. Gray

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.

That she is the Widow of

who was a soldier in Company

James Gray

of the 1st Ga.

Regiment of Ga.

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

1868, and served in the Army up to

1868

That he died on

the day of

1868

Age & family

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1868

I have been allowed an Indigent pension as a resident of Cobb

County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the year ending December 31, 1906.

Sworn to and subscribed before me

this 8 day of Jan 1906.

Ordinary.

Martha A. Gray

Post Office

State of Georgia,

County.

Ordinary of said County, certify that I am well

acquainted with Mrs. Martha A. Gray, 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 21

day of Jan 1868

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

Official Seal

Ordinary of

County.

NOTE.—All blanks must be filled.

Vouchers and Affidavits must bear date after January 1st, 1906.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 2

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES Mrs.

Martha A. Gray

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.

That she is the Widow of

who was a soldier in Company

James Gray

of the 1st Ga.

Regiment of

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

1868, and served in the Army up to

1868

That he died on

the day of

1868

Infinitely age & family

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1868

I have been allowed an Indigent pension as a resident of Cobb

County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me

this 8 day of Jan 1907.

Ordinary.

Martha A. Gray

Post Office

State of Georgia,

County.

Ordinary of said County, certify that I am well

acquainted with Mrs. Martha A. Gray, 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 8 day of Jan 1907.

Official Seal

Ordinary of

County.

NOTE.—All blanks must be filled.

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

NOTE—All blanks must be filled.

Vouchers and Affidavits must bear date after January 1st, 1906.

Ordinary of Mr. J. County.

NOTE—All blanks must be filled.

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

Ordinary of Mr. J. County.

OFFICE OF
JOHN AWTREY,
ORDINARY, COBB COUNTY.

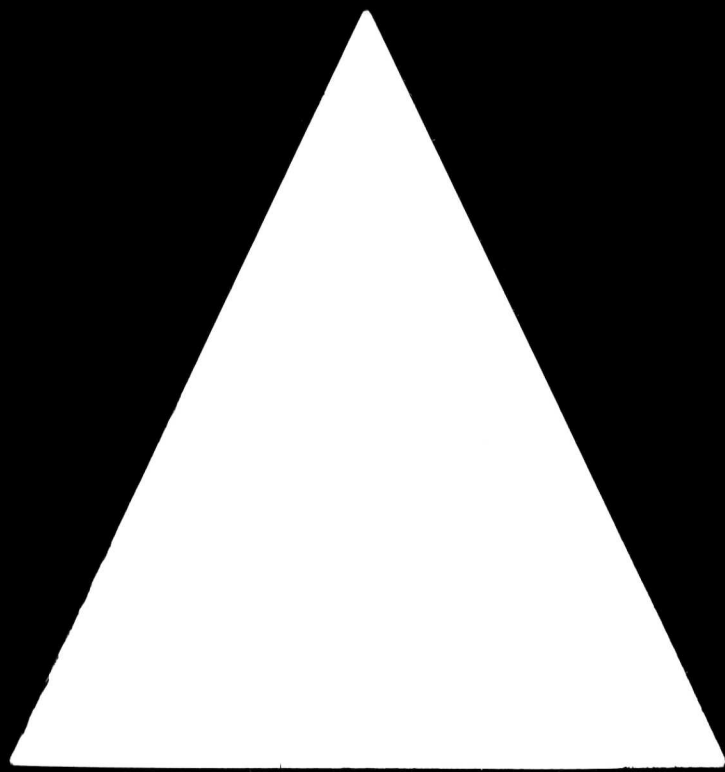
Marietta, Ga., Feb'y 7th, 1901.

I, W. S. Mason, was personally acquainted
with James Sney, husband of the appli-
cant, Mrs. Martha A. Sney—

James Sney enlisted in Co. A, 1st Regt.
Ga. State Troops at Roswell, Ga.
on ———— 1862. He served in
said Company and Regt. for six months,
being the term for which he enlisted,
and at its expiration he was mustered
out, ~~He was there~~ at the time of his enlistment

Sworn to and subscribed
before me this Feb'y
7th, 1901.

John Awtrey,
Ordinary,
Cobb County, Ga.



POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY, }

I, _____

of _____

being authorized

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 _____

Jackson, L.D.
Cobb County

No. _____

on 1904

INDIGENT PENSION.

Feb 1906

Name L.D. Jackson

County Cobb

Co. E 24th 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.

4/18/06

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize

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

at _____ day of _____ by _____

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

[L. S.]

Executed in presence of _____

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

County.

I, L. D. Jackson of said State and County, desiring to avail himself of the Pension Act (Section 1284, Code), hereby submit his proofs, and after being duly sworn true answers to make to the following questions, answers and answers as follows:

1. What is your name and where do you reside? (Give State County and post-office).
L. D. Jackson Marietta Ga.
2. How long and since when have you been a resident of this State? Eighty nine years
3. When and where were you born? 1847 in Ada Co. Ga.
4. When and where and in what company and regiment did you enlist or serve? Enl. May 1864 Co. E 2nd Ga. Reserves
5. How long did you remain in such company and regiment? till May 6-1865
6. When and where was your company and regiment surrendered and discharged? was discharged at Macon Ga. surrendered arms at Albany Ga May 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? _____
9. How much can you earn (gross) per annum by your own exertions or labor? nothing
10. What has been your occupation since 1865? Farming
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? Infirmary & poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? chronic bowel trouble for ten years or more so that I am now unable to work
13. What property, real and personal, or income, do you possess, and its gross value? none
14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? Had a cow & household furniture - have not owned a cow for a year - did to pay my debts a year ago.
15. In what County did you reside during those years, and what property did you then return for taxation? Ada
16. How were you supported during the years 1899, 1900, 1901 and 1902? By my children
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? 100.00 I contributed one fourth probably
18. What was your employment during 1898, 1899, 1901 and 1902? What pay did you receive in each year? farmed with children
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead, or other property? Their ages and how employed? Have no children except three grown & working for themselves - wife dead
20. Are you receiving any pension? If so, what amount and for what disability? no
21. Have you ever made an application for pension before? no
22. How many applications have you ever made and under what class? none

Sworn to and subscribed before me this the _____

day of Sept 1905

John Lindsey Ordinary,

of Ada County.

L. D. Jackson Applicant.

Every Question MUST Be Answered.

INDIGENT PENSION.

see 1006

Name L. D. Jackson
County Ada
Age 60 Res. 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, State Printer, Atlanta, Ga.

9/18/05

Jackson, L. D.
Ada County

No. 1006

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Cobb COUNTY.

S. F. May Jr of said State and County, having been presented as a witness in support of the application of L. S. Jackson for pension under section 1254, Code, and after being duly sworn truth answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside?
S. F. May Jr
Cobb Co Ga, P.O. Marietta Ga. Route 32
 2. Are you acquainted with L. S. Jackson the applicant; if so, how long have you known him?
Twenty years
 3. Where does he reside, and how long and since when has he been a resident of this State?
Cobb Co Ga & has been a resident of Ga all his life
 4. When, where and in what company and regiment did he enlist, and how do you know?
May-1864. Co B. 2nd Ga Reg. I was 1st Lieut of that Co.
 5. Were you a member of the same company and regiment?
Yes
 6. How long did he perform regular military duty?
Ull surrounds in 1865
 7. When and where was his command surrendered?
Surrendered arms at Albany Ga. Bled at Maceo Ga May-1865
 8. Were you present when it surrendered?
Yes
 9. Was applicant present?
Yes
 10. If he was not present, where was he?
Present
- When did he leave his command? _____ For what cause? _____
- By what authority he left? _____ How do you know all of this?
was present with Applicant

11. What property, effects or income has the applicant? (Give your means of knowledge.)
I live on 5006
12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899, 1900, 1901 and 1902?
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?
not that I know of
14. What is the applicant's occupation and physical condition?
Farming - Physical very bad
15. Is the applicant unable to support himself by labor of any sort; if so, why?
I consider him unable to support himself because of his bad health & age
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902?
Don't know
17. What portion of his support for these four years was derived from his own labor or income?
Don't 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 has been in bad health some 10 or 15 years & as he gets older health worse
19. Who composes family? What property have they? Children's age and their earning capacity?
His wife dead & children all about grown. I have no property that I know of
20. What interest have you in the recovery of a pension by this applicant?
No

Sworn to and subscribed before me, this the
12th day of Sept, 1905
Paul Hurst Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Cobb COUNTY.

Personally came before me Dr Chas H Fields and

both known to me as reputable physicians

of said County, who, being severally sworn, may 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:

Applicant: long chronic cystitis and chronic
diabetes also chronic diarrhea with irregular
action of long standing. Applicant is also
suffering from chronic uric acid rheumatism.
Applicant has resided on his estate 14 years after onset
and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this, the

16th day of Sept, 1905

John Hurst Ordinary.

Chas H Fields Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cobb COUNTY.

I, John Hurst Ordinary, in and for said County, hereby certify

that the applicant L. S. Jackson resides in said County, and has

been a bona fide resident of this State since the _____ day of _____ 189 _____

and that the witnesses, viz: A M Stanley & S F May Jr

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

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

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

returned for taxation in his name in 1899 _____ Dollars of

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

\$30 in 1902, \$30 in 1903 & \$30 in 1904 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 16th day of September, 1905

John Hurst Ordinary,

of Cobb County.

NOTE.

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

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Cobb COUNTY.

B. M. Stanley of said State and County, having been presented as a witness in support of the application of L. D. Jackson for pension under section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? B. M. Stanley
 2. Are you acquainted with L. D. Jackson, the applicant; if so, how long have you known him? yes forty years
 3. Where does he reside, and how long and since when has he been a resident of this State? Cobb Co - has since I have known 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?
 6. How long did he perform regular military duty?
 7. When and where was his command surrendered?
 8. Were you present when it surrendered?
 9. Was applicant present?
 10. If he was not present, where was he?
- When did he leave his command? X For what cause? X
By what authority he left? X How do you know all of this?

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

has an interest in his cow

12. What property, effects or income did the applicant possess in 1898, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same? has not owned more than a cow calf for ten years

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

no

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

has had chronic dysentery for twenty years - is really not able to work at all.

15. Is the applicant unable to support himself by labor of any sort; if so, why? yes for reasons above given - has had work on my farm for last 6 years

16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? by help of his children & friends - I have helped him for 4 years

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

Cobb doesn't say how much but he is unable to do so

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? answered in 15th

19. Who composes family? What property have they? Children's age and their earning capacity? wife dead children grown & youngest boy is now invalid

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

Sworn to and subscribed before me, this the 12 day of Sept, 1901

John A. Stanley B. M. Stanley Witness.
Cobb D. Co

POWER OF ATTORNEY.

STATE OF GEORGIA,

Abbe COUNTY. }
 I, *L. D. Jackson* hereby authorize
John A. Why 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 *May* 1906.
L. D. Jackson [L. S.]

Executed in the presence of

W. H. Mann

Form Section 1254
 (FOR THOSE ALREADY ENROLLED.)

No. *287*

INDIGENT
 SOLDIER'S PENSION
 1906.

Name *L. D. Jackson*

County *Colt*

On *Co. 1st* Regt. *Ma.*

Nurses

WARRANT ISSUED

1/22 1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

John

Not Public. Printed and Published by G. W. & J. H. 1906.

no date

Jackson L. D.,
Colt Co.

Form Section 1254
 (FOR THOSE ALREADY ENROLLED.)

No. *440*

INDIGENT
 SOLDIER'S PENSION
 1907.

Name *L. D. Jackson*

County *Colt*

On *Co. 1st* Regt. *Ma.*

Nurses

WARRANT ISSUED

1/22 1907.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Not Public. Printed and Published by G. W. & J. H. 1907.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,

Colt COUNTY. }
 I, *L. D. Jackson* hereby authorize
John A. Why 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 *May* 1907.
L. D. Jackson [L. S.]

Executed in presence of

W. H. Mann

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Cobb County.

Personally appears L.D. Jackson 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 E, of 25th Regiment of Reserves; that his physical condition is as follows: Infirmit & poverty

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this _____ day of July 1906. L.D. Jackson
John A. White Ordinary.

State of Georgia,

Cobb County.

I, John A. White Ordinary of said County,

do certify that I am well acquainted with L.D. Jackson the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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.
John A. White Ordinary Cobb County.



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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Cobb County.

Personally appears L.D. Jackson 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 E, of 25th Regiment of Reserves; that his physical condition is as follows: Infirmit & poverty

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this _____ day of July 1907. L.D. Jackson
John A. White Ordinary.

State of Georgia,

Cobb County.

I, John A. White Ordinary of said County,

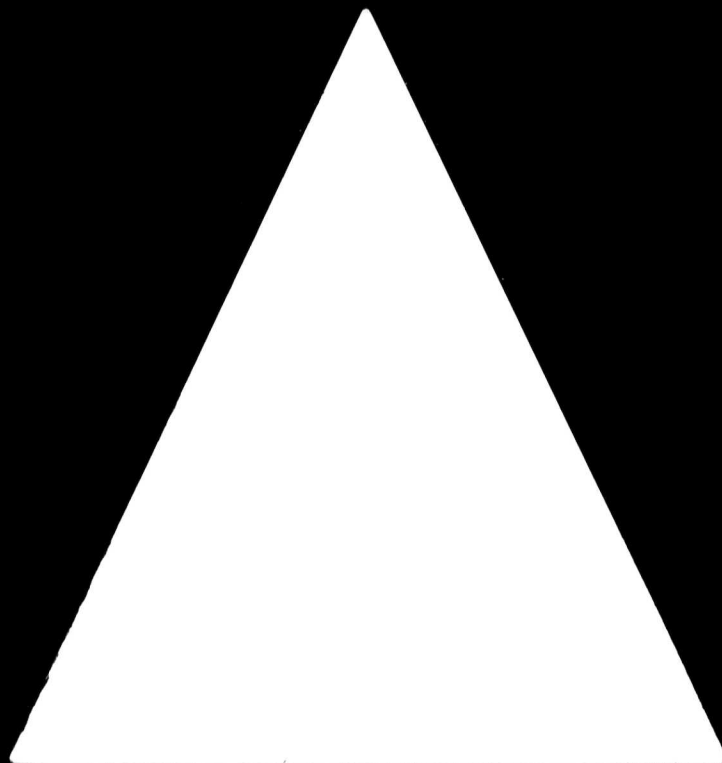
do certify that I am well acquainted with L.D. Jackson the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal this _____ day of July 1907.
John A. White Ordinary Cobb County.



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

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



Pension office 1125-1911.
Must furnish some testimony to account for husband from time witness was
wounded to the close of the war. The witness knows nothing of husband
after wounded

J. W. Lindsey, Com. Of Pensions.

Widow's Pension

UNDER ACT 1910

County Cobb

Name Mortley J Jackson

Widow of Jefferson Jackson

Ramsey Co 2nd Regt Inf

"Out of State"

J. W. LINDSEY,

Commissioner of Pensions.

Chas. F. Byrd, State Printer

11/15/11 11/15-1911
6/10/12 ENTERED ROSTER OFFICE

Pension office 1125-1911.
Must furnish some testimony to account for husband from time witness was
wounded to the close of the war. The witness knows nothing of husband
after wounded

J.W. Lindsey, Com. Of Pensions.

Widow's Pension

UNDER ACT 1910

County

Name

Widow of

Rank

Regt

J. W. LINDSEY,

Commissioner of Pensions

Form 7 (Widow's Pension)

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

STATE OF GEORGIA,

Cobb County.

Personally before me comes Martha S. Jackson of said State and County, and after being duly sworn, on oath says that she desires to apply for a pension allowed under the Act of _____, 1910, and submit testimony to make out the same, true answers makes to the following questions to-wit:

1. What is your name, and where do you reside? Martha S. Jackson, Roswell, Ga.
2. How long and since when have you been a continuing resident of the State of Georgia? Since Sept. 10, 1898.
3. When, where and to whom were you married? July 20, 1878, in Chicago to Stephen O. Jackson
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) In Cobb Co. 1861, Capt. Co. 1st Regt. Infantry, in 1862-2nd Regt. Infantry, 9th Mass. Infantry.
5. When and where did the Commands of your husband surrender or discharge from the army?
6. Was your husband personally present at the time of the surrender or discharge of this Command? Yes.
7. If he was not present state clearly where he was?
8. Where was his command when he left?
 - a. For what cause did he leave his Command?
 - b. By whose authority did he leave his Command?
 - c. For how long was he granted leave of absence?
 - d. What was his physical condition when he left his Command?
 - e. What effort did he make to return to his Command?
 - f. In what way was he prevented from going back to Command?
 - g. Was he captured by the enemy at any time?
 - h. If so, when and where captured and where held as a prisoner, and when and for what cause released?
9. When and where did your husband die? In Cobb Co. Sept. 1, 1898.
10. Were you residing together when he died? Yes.
11. If not, how long had you resided apart?
12. 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.) Trifling of land (10 acres) Value \$500.00
13. 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.) Nothing
14. What property of any description of any value have you now? 100 acres of land, 1908. Give list and cash value. \$100.00
15. What are your annual earnings or income and their value? Nothing
16. Have you heretofore been paid a pension by the State? No
17. If so, when and for what cause were you struck from the Roll?

Sworn to and subscribed before me this the

17th day of April, 1911.

Ordinary.

of Cobb County.

Martha S. Jackson

Questions for the Witnesses as to Service of Husband and Marriage.
STATE OF GEORGIA,

Cobb County, Personally before me comes P. D. Post who after being duly sworn true answers to the following questions, answers as follows:

1. What is your name and where do you reside? P. D. Post, Holly Springs, Ga.
2. How long and since when have you known Margaret Jackson applicant? From 1870 to 1911
3. How long and since when has she continuously resided in this State? (Give date.) My information is all her life
4. When and to whom was she married? Jefferson C. Jackson How do you know? He is her husband
5. How long and since when did you know Jefferson C. Jackson her husband? Since 1860
6. When and where did Jefferson C. Jackson the husband of Applicant die? at Robt. Camp, Ga. Sept. 1888.
7. Were the applicant and her husband living together as husband and wife at the date of his death? Yes
8. If not, how long did they live apart before his death? ✓
9. When, where and in what Company and Regiment did J. C. Jackson enlist? In 3rd Maryland Artillery, Capt. W. L. Ritter Sept. 1862 at Mississippi Ridge.
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 Sept. 1862 to surrender in N. C.
12. When and where did his Command surrender, and was discharged? N. C. at Granville
13. Were you personally present when it was surrendered? No If not where were you? In Hospital in Marion Ala and how came you there? Wounded in foot
14. Was the husband of applicant personally present at surrender? Yes If not where was he? when, where and for what cause did he leave Command? (Give date.) By whose authority did he leave his Command? and how long was he granted leave? How do you know all this?
15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command? ✓
16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? ✓

Sworn to and subscribed before me this the 1st day of August, 1911
J. M. Guss Ordinary.
of Cobb County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Cobb County, Personally before me comes J. A. Baringer & N. H. Mitchell who on oath says that they are freeholders of said County and that they know Margaret Jackson 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 \$
Notes and accounts due \$
Total \$

Schedule (B).
We know the property sold or given away since Nov. 4th, 1908, its cash value to be as follows:
Personal property \$
Money, Notes and Accounts \$

Schedule (C).
We also know what property she has now in her possession, use and control to-wit:
105- Acres of land, worth \$500.00
Horses and Mules 1 \$
Cows and Hogs 2 \$
Other Property \$
Income and Earnings \$
Total Value of all property and effects \$

Sworn and subscribed before me this the 1st day of April, 1911
J. M. Guss Ordinary.
of Cobb County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cobb County, Ordinary of said County do certify that I know Margaret Jackson the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th Nov. 1908.

That I also know J. A. Baringer & N. H. Mitchell the witness who swears to the service of husband, and J. A. Baringer & N. H. Mitchell who are freeholders. That all of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they all are truthful, trustworthy, and their statements are entitled to full faith and credit.

That the Tax Returns Margaret Jackson Returned for Tax is for 1908 \$25.00 for 1910 \$20.00

Sworn under my hand and official seal of office this 14th day of June, 1911.
J. M. Guss Ordinary.
of Cobb County.

(SEAL.)

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

State of Georgia
Executive Department
Atlanta

Georgia - Cobb County.

Personally appeared, J. M. Bishop who being duly sworn deposes and says that he was personally acquainted with Jephtha C. Jackson of said county, that said J. C. Jackson enlisted in the army of the Confederate States during the war between the States, that deponent saw said Jephtha C. Jackson in actual service the latter part of June and the first part of July 1864 below Kennesaw Mountain in Cobb County in Johnston's Army as an artilleryman, that deponent was informed that said Jackson belonged to the Third Maryland Artillery.

Deponent says he was in the said Johnston's Army and had personal knowledge of the said service therein of the said Jephtha C. Jackson.

Deponent further says that he has known the said Jephtha C. Jackson and his wife Martha J. Jackson for many years prior to the war, that said Jephtha C. Jackson returned to his home after the surrender and lived with his said wife in Cobb county until his death.

.....J. M. Bishop.....

Sworn to and subscribed before me this 17... of June 1912.

J. M. Garner
.....
Ordinary Cobb County, Georgia.

Georgia }
Cobb County } I J. M. Garner Ordinary of
Cobb County certify that J. M. Bishop
is a citizen of Cobb County and that
his statements are entitled to full faith
and credit
J. M. Garner
Ordinary Cobb County

J. M. Lamm
Ordinary with County

1861

Feb'y. 18. 1862.
 Scot. Leg. 7th Manassas
 Va. Aug 30. 1862.
 Discharged, disability
 Sept 19. 1862.

Jackson, Talula
Oct 19 1862
 No. *Am Co H Co*

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County *Col*
 Name *Talula Jackson*
 Widow of *Wesley H. Jackson*
 Company *A*
 Regiment *18th La St*
 Approved _____

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

10-30-1919

NOTES: Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that the answers you make to each of the questions asked you and the evidence you shall give will be the truth. So help you God." 1. Only widows who married prior to January 1, 1910, are eligible for pension. 2. Only widows who married prior to January 1, 1910, are eligible for pension. 3. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by him. 4. Affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by him. 5. Attach certified copies of marriage license if obtainable. If not, prove marriage by some person, or by general reputation.

STATE OF GEORGIA,
 County }
 I, *J. S. Gordon*, Ordinary of said County, do certify that I know *Talula Jackson* the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th November 1908; that I also know *J. S. Gordon* the witness who swears to the service of husband; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavit and that they both are truthful, trustworthy, and their statements are entitled to full faith and credit.
 Sworn under my hand and official seal of office this *25* day of *October*, 19*19*.
 (SEAL) *J. S. Gordon* Ordinary,
 County

Ordinary's Certificate

STATE OF GEORGIA,

Cobb COUNTY.

I, J. M. Gann Ordinary of said County, do certify that I know Jalula Jackson the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th November 1908; that I also know J. S. Goodwin the witness who swears to the service of husband; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they both are truthful, trustworthy, and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 24 day of October 1919.
(SEAL) J. M. Gann Ordinary.
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. Only widows who married prior to January 1st, 1861, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Widow's Pension

Under Act 1910 as Amended by Act of 1919

County

Name

Widow of

Company

Regiment

Approved

J. W. LINDSEY,

Commissioner of Pensions.

First Printing Co. State Printer, Atlanta.

10-30-1919

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

Questions for Applicant

STATE OF GEORGIA,

Cobb COUNTY.

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

1. What is your name, and where do you reside? Jalula Jackson Cobb County Ga
2. How long and since when have you been a continuing resident of the State of Georgia? All my life
3. When, where and to whom were you married? Jan. 12, 1872 Cobb Co. Ga
Wesley H. Jackson
4. Have you married since the death of first and soldier husband? No
5. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) Co. H 18th Ga
in Cobb County in the fall of 1861 at Big Shanty
6. When and where did the commands of your husband surrender or discharge from the army? Don't know
7. Was your husband personally present at the time of the surrender or discharge of this command? No
8. If he was not present state clearly where he was? he lost Reg at 2nd Battle of Manassas Aug 31, 1862
9. Where was his command when he left? VA
10. For what cause did he leave his command? Lost Reg
11. By whose authority did he leave his command? Officers in Command
12. For how long was he granted leave of absence? Discharged
13. What was his physical condition when he left his command? Lost Reg
14. What effort did he make to return to his command? No
15. In what way was he prevented from going back to Command? No
16. Was he captured by the enemy at any time? No
17. If so, when and where captured and where held as a prisoner, and when and for what cause released? No
18. When and where did your first husband die? Cobb Co. March 29, 1908
19. Were you residing together when he died? Yes
20. If not, how long had you resided apart? Yes
21. Are you now a widow? Yes
22. Have you or your husband heretofore been paid a pension by the State? husband: yes
now: yes

Sworn to and subscribed before me this the

24 day of Oct, 1919
J. M. Gann Ordinary
of Cobb County.

(SEAL)

Jalula Jackson

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA,

Cobb COUNTY,

Personally before me come J. S. Gaudin, 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? Marion S. Gaudin
2. How long and since when have you known Jackson applicant? all her life
3. How long and since when has she continuously resided in this State? (Give date.) Ever since 1846

4. When and to whom was she married? W. H. Jackson How do you know? They lived together until his death in 1862

5. How long and since when did you know W. H. Jackson the husband of Marion S. Gaudin applicant, die? Ever since he was killed in battle

6. When and where did W. H. Jackson the husband of applicant, die? near West Point in Cobb County Ga

7. Were the applicant and her husband living together as husband and wife at the date of his death? Yes

8. If not, how long did they live apart before his death? None

Were they divorced? No

9. When, where and in what Company and Regiment did W. H. Jackson enlist? In the fall of 1861 at Big Shanty in Co. K 15th Infantry

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 the fall of 1861 to discharge from hospital in Dec, 1862

12. When and where did his Command surrender, and was discharged? I was a prisoner at surrender and don't know when Command was discharged

13. Were you personally present when it was surrendered? No If not, where were you Atlanta and how came you there? I was a prisoner on parole and they marched Atlanta on my way home

14. Was the husband of applicant personally present at surrender? No If not where was he? At home in Cobb County

When, where and for what cause did he leave Command? (Give date.) December 1862 - Hospital

By whose authority did he leave his Command? None And how long was he granted leave? None

How do you know all this? I saw him when he fell shot through his leg leave the battle and was taken to hospital on August 31, 1862 and he never came off until he died

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

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? None - he came he couldn't walk without crutches

Sworn to and subscribed before me this the 24th day of Sept 1862 J. S. Gaudin

J. S. Gaudin Ordinary

Cobb County.

(SEAL)

Sworn to and subscribed before me,
this 10 day of September, 1932.
J. M. Gamm Ordinary.

- Application for Pension Due to a Deceased Pensioner

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

(Under Act Approved August 15, 1904)

GEORGIA, Cobb County.

Personally before me, the Ordinary of said County, comes L. J. Ward

of said County, who, after being sworn, on oath says that he knew Mrs. Lillie Jackson of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in Cobb County, in this State, on the 2 day of September, 1932

and that pensioner left no widow surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$ 309.00, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me,

J. M. Ramey Ordinary
Cobb County

(Seal of Ordinary)

L. J. Ward

CERTIFICATE OF ORDINARY

GEORGIA, Cobb County.

I, J. M. Ramey, Ordinary of said County, do certify that I personally know L. J. Ward, who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew Mrs. Lillie Jackson while in life and that this was the same person whose name appears on the Pension Roll of Cobb County, and was paid a Pension of Three Hundred Sixty (\$360) Dollars in said County for 1931, 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 9th day of September, 1932.

(Seal of Ordinary)

J. M. Ramey Ordinary
Cobb County

INSTRUCTIONS:

- 1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 2nd. Each account must be sworn to before the Ordinary, and in the following form:
"The above and foregoing account is rendered for services in the last illness (or 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, properly receipted, to the Pension Department.
- 6th. Ordinary should see that the back of this blank, when folded, is filled out.

State of Georgia Cobb County.

I J. M. Ramey Ordinary of said Co.
Hereby certify that the within
is a true copy of Marriage as
appears of record in my Office.
J. M. Ramey Ordinary.

MARRIAGE LICENSE

OF

AND

191

Issued

and recorded on page

Book of Marriage Licenses.

Ordinary

ITEMIZED hereto attached.

Sworn to and subscribed before me,

J. M. Rame Ordinary

Case County

(Seal of Ordinary)

L. J. Ward

CERTIFICATE OF ORDINARY

GEORGIA, *Case* County.

I, *J. M. Rame*, Ordinary of said County, do certify that I personally know *L. J. Ward*, 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 *Mr. Theodore Fisher* while in life and that this was the same person whose name appears on the Pension Roll of *Case* County, and was paid a Pension of *Three Hundred Sixty* (\$360) Dollars in said County for 19*21*, 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 *9th* day of *September*, 19*32*.

(Seal of Ordinary)

J. M. Rame Ordinary
Case County

INSTRUCTIONS:

- 1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 2nd. Each account must be sworn to before the Ordinary, and in the following form:
"The above and foregoing account is rendered for services in the last illness (or 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, properly receipted, to the Pension Department.
- 6th. Ordinary should see that the back of this blank, when folded, is filled out.

MARRIAGE LICENSE

OF

AND

191

Issued

and recorded on page

Book of Marriage Licenses.

Ordinary

2nd. Each account must be sworn to before the Ordinary, and in the following form:

"The above and foregoing account is rendered for services in the last illness (or 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, properly receipted, to the Pension Department.

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

1842

STATE OF GEORGIA

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

W. H. Jackson and *Fallula Dushane*
You are hereby authorized to join
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.

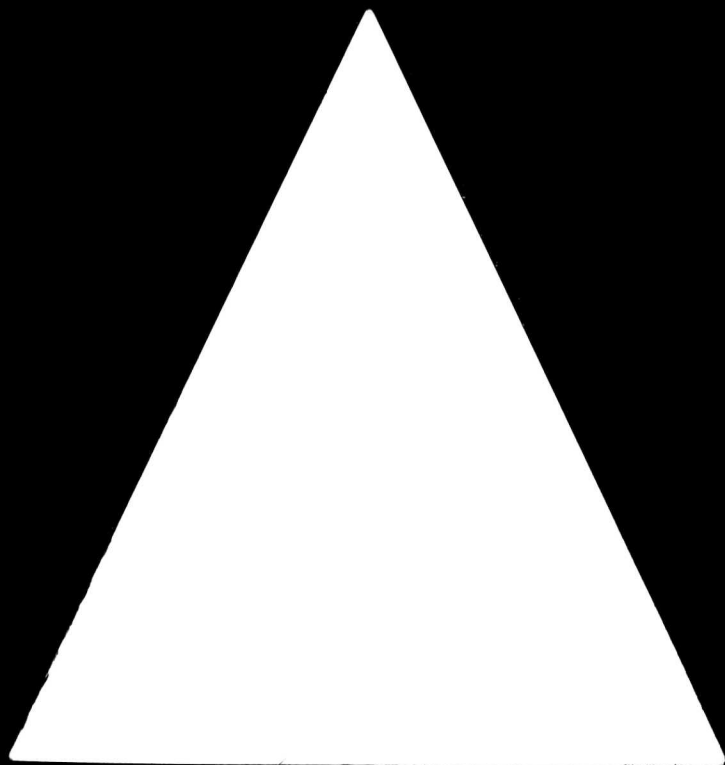
Given under my hand and seal this 16th day of
June 1872 19

STATE OF GEORGIA, COBB COUNTY

I Certify that *W. H. Jackson* and *Fallula Dushane*
were joined in Matrimony by me this 12 day of June 1872. Nineteen Hundred
and

Recorded Sept 1873 19

Wm. Campbell Ordinary.



Jackson, Wesley H.
#428

Jackson, Wesley H.

No. 232 Cable Co

APPLICATION FOR

Leg

FOR CONFEDERATE SOLDIER

Applicant Wesley H. Jackson

County Cable Co

Limb Leg below Knee

Amount \$75

Date of Warrant Jan 14 '79

Page

C. A. 180 Rgt

Isley

C 1952

STATE OF GEORGIA.

Cobb County.

Personally appeared before me *Stelly H Jackson* of the county of *Cobb*, State of Georgia, who, being duly sworn, deposes and says that he was on the 20th day of September, 1879, a bona fide resident of this State; that he enlisted in the military service of the Confederate States, or of this State, as a *Private* in Company *"A" 18* Regiment of *Georgia* Volunteers that while engaged in such military service, to-wit: at the battle or engagement of *Mammasa* in the State of *Virginia* on the *24th* day of *August*, 1862, he was wounded in the *right leg*, and that the same was amputated *below the knee*; that he has not received the payment allowed him for such limb under an Act entitled an Act to carry into effect the last clause of Paragraph 1, Section 1, Article 7 of the Constitution of 1877, approved September 20th, 1879; that he has *not* supplied himself with an artificial *leg*; or that, not having done so, he prefers to supply himself with an artificial *leg*.

Sworn to and subscribed before me this *13* day of *Decr*, 18*79*.
Wm. V. Gammit *Ord.* *Wesley N Jackson*
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, of the county of, State of Georgia, who, being duly sworn, deposes and says that he was in Company Regiment and that the above deponent, was a in said Company, and that this deponent knows that said lost a in the military service as said in the above affidavit.
 Sworn to and subscribed before me this day of 18.....

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

APPLICATION FOR

FOR CONFEDERATE SOLDIER

Affiant: *Stelly H Jackson*

County: *Cobb*

Rank: *Co. 9 6th Km*

Amount: *\$75*

Date of Return: *Dec 14 1879*

Page: *1*

C. A. 1879

112

Jackson, Stelly H.
#43 & 1879
282 Unit 108

AN ACT

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

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

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

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

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

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

A. O. BACON,
Speaker House Representatives
RUFUS E. LAWREN,
President Senate
ALFRED H. COLQUITT, Governor

STATE OF GEORGIA,

Cobb County,

Personally came Geo. S. Owen J. F. Collins
a John McLean
who, being duly sworn, depose and say they are acquainted with Mesley St. Jackson
and know that he lost a leg in the military service during the late war;
that said leg was amputated below the knee; that he is a bona fide
citizen of this State, and we are well satisfied that the facts stated by him in the above affidavit are true.

Sworn to and subscribed before me this 13 day of November, 1879.
W. M. Hammett Ordinary
Geo. S. Owen

STATE OF GEORGIA,

Cobb County,

I, H. M. Hammett Ordinary of Cobb
county, do certify that I am well acquainted with Mesley St. Jackson
the applicant for a leg, and am well satisfied that the facts stated by him in the foregoing
affidavit are true, and that I am well acquainted with Geo. S. Owen J. F. Collins
John McLean
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 13 day of November, 1879.

W. M. Hammett
Ordinary

W. H. Jackson, W. H. Jackson, W. H. Jackson

No. 1033

APPLICATION FOR ALLOWANCE

FOR YEAR ENDING OCTOBER 26, 1889

FOR
Applicant, *W. H. Jackson*
County, *Cobb*
Amount, *100*
Date of Warrant, *Aug 11*
Entered on record, *Oct 18 1889*
W. H. Jackson
SECRETARY EXECUTIVE DEPARTMENT.

A. L. Clay

STATE OF GEORGIA,

Cobb County, PERSONALLY appears *W. H. Jackson*, *Cobb* county, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has been such continually since the *14th* day of *August*, 18 *39*, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a *Private* in Company *A*, of *18th* Regiment of *Volunteers* *Jefferson's* Brigade; that whilst engaged in such military service, at the battle of *McMasters* in the State of *GA.*, on the *3rd* day of *August*, 186 *2*, he was wounded as follows: *By gunshot through right leg, broken knee, thrust through chest, amputation near knee joint.*

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

Sworn to and subscribed before me, this the *13th* day of *July*, 188 *9*, *W. H. Jackson*
J. W. Stommy
NOTE.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability.

STATE OF GEORGIA,

Cobb County, PERSONALLY comes before me Ordinary of said county, and both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined and after such examination say that the applicant has been injured as follows:

Sworn to and subscribed before me, this
day of 188

ORDINARY.

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

STATE OF GEORGIA

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

are persons of respectability, and that their statements are worthy of full credit and belief.

I further certify that before whom the foregoing affidavits were made and power of attorney was signed, is a of said county, and the said affidavits and signatures thereof are genuine.

Given under my official signature and seal, this *13th* day of *July*, 188*9*
W. H. Jackson
Ordinary of *Cobb* County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County, I, *W. H. Jackson*
Know all Men by these Presents, That I, *A. D. Lelay*
county of said State, do hereby appoint 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 by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

In witness whereof I have hereunto set my hand and seal, this *13th* day of *July*, 188*9*
W. H. Jackson (L. S.)

Executed in the presence of us:

L. W. Fowler
J. M. Poin
Ordary.

DIRECTION:

Send money to me as follows, by

to
County, Georgia.

P. O.

NOTES.

1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physician, and followed by a plain statement of facts showing the extent of the disability. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.
2. The law makes no allowance for an arm or leg, unless the arm or leg has been rendered substantially and essentially useless.
3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of life, etc." There is no qualification to the clause of the Act in reference to the arm or leg, but the limb must for all purposes be "substantially and essentially useless."
4. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."
5. If application is for loss of fingers or toes the proofs must be made to show the number, and points where amputated.
6. If papers are returned for correction, and amendments are added to any of the affidavits, the amendments must be made under oath before an officer, and the proofs must show that the amendments have been duly sworn to.
7. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.

STATE OF GEORGIA,

County.

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

I further certify that W. H. Jackson before whom the foregoing affidavits were made and power of attorney was signed, is a Notary Public of said county, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 10 day of Febry 1890

Ordinary

County.

STATE OF GEORGIA,

County.

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

I further certify that W. H. Jackson before whom the foregoing affidavits were made and power of attorney was signed, is a Notary Public of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 17 day of Febry 1891

Ordinary

County.

APPLICATION FOR ALLOWANCE.

FOR THE YEAR ENDING DECEMBER 31, 1890.

Low right leg

Applicant, W. H. Jackson

County, Cobb

Amount, 100.00

Date of warrant, Feb 11

Entered on record

Feb 11 1890

W. H. Jackson

W. H. Jackson

W. H. Jackson

W. H. Jackson

W. H. Jackson

W. H. Jackson

W. H. Jackson

W. H. Jackson

W. H. Jackson

W. H. Jackson

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W. H. Jackson

W. H. Jackson

W. H. Jackson

W. H. Jackson

STATE OF GEORGIA,

FOR APPLICANTS HOLDING ALLOWED PENSIONS.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County, PERSONALLY appears *W. H. Jackson* of *Cobb* county, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has been such continually since the *14th* day of *August* 1864; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *A*, of *18th* Regiment of *Georgia* Volunteers *Wafford*'s Brigade; that whilst engaged in such military service, at the battle of *Petersburg* in the State of *Virginia*, on the *30* day of *August* 1862, he was wounded as follows: *By minnie ball passing through right leg below the knee, causing amputation of right leg just below the knee.*

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

Sworn to and subscribed before me, this the *10* day of *February* 1890.

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, *W. H. Jackson* of *Cobb* county, in said State, do hereby appoint

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 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 *10* day of *February* 1890.

Executed in the presence of us:

J. D. Power
W. R. Power
Cobb County

Send money to me as follows, by

to

County, Georgia.

P. O.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

PERSONALLY appears *W. H. Jackson* 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 *14th* day of *August* 1839; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *A*, of *18th* Regiment of *Georgia* Volunteers *Wafford*'s Brigade; that whilst engaged in such military service at the battle of *Petersburg* in the State of *Virginia*, on the *30th* day of *August* 1862, he was wounded as follows: *By minnie ball passing through right leg below the knee, causing amputation of right leg just below the knee.*

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 *100* dollars, for *Right Leg*.

Sworn to and subscribed before me, this the *17* day of *July* 1891.

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, *W. H. Jackson* of *Cobb* County, State of Georgia, do hereby appoint

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 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 *17* day of *July* 1891.

Executed in the presence of us:

W. R. Power

DIRECTION.

Send money to me as follows, by

to

County, Georgia.

P. O.

STATE OF GEORGIA.

Cobb

County.

I, *J. M. Stone*

Ordinary of said county,

do certify that I am well acquainted with *W. H. Jackson* 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 *27* day of *Feb* 189*2*

J. M. Stone

Ordinary.

Cobb

County.

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb County.

Know all Men by these Presents, That I *W. H. Jackson* of *Cobb* County, State of Georgia, do hereby appoint

of *W. H. Jackson* my true and lawful attorney in fact, for me and my heirs, assigns and assigns, 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, and to execute and deliver 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 *Feb* 189*2* at *Cobb* County.

Executed in the presence of us:
J. M. Stone
W. H. Jackson

Send money to me as follows, by *W. H. Jackson* to *P. O.* County, Georgia.

Chas. Co.
No. 433
Jackson, W. H.
SOLDIER'S PENSION.
1892.

FOR THE YEAR ENDING OCTOBER 31, 1892.

Name *W. H. Jackson*
County *Cobb*
Disabling *Loss of leg*
Amount, \$ *100*
Entered on record *Met 3* 1892.
W. H. HARRISON,
Secretary Executive Department
No 2
AGENT,
Asclay
Care of Bureau, State Printer, Atlanta, Ga.

Jackson, W. H.
Cobb Co.
1893.

Application for Allowance
No. 596
Jan 27
Amount \$100
County Cobb
Amount \$100
Date of Warrant 3/1/93
Entered on record
Asclay
W. H. Jackson
W. H. Jackson

STATE OF GEORGIA.
FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Colb

County,

PERSONALLY appears

W. H. Jackson

of *Colb* 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 *14* day of *August* 1862; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *private* in Company *18* of *18* th Regiment of *Georgia* Volunteers *Wofford*'s Brigade: that whilst engaged in such military service at the battle of *Manassas* in the State of *Virginia*, on the *30* day of *August* 1862, he was wounded as follows:

By being shot through right leg about 15 ft. way between knee and ankle and causing said right leg to be amputated about two inches below the knee

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

One hundred Dollars for *1891*

Sworn to and subscribed before me this the

W. H. Jackson

77 day of *February* 1892.

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,

Colb

County,

Know all Men by these Presents, That I, *W. H. Jackson*

of *Colb* County,

County, in said State, do hereby appoint my true and lawful attorney in fact, for me and in my name, to receive and accept 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 *February* 1892.

W. H. Jackson

Executed in the presence of us:

J. M. Stone
J. M. Stone
Ordinary

DIRECTION.

Send money to me as follows, by

to

County, Georgia.

P. O.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Colb

County,

PERSONALLY appears

W. H. Jackson

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 *14* day of *August* 1862; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *private* in Company *18* of *18* th Regiment of *Georgia* Volunteers *Wofford*'s Brigade: that whilst engaged in such military service at the battle of *Manassas* in the State of *Virginia*, on the *30* day of *August* 1862, he was wounded as follows:

By gunshot striking right leg just below the knee joint, which leg he has since had amputated just below the knee joint.

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

One hundred dollars, for *1891*

Sworn to and subscribed before me, this, the

13 day of *March* 1892.

W. H. Jackson

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,

Colb

County,

I, *W. H. Jackson* Ordinary of said County,

do certify that I am well acquainted with *W. H. Jackson* the

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

affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this County.

I further certify that *W. H. Jackson* is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the *14* day of *August* 1862.

before which the foregoing affidavit was made, power of attorney was signed, is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the *14* day of *August* 1862.

the Commission of said *W. H. Jackson* is not said County, and the said affidavit and the power of attorney are genuine.

Given under my official signature and seal, this *13* day of *March* 1892.

W. H. Jackson Ordinary

W. H. Jackson County,

STATE OF GEORGIA,

Colb

County,

I, *W. H. Jackson* Ordinary of said County,

do certify that I am well acquainted with *W. H. Jackson* the

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

affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this County.

I further certify that *W. H. Jackson* is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the *14* day of *August* 1862.

before which the foregoing affidavit was made, power of attorney was signed, is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the *14* day of *August* 1862.

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb COUNTY. }
Know all Men by these Presents, That I,

County, State of Georgia, do hereby appoint

of *W. H. Jackson* 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 *March* 1894.

Executed in the presence of us

G. M. Fleming

DIRECTIONS.

Send money to me as follows, by

to

County, Georgia.

P. O.

(For Those Already Enrolled.)

No. *389*

Soldier's Pension.

1894.

Name

County

Disability

Amount, \$

1894.

W. H. HARRISMAN,

Secretary Executive Department.

WARRANT HANDLED TO

G. M. Fleming

Geo. W. Harrisman, State Printer, Atlanta.

Jackson W. H.
Cobb Co

(For Those Already Enrolled.)

No. *311*

SOLDIER'S PENSION.

1895.

Name

County

Disability

Amount, \$

1895.

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDLED TO

W. H. Jackson

Geo. W. Harrisman, State Printer, Atlanta.

W. H. Jackson

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County. }

KNOW ALL MEN BY THESE PRESENTS, That

County, State of Georgia, do hereby appoint

of *W. H. Jackson* 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 *March* 1895.

Executed in presence of us

A. J. Fuller

DIRECTIONS.

Send money to me as follows, by

to

County, Georgia.

P. O.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

PERSONALLY appears *W. H. Jackson 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 *14th*
day of *August* 1839, 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 *A*, of 18th Regiment
of *Volunteers* *Waller's* Brigade; that whilst engaged in
such military service at the battle of *Manassas* in the State
of *VA*, on the *30th* day of *August* 1862, he was
wounded as follows:

*In the right leg from end on
account of a high wound
the right leg was am-
putated just below the knee*

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

\$100. dollars, for the year 1893
Sworn and subscribed before me, this, *16th* day of *March* 1894. } *W. H. Jackson*
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 *W. H. Jackson* the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.

Given under my official signature and seal, this *16th*
day of *March* 1894.



J. M. Stone
Ordinary
Cobb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

PERSONALLY appears *W. H. Jackson 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 *August* 1839, 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 *A*, of 18th Regiment
of *Volunteers* *Waller's* Brigade; that whilst engaged in
such military service at the battle of *Manassas* in the State
of *VA*, on the *30th* day of *August* 1862, he was
wounded as follows:

*In the right leg from end on
account of a high wound
the right leg was am-
putated just below the knee*

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 *100.* dollars, for the year 1894

Sworn to and subscribed before me, this, *16th* day of *March* 1895. } *W. H. Jackson*
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 *W. H. Jackson* the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.

Given under my official signature and seal, this *16th*
day of *March* 1895.



J. M. Stone
Ordinary
Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, *W. H. Jackson* hereby authorize *J. M. Stom*
of *Marion Ga.*

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

at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *3*
day of *March* 1896.

W. H. Jackson [L. S.]

Executed in presence of us

G. M. Fleming

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, *W. H. Jackson* hereby authorize *J. M. Stom*
of *Marion Ga.*

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

at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *2nd*
day of *March* 1897.

W. H. Jackson [L. S.]

Executed in presence of

Jackson, W. H.

Cobb Ga.

ACT OF M. OCT. 1897.
(For Those Already Enrolled.)

No. *3199*

SOLDIER'S PENSION.

1896.

Name *W. H. Jackson*

County *Cobb*

Disability *was right leg*

Amount, \$ *100.*

3/20 1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

all
Geo. W. Harrison, State Printer, at N.Y.

He data

Jackson, W. H.
Cobb County

ACT OF M. OCT. 1897.
(For Those Already Enrolled.)

No. *3211*

INVALID

SOLDIER'S PENSION.

1897.

Name *W. H. Jackson*

County *Cobb*

Disability *was right leg*

Amount, \$ *100.*

March 16 1897.

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

all
Geo. W. Harrison, State Printer, at N.Y.

no data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears M. H. Jackson 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 August 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 K, of 18th Regiment
of Va. Volunteers, Hood's Brigade; that whilst engaged
in such military service in the State of Va., on the 31 day
of August 1862, he was wounded, injured or diseased as follows:

By gunshot striking
right leg between the knee
and ankle, thereby causing
severe lacerations to leg, amputated
just below the knee

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887,
and the acts amendatory thereof, and makes application for the pension to which he is
entitled for the year ending October 26th, 1896. I have heretofore as a resident of
Cobb county been allowed a pension of \$100
dollars, for the year 1896

Sworn to and subscribed before me, this, 3rd day of March 1896, M. H. Jackson
J. L. Stone O. Y.

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

Given under my official signature and seal, this 3rd
day of March 1896.



Ordinary J. L. Stone Cobb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears M. H. Jackson 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 14
day of August 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 K, of 18th Regiment
of Va. Volunteers, Waddy's Brigade; that whilst engaged
in such military service in the State of Va., on the 30 day
of August 1862, he was wounded, injured or diseased as follows:

By gunshot striking
the right leg between the knee
and ankle, fracturing the bone
so that it was amputated
below the knee.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887,
and the acts amendatory thereof, and makes application for the pension to which he is
entitled for the year ending October 26th, 1897. I have heretofore under said law as a
resident of Cobb county been allowed an invalid pension of
\$100 Dollars, for the year 1896

Sworn to and subscribed before me, this, 3rd day of March 1897, M. H. Jackson
J. L. Stone O. Y. POST OFFICE Last Mt.

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

Given under my official signature and seal, this 2nd
day of March 1897.



Ordinary J. L. Stone Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

I, W. H. Jackson County, Cobb hereby authorize J. M. Stone of Marionetta Ga. to receive and receipt for the pension paid hereon and request that he remit same to me by him at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 23rd day of Feb 1898. W. H. Jackson [L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

I, W. H. Jackson County, Cobb hereby authorize J. M. Stone of Marionetta Ga. to receive and receipt for the pension paid hereon and request that he remit same to me by him at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 23rd day of Feb 1898. W. H. Jackson [L. S.]

Executed in presence of

(For Those Already Enrolled.)

No. 3229

INVALID

SOLDIER'S PENSION.

1898.

Name W. H. Jackson
County Cobb
Disability Loss leg.
Amount, \$ 100.
3/4

1898.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDLED TO

[Signature]

Geo. W. Harrison, State Printer, Atlanta

(For Those Already Enrolled.)

No. 3170

INVALID

SOLDIER'S PENSION.

1898.

Name W. H. Jackson
County Cobb
Disability Loss leg
Amount, \$ 100.
3/4

1898.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDLED TO

[Signature]

Geo. W. Harrison, State Printer, Atlanta

Marionetta

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears *W. H. Jackson* 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 *15* day of *August* 18*39*, that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *A*, of *18th* Regiment of *Volunteers*, *Wafford* Va., on the *30* day of *August* 1862, he was wounded, injured or diseased as follows:

By gunshot striking the right leg below knee causing the said right leg to be amputated just below the knee.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1898. I have heretofore under said law as a resident of *Cobb* county been allowed an invalid pension of *\$100* Dollars, for the year 189*7*.

Sworn to and subscribed before me, this, the *23* day of *July* 1898. *W. H. Jackson* POST-OFFICE *East Mt.*

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

STATE OF GEORGIA,

Cobb County.

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

Given under my official signature and seal, this *23* day of *July* 1898.

J. W. Stone Ordinary *Cobb* County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears *W. H. Jackson* 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 *15* day of *August* 18*39*, that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *A*, of *18th* Regiment of *Volunteers*, *Wafford* Va., on the *30* day of *August* 1862, he was wounded, injured or diseased as follows:

By gunshot striking the right leg on account of which the said leg was amputated just below the knee.

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1898. I have heretofore under said law as a resident of *Cobb* County been allowed an invalid pension of *\$100* Dollars, for the year 189*7*.

Sworn to and subscribed before me, this, the *23* day of *July* 1898. *W. H. Jackson* POST-OFFICE *East Mt.*

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

STATE OF GEORGIA,

Cobb County.

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

Given under my official signature and seal, this *10th* day of *July* 1898.

J. W. Stone Ordinary *Cobb* County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, W. H. Jackson hereby authorize
John Store of Marietta Ga.
to receive and receipt for the pension paid hereon and request that he remit same to
me by mail
at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 6th
day of March 1900.

W. H. Jackson [L. S.]

Executed in presence of
Thos. J. Hamby

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, W. H. Jackson hereby authorize
John Bentley of Marietta, Ga.
to receive and receipt for the pension paid hereon and request that he remit same to
me by mail
at Marietta

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 4
day of January 1901.

W. H. Jackson [L. S.]

Executed in presence of
Thos. J. Hamby

Jackson, W. H.
Cobb-G.
CODE SECTION 126
(For Those Already Enrolled.)
No. 1285-
INVALID
SOLDIER'S PENSION.
1900.
Name W. H. Jackson
County Cobb
Disability Leg
Amount, \$ 100.
Warrant issued Mar 7 1900.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO
Store
W. H. Jackson
Cobb-G.

Jackson, W. H.
Cobb-G.
CODE SECTION 126
(For Those Already Enrolled.)
No. 152
DISABLED
SOLDIER'S PENSION.
1901.
Name W. H. Jackson
County Cobb
Disability Leg
Amount, \$ 100.00
Jan. 16 1901.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO
Bentley
W. H. Jackson
Cobb-G.
no data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears W. H. Jackson of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State and County, and has resided therein continuously ever since the 14th day of August 1839; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a private in Company A, of 18th Regiment of La. Volunteers, Wafford's Brigade; that whilst engaged in such military service in the State of Va., on the 30th day of August 1862, he was wounded, injured or diseased as follows:

By gunshot striking the right leg on account of which wound said leg was amputated just below the knee

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1900. I have heretofore under said law as a resident of Cobb County been allowed an invalid pension of \$100. Dollars, for the year 1899.

Sworn to and subscribed before me, this 6th day of Mar 1900. W. H. Jackson POST OFFICE

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

STATE OF GEORGIA,

Cobb County.

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

Given under my official signature and seal, this 6th day of Mar 1900. J. M. Stoney Ordinary Cobb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears W. H. Jackson 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 14th day of August 1839; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a private in Company A, of 18th Regiment of La. Volunteers, Wafford's Brigade; that whilst engaged in such military service in the State of Va., on the 30th day of August 1862, he was wounded, injured or diseased as follows:

By gunshot striking the right leg on account of which wound said leg was amputated just below the knee

Deponent makes application for the pension to which he is entitled for year ending October 26th, 1901. I have heretofore under said law as a resident of Cobb County been allowed an invalid pension of \$100. Dollars, for the year 1900.

Sworn to and subscribed before me, this 4th day of January 1901. W. H. Jackson Postoffice Lost Mt. Ga. John Stoney Ord.

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

STATE OF GEORGIA,

Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, W H Jackson hereby authorize John Bentley of Cobb Co to receive and receipt for the pension paid hereon and request that he remit same to

by himself at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 1st day of January 1902. W H Jackson [L. S.]

Executed in presence of

J M Gann

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____ of _____

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

at _____

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

Executed in presence of

M H Jackson [L. S.]

CODE SECTION 1306
(FOR THESE ALREADY ENROLLED.)

No.

DISABLED

SOLDIER'S PENSION

1902.

Name W H Jackson

County Cobb

Co. A Regiment 18

Disability

Amount, \$ 100

1/16 1902

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Andy

Gen. W. Lindsey, State Printer, Atlanta.

no data

CODE SECTION 1306
(FOR THESE ALREADY ENROLLED.)

No.

DISABLED

SOLDIER'S PENSION

1903.

Name W H Jackson

County Cobb

Co. A Regiment 18

Disability 100

Amount, \$ 100

1/32 1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Andy

Gen. W. Lindsey, State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears *H. H. Jackson* 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 *14th* day of *August* 1839; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a *private* in Company *A*, of *18th* Regiment of *Volunteers*, *Hoffards*'s Brigade; that whilst engaged in such military service in the State of *Pa*, on the *13th* day of *August*, 1862, he was wounded, injured or diseased as follows:

By gun shot striking the right leg on account of which wound said leg to be amputated just below the knee

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1902. I have heretofore, under said law, as a resident of *Cobb* County, been allowed an invalid pension of *\$100* Dollars, for the year 1901.

Sworn to and subscribed before me, this *1st* day of *January*, 1902. *H. H. Jackson* Post-office *John Anthony*

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

STATE OF GEORGIA,

Cobb County.

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

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

Ordinary *John Anthony* *Cobb* County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears *H. H. Jackson* 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 *August* 1839; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a *private* in Company *A*, of *18th* Regiment of *Volunteers*, *Hoffards*'s Brigade; that whilst engaged in such military service in the State of *Pa*, on the day of *August*, 1862, he was wounded, injured or diseased as follows:

By gun shot striking the right leg on account of which wound said leg was amputated just below the knee

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1903. I have heretofore, under said law, as a resident of *Cobb* County, been allowed an invalid pension of *\$100* Dollars, for the year 1902.

Sworn to and subscribed before me, this *1st* day of *January*, 1903. *H. H. Jackson* Post-office *John Anthony*

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

STATE OF GEORGIA,

Cobb County.

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

Given under my official signature and seal, this *1st* day of *January*, 1903.

Ordinary *John Anthony* *Cobb* County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

W. H. Jackson hereby authorize
John H. Winters of *Maricopa*
 to receive and receipt for the pension paid hereon, and request that he remit same to
 at *his office* by *hand*

In WITNESS WHEREOF, I have hereunto set my hand and seal, this *1st*
 day of *January* 1904.

W. H. Jackson [L. S.]

Executed in presence of

POWER OF ATTORNEY,

STATE OF GEORGIA,

Cobb COUNTY.

W. H. Jackson hereby authorize
John H. Winters of *Maricopa*
 to receive and receipt for the pension paid hereon, and request that he remit same to
 at _____ by _____

In WITNESS WHEREOF, I have hereunto set my hand and seal, this *1st*
 day of *January* 1905.

Executed in presence of

W. H. Jackson [L. S.]

CODE SECTION 120A.
 (FOR THOSE ALREADY ENROLLED.)

No. *334*.

DISABLED

SOLDIER'S PENSION
 1904.

Name *W. H. Jackson*
 County *Cobb*
 Co. *A* Regiment *B*
 Disability *Loss of Leg*
 Amount, \$*12.00*

No. *25* 1904.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO
Ordy

Open to Business, State Printer, Atlanta.

no date

CODE SECTION 120A.
 (FOR THOSE ALREADY ENROLLED.)

No. *335*.

DISABLED

SOLDIER'S PENSION
 1905.

Name *W. H. Jackson*
 County *Cobb*
 Co. *A* Regiment *B*
 Disability *Loss of Leg*
 Amount, \$*100*

No. *23* 1905.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO
Ordy

Open to Business, State Printer, Atlanta.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.
Personally appears *W. H. Jackson* 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 *14* day of *August* 18*99*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *A*, of *18*th Regiment of *Volunteers* *Hoffman's* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *31* day of *August* 186*2*, he was wounded, injured or diseased as follows: *By gun shot striking the right leg on account of which wound said leg had to be amputated*

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1904. I have heretofore, under said law, as a resident of *Cobb* County, been allowed an invalid pension of *\$100* Dollars, for the year 1903.

Sworn to and subscribed before me, this *18* day of *June* 1904. *W. H. Jackson*
John D. Dwyer Post-office

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

STATE OF GEORGIA,

Cobb County.
I, *John D. Dwyer* Ordinary of said County, do certify that I am well acquainted with *W. H. Jackson* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.
Given under my official signature and seal, this *1* day of *June* 1904.
John D. Dwyer Ordinary *Cobb* County.



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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.
Personally appears *W. H. Jackson* 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 *1899* 1899; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *A*, of *18*th Regiment of *Volunteers* *Hoffman's* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *30* day of *August* 186*2*, he was wounded, injured or diseased as follows: *By gun shot striking the right leg on account of which wound said leg had to be amputated*

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1905. I have heretofore, under said law, as a resident of *Cobb* County, been allowed an invalid pension of *\$100* Dollars, for the year 1904.

Sworn to and subscribed before me, this *18* day of *June* 1905. *W. H. Jackson*
John D. Dwyer Post-office

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

STATE OF GEORGIA,

Cobb County.
I, *John D. Dwyer* Ordinary of said County, do certify that I am well acquainted with *W. H. Jackson* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.
Given under my official signature and seal, this *1* day of *June* 1905.
John D. Dwyer Ordinary *Cobb* County.



Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1, 1905.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Cobb County.

Personally appears W. H. Jackson of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of 18; that he enlisted in the military service of the Confederate States, (or of the State of Georgia) during the war between the States, and served as a Private in Company A, of 15th Regiment of Volunteers's Brigade; that whilst engaged in such military service in the State of Georgia, on the 186 day of 186, he was wounded, injured or diseased as follows:

Lost leg

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1906. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of \$100 Dollars, for the year 1906.

Sworn to and subscribed before me, this 1 day of January 1907.

John D. Wray

W. H. Jackson
Post-Office

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

State of Georgia,

Cobb County.

I, John D. Wray 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 1 day of January 1907.

John D. Wray
Ordinary Cobb County.

ALLS
your
seal
here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Cobb County.

Personally appears W. H. Jackson of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of 18; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company A, of 15th Regiment of Volunteers's Brigade; that whilst engaged in such military service in the State of Georgia, on the 186 day of 186, he was wounded, injured or diseased as follows:

Lost leg

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1907. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of 100 Dollars, for the year 1906.

Sworn to and subscribed before me, this 1 day of January 1907.

John D. Wray

W. H. Jackson
Postoffice

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

State of Georgia,

Cobb County.

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

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

John D. Wray
Ordinary Cobb County.

ALLS
your
seal
here

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

File
your
stamp
here

Ordinary Cobb County.

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

File
your
stamp
here

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

Jackson, W. H.
His G. H.
Cobb County

No. _____

190_____

**Application for Pension
Due Deceased Soldier**
UNDER ACT 1891.

By

Mrs Tallulah H Jackson
Widow of Wesley H Jackson
of Cobb County.

Co. _____ Regt. _____ Vols. _____

Approved and Paid

190_____

J. W. LINDSEY,
Commissioner of Pensions.

GEORGIA.

County.

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

GEORGIA.

County.

I, _____ Ordinary of said county, do certify
that I personally know _____ the applicant, and that
she is the lawful widow of _____ and was on
the _____ Pension Roll of said _____ county, and was
paid a Pension from _____ county for 190____ and at the time
of his death on the _____ day of _____ 190____ there was
due to him and unpaid his Pension of _____ dollars from the State
of Georgia, and I know _____ the within
witness, and he is of a truthful and trustworthy character and entitled to full credit.
Given under my hand and seal this _____ day of _____ 190____

Ordinary.
County.

TECHNICAL

UNDER ACT APPROVED OCTOBER 9, 1891.

STATE OF GEORGIA, Cobb County.

Personally before me comes Mrs. Tulata & Jackson, of said county, who after being duly sworn, on oath says that she is the widow of Harley H. Jackson who was duly enrolled as a Gravels Pensioner from the county of Cobb and was paid a Pension of One Hundred Dollars from Cobb county for 1907 and that the said Harley H. Jackson died in Cobb county on the 26 day of March 1908, and at the time of his death a Pension of Eighty Dollars was due him from Cobb county and unpaid for 1908. Applicant further swears that she married the said Harley H. Jackson on the 12 day of January 1872, in Cobb county and State of Georgia and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 30 day of June 1899.
John H. Hooten Ordinary, } Wm. E. Jackson [L. S.]
Cobb County. }

AFFIDAVIT OF WITNESS.

AFFIDAVIT OF WITNESS.
 GEORGIA, Cobb County,
 Personally before me comes E. G. Porter, who
 on oath says that he knew Wesley H. Jackson while in life
 and that he knows Mrs. Salata E. Jackson
 and the above applicant; that he knows that the said Wesley H. Jackson
 and Salata E. Durham were in due form of law married in the county
 of Cobb in the State of Georgia on
 the 12 day of January 1892, and that they resided
 together as husband and wife from date of marriage to the day of his death on the 29
 day of March 1890, and that now know that she is his dependent widow.

Sworn to and subscribed before me this 1 day of July 1908
John D. Wiley Ordinary,
Cobb County. J. S. Foster

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

 $\text{corr_related_latent } \theta$

Audited

Feb. 18

1889.

Wm J. Wright
COMPTROLLER-GENERAL

Wright
Maimed Soldiers.

Voucher No. 633

Amount \$ 101.

Paid to M. H. Jackson

For Loss of Right

Leg. 2
July 18 1889.

Included in Warrant No.
issued to Treasurer.

1889.

WARRANT CLERK

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

W. J. Campbell

Goble

Maimed Soldiers.

Voucher No. 918

Amount \$ 100

Paid to M. H. Jackson

For Loss of leg

July 11 1890

Included in warrant No.
issued to Treasurer.

18

WARRANT CLERK

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

R. C. Brown

Jackson, W. H.
200
200
1891.

Maimed Soldiers.

Voucher No. 1201

Amount \$ 100

Paid to M. H. Jackson

For Loss of leg

July 19 1891.

Included in warrant No.
issued to Treasurer.

1891.

WARRANT CLERK

Geo. W. Harrison, State Printer, Atlanta.

W. J. Campbell

Marietta Ga Nov-13-1879.

I hereby authorize M. H. Jackson
to receive & receipt for in my
name for the amount of
money that may be coming
to me on my application for
an artificial leg.

Witness my hand & seal

Test.

W. W. Gammon

Ord.

M. H. Jackson

No. 633.

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga. July 18 1889

Mr. *W. H. Jackson* 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,

Dec. 4, 1888, and the same having been allowed for

Loss of Right Leg
He is entitled to receive the sum of *One Hundred & 00/100* Dollars
for such disability, the same being the allowance due for the year ending October 24, 1889.

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

By the Governor

W. H. Harrison

CLERK EXECUTIVE DEPARTMENT.

\$ 100.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

One Hundred & 00/100

Dollars.

per above voucher, this

18

of

Feb

1889.

A. S. Clay

No. 918

STATE OF GEORGIA,

EXECUTIVE DEPARTMENT.

Atlanta, Ga. July 11 1890

Mr. *W. H. Jackson* 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

Loss of Leg
He is entitled to receive the sum of *One Hundred & 00/100* Dollars
for such disability, the same being the allowance due for the year ending October 24, 1889.

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

By the Governor,

W. H. Harrison

CLERK EXECUTIVE DEPARTMENT.

\$ 100.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

One Hundred & 00/100

Dollars,

per above voucher, this

11

of

July

R. C. Inman

Atty in fact

1891.

No. 1701

STATE OF GEORGIA,

EXECUTIVE DEPARTMENT.

Atlanta, Ga. Decy 19 1891.

Mr. *W. H. Jackson* 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
Loss of leg
He is entitled to receive the sum of *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 the receipt of the voucher and return same to
Executive Department for warrant.

By the Governor.

M. H. Harrison

SECY EXECUTIVE DEPARTMENT.

H. J. McDaniel
GOVERNOR.

\$ 100.

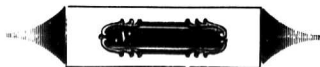
RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia.

One Hundred and 00/100
per above voucher, this *19* of *Decy*

Dollars,

1891.

MARRIAGE LICENSE.



STATE OF GEORGIA, COBB COUNTY.

TO ANY MINISTER OF THE GOSPEL, JUDGE OF THE SUPERIOR COURT,
OR JUSTICE OF THE PEACE, TO CELEBRATE:

YOU ARE HEREBY AUTHORIZED TO JOIN IN THE HONORABLE STATE OF MATRIMONY

Harley H. Jackson and Lula E. Durham

According to the Rites of your Church, provided there be no lawful cause to obstruct the same, according to the Constitution and Laws of this State; and for so doing this shall be your sufficient license.

Given under my hand and seal 10th day of January 1892

E. J. Sheppard
ORDINARY (Seal)

I Herely Certify that *Harley H. Jackson* and
Lula E. Durham were joined together in

HOLY BANS OF MATRIMONY

on the 12th day of January 1892, by me.

W. H. Campbell
Clerk

GEORGIA, } Court of Ordinary of said County.
COBB COUNTY. }

I, J. M. GANN, Clerk of the Court of Ordinary of said County, in said State, do hereby certify that the foregoing is a correct transcript of the record in the matter of

*Marriage of Harley H. Jackson
and Lula E. Durham*

and I further certify that I have compared said transcript with said record and that the same is a correct transcript therefrom. I further certify that under the laws of Georgia I am the keeper and sustodian of said records and the proper party to make and certify transcript therefrom and that I am the duly appointed and qualified Clerk of said Court.

In witness whereof I have hereunto set my hand and seal of
office in the City of Marietta, County of Cobb, State of
Georgia. This 30th day of June 1908

J. M. Gann
Clerk Court Ordinary Cobb County, Ga.

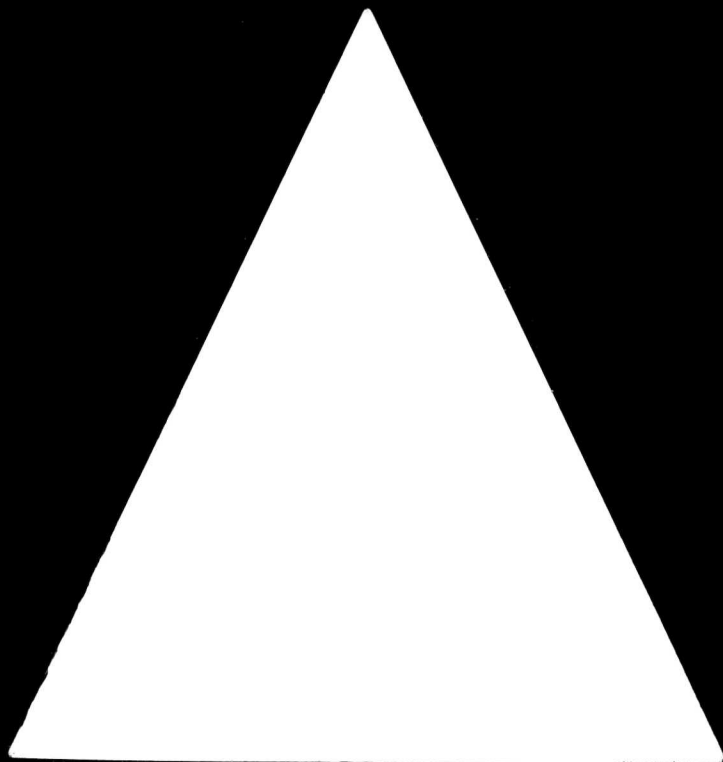
STATE OF GEORGIA, } Court of Ordinary of said County.
COBB COUNTY. }

I, JOHN AWTREY, Ordinary and Judge of the Court of Ordinary of said County, in said State, hereby certify that J. M. GANN is the duly appointed and qualified Clerk of said Court of Ordinary, and as such Clerk is the custodian of the records and files of said Court. I further certify that the attestation made by him is genuine and in due form of law and by the proper officer, and that the seal thereto attached is the seal of said Court.

In witness whereof I have hereunto affixed my name.

This 30th day of June 1908

John Awtry
Ordinary of Cobb County, Ga.



POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County,

I, J. H. Jacobs, do hereby authorize
J. E. Moberly
of
Monetta Ga

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

Witness my hand and seal this

15

day of

April

1895.

Executed in presence of

J. H. Jacobs
()

J. E. Moberly

Ex. Sept 19 July 1895
Transfer proof as to po-
erty is original

Richard Johnson
Sec

Ex. Sept 26 July 1895
Repeta

Richard Johnson
Sec

INDIGENT PENSION

1895.

Name

J. H. Jacobs

County

Cobb

Ground

RICHARD JOHNSON,

Secretary Executive Department

WARRANT HANDLED TO

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County, I, *J. H. Jacobs* hereby authorize *Minette G. me*
J. E. Mozley of *J. E. Mozley*
 to receive and receipt for the pension allowed and request that he remit same to

at *25* day of *April* 1895.

Witness my hand and seal this *25* day of *April* 1895.
 Executed in presence of *J. H. Jacobs*

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Cobb County, I, *J. H. Jacobs* of said State and County, desiring to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? *(give State, County and post office)* *J. H. Jacobs, Aubrey Cobb County Ga*
2. When did you reside on January 1st, 1894, and how long have you been a resident of this State? *Aubrey Cobb 69 years & 7 months State of Georgia*
3. When and where were you born? *Born in Jay 1824 Jackson City*
4. Did you volunteer in the Confederate Army or in the Georgia Militia? *Confederate*
5. When and where did you enlist? *61 Auburn Ga Co 22*
6. In what company and regiment did you enlist? *Seaboard Artillery Co 22 1st Battalion*
7. How long did you remain in that company and regiment? *Up to the War Closed*
8. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge or transfer? *no*
9. For how long a period did you discharge regular military duty? *Nearly 4 years*
10. When, where and under what circumstances were you discharged from service? *Aubrey, Ga Surrendered at the last 1865*
11. What is your present occupation? *farmer*
12. How much can you earn per annum by your own exertions or labor? *not more than \$35.00*
13. What has been your occupation since 1865? *farmer & miller*
14. What sum would be necessary for your support for this pension year, and how much are you able to contribute thereto either in labor or income? *\$500 and \$350.00*
15. What is your present physical condition and how long have you been in such condition? *Wounded in left shoulder during War Civil War, left my leg off of left leg, lost left arm & scollation*
16. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second "infirmary and poverty" or third "blindness and poverty"? *Infirmary*
17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight?

18. What property, effects or income do you possess? *Now but one old mill, worth \$1000*
19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same? *Now except said mill & a Car the Car was sold*
20. What County did you reside during those years and what property did you then return for taxation? *Cobb Mills & Car in 93*
21. How were you supported during the years 1893 and 1894? *I had 2 sons 93 one of us 74 the other 11 was 6*
22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *I can't*
23. What was your employment during 1893 and 1894? What pay did you receive in each year? *farmer*

24. Are you married and have you a family? If so, is your wife living and how many children have you? (Give age and sex of children and their means of support?) *I got a wife 2 children 2 girls & 4 boys all married from 6 years on boy 11 years old he is totally unable to do any thing*

Sept 14 Aug 1895
for this proof as to for- mity in original
Rich Johnson Sec
Sept 26 Aug 1895
Rich Johnson Sec

INDIGENT PENSION

1895.

Name *J. H. Jacobs*
 County *Cobb*

Ground

RICHARD JOHNSON,

Secretary Executive Department

WARRANT PASSED TO

Geo. W. Harrison, State Printer, Atlanta.

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

Sworn to and subscribed before me this the

25 day of April 1895.

J. M. Stone Ordinary

of Cobb County.

William Jacobs Applicant.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Spalding County

George R Niles

of said State and County, having been presented

as a witness in support of the application of William H Jacobs 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? George R Niles - Resides in Griffin Ga

2. Are you acquainted with the applicant, if so how long have you known him? Since June 1861

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

4. Do you know if his having served in the Confederate army or the Georgia militia? How do you know this? He served in the Confederate army

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

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? He performed regular military duty from 1861 to 1865

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

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

10. What is the applicant's occupation and physical condition? Farmer - in fair health

11. Is the applicant unable to support himself by labor of any sort, if so, why? Can't say as to

12. How was he supported during the years 1893 and 1894? By his son

13. What portion of his support for these two years was derived from his own labor or income? None

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? None

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

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

J. M. Stone Ordinary

of Cobb County.

George R Niles

Witness

Ordinary S. C. Ga

April 25/95

Ordinary S. C. Ga

April 25/95

Ordinary S. C. Ga

April 25/95

Ordinary S. C. Ga

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Ordinary S. C. Ga

April 25/95

Ordinary S. C. Ga

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Cobb County.

Personally came before me,

W. M. Runyan

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

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

His shoulders have been broken since he was a young man

His back is curved and he is unable to do any manual labor

He is unable to do any manual labor

He is unable to do any manual labor

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POWER OF ATTORNEY.

STATE OF GEORGIA,

County,

I, J. H. Jacobs hereby authorize

of J. B. Humphreys

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

at Austell, Ga.

Witness my hand and seal this 18 day of May, 1897.

Executed in presence of

J. M. Stone

Only J. H. Jacobs

Questions for Applicant.

STATE OF GEORGIA,

County,

to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (give State, County and post office)

Jacobs been in 21 years

2. When did you reside on January 1st, 1894, and how long have you been a resident of this State?

When did you reside on January 1st, 1894, and how long have you been a resident of this State?

3. When and where were you born?

When and where were you born?

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

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

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

Until the surrender

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

over 4 years

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

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

8. What is your present occupation?

farm

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

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

10. What has been your occupation since 1865?

What has been your occupation since 1865?

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"?

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"?

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?

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?

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

What property, effects or income do you possess and its gross value?

14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any, did you make of same?

What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any, did you make of same?

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

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

16. How were you supported during the years 1895 and 1896?

How were you supported during the years 1895 and 1896?

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?

How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income?

18. What was your employment during 1895 and 1896? What pay did you receive in each year?

What was your employment during 1895 and 1896? What pay did you receive in each year?

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

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

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

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

Sworn to and subscribed before me this the

18 day of May, 1897.

J. M. Stone Ordinary.

of Cobb County.

J. H. Jacobs Applicant.

Fullman H. Jacobs

County.

Every Question MUST be Answered.

INDIGENT PENSION

1897.

Name

County

Approved

1897.

WARRANT HANDED TO

NO. 1. NATIONAL ARCHIVE SERVICE, COLLEGE

1/2/97

QUESTIONS FOR WITNESS.

STATE OF GEORGIA.

Cobb County.

J. Bradlin of said State and County, having been presented as a witness in support of the application of *J. M. Jacobs* 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?
Austell, Ga. J. Bradlin
2. Are you acquainted with *J. M. Jacobs*, the applicant, is of how long have you known him?
About 12 Years
3. Where does he reside, and how long has he been a resident of this State?
In Cobb Co. Ga. for 12 Years or more
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this?
(See petition of 1895)
5. When, where and in what company and regiment did he enlist?
(See application of 1895)
6. Were you a member of the same company and regiment?
(See appln 1895)
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?
See application of 1895

8. What property, effects or income has the applicant? (Give your means of knowledge.)
None at all - I am his neighbor. He had a mule wagon but it was sold by his creditors last year.

9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if any did he make of same?
He had an old mule and wagon, which was sold for his debts in 1896.

10. What is the applicant's occupation and physical condition?
Farmer - On account of old age, disease, by being crippled &c. &c. he is unable to work.

11. Is the applicant unable to support himself by labor of any sort, if so, why?
Consider him unable to support himself - on account of age, being crippled &c. &c.

12. How was he supported during the years 1895 and 1896?
Principally by his sons.

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

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894?
He is old and broken down, is diseased, has been crippled - is unable to work - has no property or income.

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

Sworn to and subscribed before me, this *15th* day of *January*, 1897. *J. Bradlin* Witness. *J. M. Jacobs* Ordinary. *10. 11. 12. 13. 14. 15.*

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA.

Cobb County.

Personally came before me, *J. B. Madlock* and *J. W. Throckmold*, both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully *J. M. Jacobs*, applicant for pension under the Act of 1894, and after

such personal examination say that his precise physical condition is as follows:
He is 72 years old. And suffers with arthritis so as to render him unfit for labor. He also suffers with a lameness in the left shoulder from being thrown from a horse and with his knee a risk while doing a single day's work.

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 *15th* day of *January*, 1897. *J. B. Madlock (Ord.)* *J. W. Throckmold (Ord.)* Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Cobb County.

I, *J. M. Lane*, Ordinary in and for said County, hereby certify that the applicant *J. M. Jacobs* resides in said County, and was a bona fide resident of this State on the first day of January, 1894, and that the witnesses, viz. *J. B. Madlock* & *J. W. Throckmold* are of trustworthy character and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of *Cobb* County show that applicant returned for taxation in his name in 1896, \$ *50.00* property, dollars of property, and in 1896, \$ *75.00* property, 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. *J. M. Lane* 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.

County.

I, J. H. Jacobs hereby authorize J. M. Stone
of Marion Co.

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

me by him

at

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

day of May 1898.

J. H. Jacobs [L.S.]

Executed in presence of

W. M. Johnson

(For Those Already Enrolled.)

NO.

2-164

INDIGENT

SOLDIER'S PENSION,

1898.

Name J. H. Jacobs

County Marion

WARRANT ISSUED

1/14 1898.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDLED TO

J. M. Stone

Sec. W. HARRISON, STATE PRINTER, ATLANTA

No data

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

I, J. H. Jacobs hereby authorize J. M. Stone
of Marion Co.

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

me by him

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

Executed in presence of J. H. Jacobs (L.S.)

(For Those Already Enrolled.)

NO.

1142

INDIGENT

SOLDIER'S PENSION,

1899.

Name J. H. Jacobs

County Marion

WARRANT ISSUED

1/14 1899.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDLED TO

J. M. Stone by J. H. Jacobs

Sec. W. HARRISON, STATE PRINTER, ATLANTA

No data

and co. a, both, Ga. af-

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears J. H. Jacobs 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 13th day of May 1886, that he is 77 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 A of 22nd Batt Artillery Vol;

that his physical condition is as follows: On account of age infirmity and disease 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 1897

Sworn to and subscribed before me, this, 13th day of May 1898. } J. H. Jacobs Ordinary.

State of Georgia,

Cobb County.

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



NOTE.—The blank spaces must be filled.

and co. a, both, Ga. af-

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears J. H. Jacobs 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 13th day of May 1886; that he is 73 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States and served for the term of 4 years in Company A of 22nd Batt Artillery Vol;

that his physical condition is as follows: Age, infirmity and poverty applicant is unable to make support that his property consists of the following items

None at all

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1899. I have heretofore as a resident of Cobb county been allowed a pension for the year 1898

Sworn to and subscribed before me, this, 6th day of May 1899. } J. H. Jacobs Ordinary.

State of Georgia,

Cobb County.

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

Given under my official signature and seal, this 6th day of May 1899. 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,

County,

I, J. H. Jacobs hereby authorize

John Anthony of Marion Co.

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

at me

by him

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

J. H. Jacobs [L. S.]

Executed in presence of

T. J. Hamby

CODE SEC. 1284.

(For Those Already Enrolled.)

NO. 803

INDIGENT

SOLDIER'S PENSION,

1900.

Name

County

WARRANT ISSUED

1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

J. M. Lane

Code W. Harrison, State Printer, Atlanta.

No data

Jacoby, J. H.

Cobb Co

CODE SECTION 1284.

(For Those Already Enrolled.)

No. 223

INDIGENT

SOLDIER'S PENSION.

1901.

Name

County

WARRANT ISSUED

1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Anthony

Code W. Harrison, State Printer, Atlanta.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,

County,

I, J. H. Jacobs hereby authorize

John Anthony of Marion

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

at his office

by me

Witness my hand and seal, this 8 day of Jan 1901.

J. H. Jacobs [L. S.]

Executed in presence of

J. M. Lane

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears T. H. Jacobs of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 15 day of January 1826; that he is 74 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 4 years in Company I, of 22nd Regt. of Artillery S. A. Vols.; and Co. G. 2nd Regt. of Artillery S. A. Vols.; that his physical condition is as follows: On account of age, infirmity and poverty he is unable to support himself; that his property consists of the following items: Nothing

of the value of _____ 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 15th day of January, 1900. J. H. Jacobs Ordinary.

State of Georgia,

Cobb County.

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

ALL
YOURS
HERE

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears T. H. Jacobs of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 15 day of January 1826; that he is 76 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 4 years in Company I, of 22nd Regt. of Artillery S. A. Vols.; that his physical condition is as follows: on age infirmity and poverty applicant is unable to make support; that his property consists of the following items: None at all

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 1900.

Sworn to and subscribed before me, this 15th day of January, 1900. J. H. Jacobs Ordinary.

STATE OF GEORGIA,

Cobb County.

I, John Anthony Ordinary of said County, do certify that I am well acquainted with T. H. Jacobs the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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. John Anthony Ordinary. Cobb County.

ALL
YOURS
HERE

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Chick County.

I, J. H. Jacobs hereby authorize
John Lindsey of Marion
to receive and receipt for the pension allowed and request that he remit same to
me at his office
by hand

Witness my hand and seal, this 4 day of Jan 1902.
J. H. Jacobs [L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

Chick County.

I, J. H. Jacobs hereby authorize
John Lindsey of _____
to receive and receipt for the pension allowed and request that he remit same to
_____ at _____
by hand

Witness my hand and seal, this 8 day of Jan 1903.
J. H. Jacobs [L. S.]

Executed in presence of

John Lindsey

FOR THOSE ALREADY ENROLLED.

No. 510

INDIGENT

SOLDIER'S PENSION

1902.

Name J. H. Jacobs

County Chick

Co. I Regiment 22

Patm

WARRANT ISSUED

1902.

1/16

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

Ardy

Geo. W. Harrison, State Printer, Atlanta.

no data

Jacobs, Ch. H.
John Lindsey

(FOR THOSE ALREADY ENROLLED.)

No. 4174

INDIGENT

SOLDIER'S PENSION

1903.

Name J. H. Jacobs

County Chick

Co. I Regiment 22

WARRANT ISSUED

1903.

23

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

Ardy

Geo. W. Harrison, State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears *J. H. Jacobs* 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 *Jan* 18*26*; that he is *76* years old and by occupation a *farmer* that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the

States, and served for the term of *4 years* in Company *D* of *22nd Infantry* of *La. Tols*; that his physical condition is as follows: *on account of age infirmity and poverty he is unable to support himself*

that his property consists of the following items:

Nothing

of the value of _____ 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 *11* day of *Jan* 1902.

J. H. Jacobs
John M. Harty Ordinary. *Marinda*

STATE OF GEORGIA,

Cobb County.

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

Given under my official signature and seal, this *11* day of *Jan* 1902.

John M. 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 *J. H. Jacobs* 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 *Jan* 18*26*; that he is *77* 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 *C*, of *22nd Infantry* of *La. Tols*; that his physical condition is as follows: *age infirmity & poverty he is unable to support himself*

that his property consists of the following items:

Nothing

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

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

Sworn to and subscribed before me, this *11* day of *Jan* 1903.

J. H. Jacobs
John M. Harty Ordinary. *Marinda*

STATE OF GEORGIA,

Cobb County.

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

Given under my official signature and seal, this *11* day of *Jan* 1903.

John M. 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,

County.

I, John W. Lindsey 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 January 1904.

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

hereby authorize

of

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

at

by

Witness my hand and seal, this 13 day of January 1905.

Executed in the presence of

[L. S.]

(FOR THOSE ALREADY ENROLLED.)

INDIGENT
SOLDIER'S PENSION

1904.

Name

County

Co.

Regiment

WARRANT ISSUED

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

(FOR THOSE ALREADY ENROLLED.)

INDIGENT
SOLDIER'S PENSION

1905.

Name

County

Co.

WARRANT ISSUED

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears W. H. Jacobs 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 Jan, 1886; that he is 77 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 22 months in Company E, of 22nd Regiment of Infantry; that his physical condition is as follows: Age infirmity and poverty; that his property consists of the following items: nothing

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of Cobb County been allowed a pension for the year 1895.

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

Ordinary.

STATE OF GEORGIA,

Cobb County.

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

Ordinary

Cobb County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears W. H. Jacobs 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 Jan, 1886; that he is 78 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 E, of 22nd Regiment of Infantry; that his physical condition is as follows: Age infirmity and poverty; that his property consists of the following items: nothing

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

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

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

Ordinary.

STATE OF GEORGIA,

Cobb County.

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

Given under my official signature and seal, this 3rd day of Jan, 1905.

Ordinary

Cobb County.

Norm.—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, Lt J Jacobs hereby authorize
John Hurley of _____
 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 2 day of May 1908.

Executed in the presence of

Lt J Jacobs [L. S.]
Wm. J. Jacobs

Jacobs, J. H.
Cobb County

COSS SECTION 134.
 (FOR THOSE ALREADY ENROLLED.)

No. 679

INDIGENT
 SOLDIER'S PENSION
 1908.

Name Lt J Jacobs
 County Cobb
 Co. Bartow Legion

WARRANT ISSUED
1/22 1908.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HAS BEEN
PAID

1908

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Cobb County.

Personally appears J. Jacobs 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 E, of 1st Regiment of 1st Ala. Vol. (Ct.); that his physical condition is as follows: —

Age Infinitely Improved

that his property consists of the following items:

of the value of Nothing Dollars. I am now earning by my labor, 12 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.

John Hurley

Ordinary.

J. H. Jacobs
Mark

State of Georgia,

Cobb County.

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

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

John Hurley

Ordinary.

County.



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

Georgia }
Cobb County } Personally appeared before
me J. M. Morris, a Citizen of
Said State & County, and on
Oath Says he knows J. H. Jacobs and that
Said J. H. Jacobs returned to This County from
Texas during the Month of February 1907
and that Said J. H. Jacobs has remained
in Said County and State since his
return, and is now a bona fide Citizen
of Said State & County. J. M. Morris
July 28/08

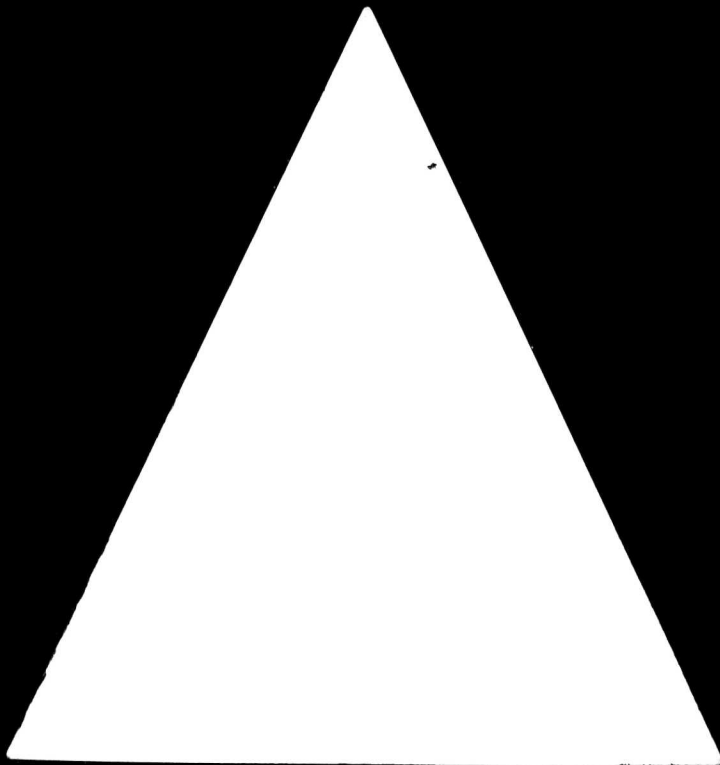
I have read subscribed before
me, this July. 28th 1908.
John A. Wray,
Ordinary

Georgia }
Cobb County } Personally appeared before me
J. H. Jacobs a Citizen of Said State
and County, and on oath Says
1st That as an Confederate Soldier he has drawn
a pension from Said State for many years
having been allowed an indigent pension
which he received up to the year 1907
2nd That affiant has no wife or family
but has several children some of whom
live in Marietta Cobb County Ga. and some
of them live in Texas
3rd That affiant in June 1906 visited his
children who lived in Texas, and remained
with them until February 27th 1907 at which time
he arrived back in Marietta Ga. to his home where
he lives there and where he has made his home
since the death of his wife. That he has
remained in Marietta Cobb County Georgia
continuously since his return, that this
is his home and that he is a bona fide
Citizen of Cobb County Ga. and expects to
be remain that at the time of his visit to
his children in Texas he did not know that
by so doing he would lose his pension
and Citizenship in Georgia
He makes this affidavit in order that
his name may be placed on the pension
roll of Said State

J. H. Jacobs
aff

I have read subscribed before
me this July 28th 1908
John A. Wray
Ordinary

Recd this Augy 28/08 John Astor
Ordinary



James, Savannah, Ga.
Cobb Co. (7)

Approved 1930

Widow's Application

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

County Cobb
 Name Mrs. Hannah A. Jones
 Widow of A. T. Henry
 Date of Marriage February 18 66
 Company 7th Cavalry, U.S. Army
 Approved Robert L. Lawrence
Pension Commissioner
104-42 Regt. O.K.

JOHN W. CLARK,
 Commissioner of Pensions.

8-16-30

Ordinary's Certificate

STATE OF GEORGIA.

COUNTY.

I, Wm. E. Lane
James A. Jones

Ordinary of said County, do certify that the applicant for pension: that

she is the person she represents herself to be, and that she has been, continuously, a long the resident citizen of said State since January 1st, 1920, that I do know her better, personally, than the witness who swears to the service of husband; that both of them are now residents of said

County and were duly sworn by me before signing the foregoing affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and official seal of office this 19th day of August 1930.
 (SEAL OF ORDINARY)
Wm. E. Lane Ordinary.
 of Cobb County.

INSTRUCTIONS:

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "I solemnly swear that the statements made by you and the witness are true to the best of your knowledge and belief, and that you shall give will be the whole truth. So help you God."
2. Only persons who are residents of the County in which the questions asked you and the witness are answered may be attached if black, races are insufficient.
3. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be sworn to by an Ordinary.
4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be sworn to by an Ordinary.
5. A witness cannot certify to a marriage license if obtainable. If not, false marriage, by some person, or by general reputation.
6. The Ordinary must see the applicant carefully.
7. Don't use the bulky form of Marriage Ordinary in vogue throughout the State. A short, simple form is easier to handle.

Service should be made on the husband's company

Under Act of 1910, as Amended by Act of 1919, and Constitutional Amendment of 1920.

STATE OF GEORGIA.

...COUNTY

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

2. How long and since when have you been continuously, a bona fide resident citizen of the State of Georgia? Eighteen years

3. When, where and to whom were you married? *July 1966 in Westing B-3 LA*

a. Have you married since the death of first and soldier husband? *Yes*

4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service, and give name of Colonel and Captain.) *May 23, 1862, Newry, Ga. in Co. T 7th Confederate Cavalry, Col. James M. Porter, Capt. J. C. Conley, Regt. Co. Assistant Surgeon*

5. When and where did the commands of your husband surrender or discharge from the Service? April 26 1965; Eisenhower AFB

6. Was your husband personally present with his command when it was surrendered or discharged? Yes

7. If he was not present, state specifically and clearly where he was?

8. When did he leave the Command? At Surrender of Johnson

a. For what cause did he leave? War was over

b. By whose authority did he leave? Payroll at Bureau
c. For how long was his leave of absence granted? — In what way?

e. What was his physical condition when he left his command? *Good*

f. What effort did he make to return to his Command?

g. In what way was he prevented from going back to Command?

h. Was he captured by the enemy at any time?

i. If so, when and where? In what prison was he held and when was he released?

j. When and where did your first husband die?

k. Were you residing together when he died? *Yes*

1. If not, how long have you resided apart?

m. Are you now a widow? Yes

9. Have you or your husband heretofore been paid a pension by the State? *no*

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

Removal now applied, & am unable to remove

Sworn to and subscribed before me, this the

13 day of August 1980

AM Gains

Esth

.....County
(SEAL OF ORDINARY)

Miss Sarah A. James
Applicant.
Miss Sarah A. James

STATE OF GEORGIA.

COUNTY

I, M. E. Davis, Ordinary of said County, do certify that I know Sarah A. Jones 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 do know Wm. Jones a brother of the witness who swears to the service of husband; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and official seal of office this 15 day of August 1920
(SEAL OF ORDINARY) J. M. Gann, 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 give will be the whole truth. So help you God."
2. Additional affidavits may be attached to the Ordinary's affidavit. Insufficient
3. Only widows who married prior to January 1st, 1881, are certified.
4. All affidavits must be made before the Ordinary of the County in which the applicant or witnesses resides and must be certified by such Ordinary.
5. Attached certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Fill out the back of the application carefully.
7. Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.

CLARK.

Commissioner of Pension

8-16-50

State of Georgia, Newton County.

To any Minister of the Gospel, Judge of Superior Court or Justice of the Peace to celebrate:

YOU ARE HEREBY AUTHORIZED AND PERMITTED to Join in the Honorable State of Matrimony A. Turner Henry and S. Amanda Read according to the rites of your Church, provided there be no lawful cause to obstruct the same, according to the Constitution and laws of this State; and for so doing this shall be your sufficient license.

Given under my hand and seal, this 25th day of December, 1965

Wm. D. Luckie, Ordinary (SEAL)

I hereby certify that A. Turner Henry and S. Amanda Read were joined together in the Holy Rites of Matrimony on the 2nd day of January, 1866.

Albert Gray. M.G.

Georgia, Newton County.

I hereby certify that the above and foregoing is a true and correct copy of the marriage license and certificate of the marriage of A. Turner Henry and S. Amanda Read, and same are recorded in marriage records book 1865-1869, page 7, records Newton Court of Ordinary.

Given under my hand and seal, this August, 18, 1930.

G. L. Lloyd
Ordinary, Newton County, Georgia.

OFFICE OF
J. M. GANN
ORDINARY
COBB COUNTY, GA.

MAHANTA, GA.

Georgia Cobb County:

Personally appeared before the undersigned attesting officer, Harry James, on oath says that he knew E. R. James in his lifetime and that he knows that the said E. R. James and Mrs. Savannah A. Henry were duly married and lived together as man and wife until his death on June 15th, 1915 and the said Savannah A. James is now a Widow.

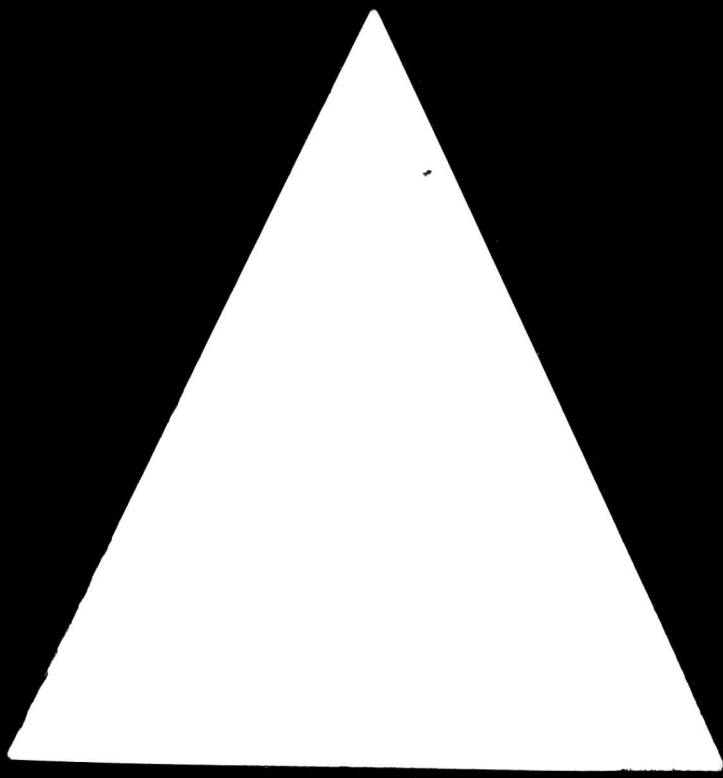
Sworn to before me

this August 15th, 1930

J. M. Gann
Ordinary Cobb County Ga.

Henry, A. T., was appointed Asst. Surgeon, 7th Confederate Cavalry, C. S. A., Nov. 22, 1862. Roll for July-Aug. 1864, last on file, shows him present. This regt. became part of the 10th Regt. Ga. Cavalry in July 1864, and the name Asst. Surgeon Henry appears on roll of men of this latter regt. who were paroled, Greensboro, N. C., Apr. 26, 1865.

[Copied from record on file Office Ga. Soldier Roster Commission, 303 State Capitol, Atlanta.]



James, S.W.
Cobb Co

No.

784

APPLICATION FOR ALLOWANCE

FOR YEAR ENDING OCTOBER 26, 1889.

FISH

Left Army of variables

Applicant, J. H. H. H.

County

Amount 50.

Date of Warrant Feb 20/

Entered on record

Feb 20 1889
H. H. H.

SECRETARY EXECUTIVE DEPARTMENT.

Act Chay

*James, S.W.
Cold Co*

189

APPLICATION FOR ALLOWANCE

FOR YEAR ENDING OCTOBER 26, 1889

Left Arm & Shoulder

Applicant,

County

Amount

Date of Warrant *July 20/*

Entered on record

July 20 1889

W.H.

SECRETARY EXCISE DEPARTMENT.

Ad. Chas.

STATE OF GEORGIA,

Cobb

County.

PERSONALLY appears *S.W. James* of *Cobb* county, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has been such continually since the *25th* day of *Dec* 1881; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as *private* in Company *D*, of *7th* Regiment of *Georgia* Volunteers *Audubon's* Brigade; that whilst engaged in such military service, at the battle of *2^d Manassas* in the State of *Virginia*, on the *30th* day of *August* 1862, he was

wounded as follows: *He was shot through the arm just below the shoulder, the bone was shattered to pieces, several pieces of the bone came out, the muscle was destroyed, the arm is considerably perished away, the ball after cutting through the arm went on and cut through the back bone and the arm is rendered substantially and irremediably useless.*

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

Sworn to and subscribed before me, this the

18th day of *July* 1889

J. H. Brown

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

STATE OF GEORGIA,

Cobb

County.

PERSONALLY comes before me *Dr. J. H. Brown* Ordinary of said county, and *E. J. Selis*, both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined *S.W. James* and after such

examination say that the applicant has been injured as follows: *He was shot through the left arm just below the shoulder - the bone was shattered, the muscle destroyed - the arm perished away and is rendered essentially and substantially useless.*

Sworn to and subscribed before me, this

18th day of *July* 1889

E. J. Selis, M.D.

J. H. Brown, M.D.

ORDINARY.

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

STATE OF GEORGIA,

Corro County.

I, *John M. Howe* Ordinary of said county, do certify that I am well acquainted with *A. M. James* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county. I also certify that the foregoing witnesses, to-wit:

are persons of respectability, and that their statements are worthy of full credit and belief.

I further certify that before whom the foregoing affidavits were made and power of attorney was signed, is a notary public in and for the said county, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 15 day of July 1889.

John M. Howe Ordinary County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Corro County.

Know all Men by these Presents, That I,

A. M. James of *Corro* County, in said State, do hereby appoint *A. S. Clay* 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 15 day of July 1889.

Executed in the presence of us:

DIRECTION:

Send money to me as follows, by

to _____
County, Georgia.

P. O.

NOTES.

1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physician, and followed by a plain statement of facts showing the extent of the disability. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.
2. The law makes no allowance for an arm or leg, unless the arm or leg has been rendered substantially and essentially useless.
3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of life, etc." There is no qualification to the clause of the Act in reference to the arm or leg, but the limb must for all purposes be "substantially and essentially useless."
4. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."
5. If application is for loss of fingers or toes the proofs must be made to show the number, and points where amputated.
6. If papers are returned for correction, and amendments are added to any of the affidavits, the amendments must be made under oath before an officer, and the proofs must show that the amendments have been duly sworn to.
7. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.

STATE OF GEORGIA,

Cobb County.

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

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

Given under my official signature and seal, this *11th* day of *February*, 1890.

Ordinary

County.

STATE OF GEORGIA,

Cobb County.

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

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

Given under my official signature and seal, this *11th* day of *Feb*, 1891.

Ordinary

County.

1890.

No. *1115*
APPLICATION FOR ALLOWANCE.
FOR THIS TALL ORDER OFFICER IN THE.

Ann disabled

Applicant S. W. James

Cobb County.

50 Amount.

July 13 Date of warrant.

July 13 Entered on record.

1890

Chas H H

No certificate

Chas H H

Chas H H

Chas H H

James W. W.

1891

James W. W.

Cobb Co

PAID 1891, 11

No. *576*

Application for Allowance

FOR THIS TALL ORDER OFFICER IN THE.

Ann disabled

Applicant S. W. James

Cobb County.

50 Amount.

July 11 Date of Warrant.

July 11 Entered on record.

1891

Chas H H

No certificate

Chas H H

Chas H H

Chas H H

WARRANT ISSUED TO

R. C. Brown

R. C. Brown

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Both County.

PERSONALLY appears *S. W. James* of *Both* county, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has been such continually since the *25th* day of *December*, 1831; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a *private* in Company *D*, of *7th* Regiment of *Georgia* Volunteers *Anderson's* Brigade; that whilst engaged in such military service, at the battle of *Second Manassas* in the State of *Virginia*, on the *30th* day of *August*, 1862, he was wounded as follows: *by being shot in left shoulder by a minnie ball and thereby rendering left arm and hand substantially and essentially useless.*

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1890. I have heretofore been allowed a pension of *50* dollars.

Sworn to and subscribed before me, this *11th* day of *January*, 1890.

W. H. Shaw County.

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,

Both County.

KNOW ALL MEN BY THESE PRESENTS, That I, *S. W. James* of *Both* county, in said State, do hereby appoint

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *11th* day of *January*, 1890.

Executed in the presence of us:

J. D. Boyer
W. H. Shaw County.

DIRECTION.

Send money to me as follows, by _____ to _____

County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Both County.

PERSONALLY appears *S. W. James* of *Both* 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 *25th* day of *December*, 1831; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a *private* in Company *D*, of *7th* Regiment of *Georgia* Volunteers *Anderson's* Brigade; that whilst engaged in such military service at the battle of *Second Manassas* in the State of *Virginia*, on the *30th* day of *August*, 1862, he was wounded as follows: *by bullet striking lower part of left shoulder and passing through the shoulder & disorganizing the bone, lodging in muscle & back bone, the shoulder was broken & useless, the arm is rendered substantially & essentially useless.*

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 *50* dollars, for *Said Disability*.

Sworn to and subscribed before me, this *11th* day of *January*, 1891.

W. H. Shaw County.

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,

Both County.

Know all Men by these Presents, That I, *S. W. James* of *Both* County, State of Georgia, do hereby appoint

A. S. Clay 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 *11th* day of *January*, 1891.

Executed in the presence of us:

J. D. Boyer
W. H. Shaw County.

DIRECTION.

Send money to me as follows, by _____ to _____

County, Georgia.

POWER OF ATTORNEY. STATE OF GEORGIA.

County, }
Know all Men by these Presents, That I, _____ County,
of _____ County, State of Georgia, do hereby appoint

of _____ my true and lawful attorney in fact, for
me and in my name, to receive and receipt for whatever amount of money I may be entitled to
from the State of Georgia by reason of 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 _____ 1894.

Executed in the presence of us: _____

DIRECTION.

Send money to me as follows, by _____ to _____ P. O.
County, Georgia.

James S. W.
Cobb Co.
1893.

No. 5744
Application for Allowance

For the Year Ending October 31st 1893

Applicant, *James S. W.*

County, *Cobb*

Amount, *50*

Date of Warrant, *3/11*

Entered on record, *3/11*

STATE OF GEORGIA

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

POWER OF ATTORNEY.

STATE OF GEORGIA, }
Know all Men by these Presents, That I, _____ COUNTY, }
County, State of Georgia, 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 by reason of an injury received as aforesaid in the military service of the Confederate
States (or of this State), as stated in the foregoing affidavit, hereby authorizing my said Attorney
to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money
which may be coming to me for the reason aforesaid.

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

Executed in the presence of us: _____

DIRECTIONS.

Send money to me as follows, by _____ to _____ P. O.
County, Georgia.

(For These Already Enrolled.)

No. 5744

Soldier's Pension.
1894.

Name, *James S. W.*

County, *Cobb*

Disability, *Discharge*

Amount, \$ *50*

WARRANT HANDED TO

J. M. Stone

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

PERSONALLY appears

Cobb County.
County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the

day of *March* 1861; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the

States, and served as a *Private* in Company *D*, of *7th* Regiment of *Ya.* Volunteers *Anderson's* Brigade; that whilst engaged in

such military service at the battle of *Second Manassas* in the State of *Virginia*, on the *30* day of *August* 1862, he was

wounded as follows: *By gunshot striking left shoulder and fracturing arm*

so that said arm and shoulder is essentially & substantially

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

\$30. dollars, for *his disability*

Sworn to and subscribed before me, this, the *15th* day of *March* 1893.

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

STATE OF GEORGIA,

I, *J. M. Stone* Ordinary of said County,

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

I further certify that before whom the foregoing affidavits were made, and power of attorney was signed, in a

of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this *15th* day of *March* 1893.

Ordinary *J. M. Stone* County.

Ordinary *J. M. Stone* County.

Ordinary *J. M. Stone* County.

Ordinary *J. M. Stone* County.

Ordinary *J. M. Stone* County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

PERSONALLY appears

Cobb County.
County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the

day of *March* 1861; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the

States, and served as a *Private* in Company *D*, of *7th* Regiment of *Ya.* Volunteers *Anderson's* Brigade; that whilst engaged in

such military service at the battle of *2nd Manassas* in the State of *Virginia*, on the *30* day of *August* 1862, he was

wounded as follows: *By gunshot striking the left shoulder, fracturing the arm and fracturing the muscles and flesh*

so that he is essentially & substantially

incapable to perform the ordinary manual occupations 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

\$30. dollars, for the year 1893

Sworn to and subscribed before me, this, the *15th* day of *March* 1894.

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.

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.

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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.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

KNOW ALL MEN BY THESE PRESENTS, That I,

County, State of Georgia, do hereby appoint
of *Manetta* *you* 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 *March* 1895. *S. W. James* [L. S.]

Executed in presence of us

Y. M. Johnson

DIRECTIONS.

Send money to me as follows, by

to

County, Georgia.

P. O.

SOLDIER'S PENSION.

1895.

Name *S. W. James*

County

Disability

Amount, \$

1895.

3'4

Richard Johnson,
Secretary Executive Department.

WARRANT HANDSD TO

Atk.

W. H. Harrison, Seal Printer, Atlanta

W. H. Harrison

James, S. W.

Cobb Co.

ACT OF 24 OCT., 1862.

(For Those Already Enrolled.)

No. *3200*

SOLDIER'S PENSION.

1896.

Name

County

Disability

Amount, \$

1896

3'20

Richard Johnson,
Secretary Executive Department.

WARRANT HANDSD TO

Atk.

W. H. Harrison, Seal Printer, Atlanta

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, *S. W. James* hereby authorize *J. M. Stone*
of *Manetta* *you*
to receive and receipt for the pension paid hereon and request that he remit same to
Me by *him*

at _____
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *3rd*
day of *March* 1896.

S. W. James [L. S.]

Executed in presence of us

Y. M. Johnson

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County,

Personally appears S. W. James 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 Dec. 1861; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company 7th Regiment of Va. Volunteers, Anderson's Brigade; that whilst engaged in such military service at the battle of Manassas in the State of Va. on the 30 day of August 1862, he was wounded as follows:

By bullet striking the left shoulder and penetrating said shoulder so that said 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, 8th day of March 1895, S. H. Jones

J. M. Stone Ordinary

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

STATE OF GEORGIA,

Cobb County,

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

Given under my official signature and seal, this 8th day of March 1895.



J. M. Stone
Ordinary Cobb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County,

Personally appears S. W. James 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 1861; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company 7th Regiment of Va. Volunteers, Anderson's Brigade; that whilst engaged in such military service in the State of Va. on the 30 day of August 1862, he was wounded, injured or diseased as follows:

By gunshot striking the left shoulder crossing through and lodging against the back bone. 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 pension to which he is entitled for the year ending October 26th, 1895. I have heretofore as a resident of Cobb County been allowed a pension of \$50 dollars, for the year 1894

Sworn to and subscribed before me, this, 8th day of March 1895, S. H. Jones

J. M. Stone Ordinary

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

STATE OF GEORGIA,

Cobb County,

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

Given under my official signature and seal, this 3rd day of March 1895.



J. M. Stone
Ordinary Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

I, Edw. James of Cobb County, }
hereby authorize J. M. Stone
of Maricita }
to receive and receipt for the pension paid hereon and request that he remit same to
me by him
at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 18
day of July, 1897.

E. M. James [L. S.]

Executed in presence of

J. M. Stone

POWER OF ATTORNEY.

STATE OF GEORGIA,

I, Edw. James of Cobb County, }
hereby authorize R. C. Armin
of Cobb Co. }
to receive and receipt for the pension paid hereon and request that he remit same to
J. M. Stone by him
at _____

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

E. M. James [L. S.]

Executed in presence of

J. M. Stone

Copy Certificate
ACT OF 24 OCT. 1897.
(For Those Already Enrolled.)

No. 24-111

INVALID

SOLDIER'S PENSION.

1897.

Name Edw. James

County Cobb

Disability Left Arm

Amount, \$ 50.

2/25 1897.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

J. M. Stone

SEC. OF WARREN, STATE PRINTER, AT WASH.

No data

ACT OF 24 OCT. 1897.

(For Those Already Enrolled.)

No. 2447

INVALID

SOLDIER'S PENSION.

1898.

Name Edw. James

County Cobb

Disability Wound

Amount, \$ 50.

2/26 1898.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

R. C. Armin

SEC. OF WARREN, STATE PRINTER, AT WASH.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.
Personally appears *SW James 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 *25*
day of *March*, 18*87*; that he enlisted in the military service of the Con-
federate States (or of the State of *Georgia*) during the war between the
States, and served as a *Private* in Company *D*, of *7*th Regiment
of *Georgia* Volunteers, *Anderson's* Brigade; that whilst engaged
in such military service in the State of *Georgia*, on the *30* day
of *August*, 18*62*, he was wounded, injured or diseased as follows:

*By gunshot striking the
left shoulder and passing through
the back bone, fracturing the
said shoulder so that applicant
is rendered practically incapa-
ble to perform the ordinary man-
ual 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 pension to which he is
entitled for the year ending October 26th, 1897. I have heretofore under said law as a
resident of *Cobb* county been allowed an invalid pension of

\$30 Dollars, for the year 189*6*
Sworn to and subscribed before me, this, *18* day of *July*, 1897. POST OFFICE *Mableton Ga*

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

STATE OF GEORGIA,

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

Given under my official signature and seal, this *18*
day of *July*, 1897.

Ordinary *Wm. Stone* County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.
Personally appears *SW James 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 *25*
day of *March*, 18*87*; that he enlisted in the military service of the Con-
federate States (or of the State of *Georgia*) during the war between the
States, and served as a *Private* in Company *D*, of *7*th Regiment
of *Georgia* Volunteers, *Anderson's* Brigade; that whilst engaged
in such military service in the State of *Georgia*, on the *30* day
of *August*, 18*62*, he was wounded, injured or diseased as follows:

*By gunshot striking
the left arm and shoulder passing
to the back bone. Whereof
applicant is rendered practically
incapable 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 pension to which he is
entitled for the year ending October 26th, 1898. I have heretofore under said law as a
resident of *Cobb* county been allowed an invalid pension of

\$30 Dollars, for the year 189*7*
Sworn to and subscribed before me, this, *24* day of *July*, 1898. POST OFFICE *Mableton Ga*

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

STATE OF GEORGIA,

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

Given under my official signature and seal, this *24*
day of *July*, 1898.

Ordinary *Wm. Stone* County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, S. W. James hereby authorize J. M. Stone
of Marietta

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

at Marietta

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 16th

day of February 1899.

S. W. James [L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, S. W. James hereby authorize J. M. Stone
of Cobb

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

at Marietta

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 2nd

day of March 1900.

S. W. James [L. S.]

Executed in presence of

James, S. W.
Cobb Co.

(For These Already Enrolled.)

No. 3171

INVALID

SOLDIER'S PENSION.

1899.

Name S. W. James

County Cobb

Disability Armed

Amount, \$ 59

2/24 1899.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDS TO

[Signature]
GEO. W. HARRISON, STATE PRINTER, ATLANTA.

No date

James, S. W.
Cobb Co.

(For These Already Enrolled.)

No. 1287

INVALID

SOLDIER'S PENSION.

1900.

Name S. W. James

County Cobb

Disability Armed

Amount, \$ 50

Warrant issued Mar 7 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDS TO

[Signature]
GEO. W. HARRISON, STATE PRINTER, ATLANTA.

No date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears S. H. James 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 25 day of December 1831; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a Private in Company D, of 7th Regiment of Georgia Volunteers, Anderson's Brigade; that whilst engaged in such military service in the State of Va., on the 30 day of August 1862, he was wounded, injured or diseased as follows:

By gunshot striking left shoulder and fracturing the bones and thereby rendering applicant incompetent to perform the ordinary manual avocations of life.

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1899. I have heretofore under said law as a resident of Cobb County been allowed an invalid pension of \$50 Dollars, for the year 1898.

Sworn to and subscribed before me, this, 8th day of July 1899. S. H. James POST OFFICE Quaritta, Ga.

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

STATE OF GEORGIA,

Cobb County.

I, J. W. Stone Ordinary of said County, do certify that I am well acquainted with S. H. James the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1899.

Ordinary Cobb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears S. H. James of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State and County, and has resided therein continuously ever since the 25 day of December 1831; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a private in Company D, of 7th Regiment of Georgia Volunteers, Anderson's Brigade; that whilst engaged in such military service in the State of Va., on the 30 day of August 1862, he was wounded, injured or diseased as follows:

By gunshot striking left shoulder and fracturing the bones and thereby rendering applicant incompetent to perform ordinary manual avocations of life.

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1900. I have heretofore under said law as a resident of Cobb County been allowed an invalid pension of \$50 Dollars, for the year 1899.

Sworn to and subscribed before me, this, 8th day of July 1900. S. H. James POST OFFICE Quaritta, Ga.

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

STATE OF GEORGIA,

Cobb County.

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

Given under my official signature and seal, this 9th day of July 1900.

Ordinary Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

I S. W. James hereby authorize
John C. C. C. of Marion
 to receive and receipt for the pension paid hereon and request that he remit same to
me by hand
 at his office

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 8th
 day of Jan, 1901.

S. W. James. [L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

I S. W. James hereby authorize
John C. C. C. of Marion
 to receive and receipt for the pension paid hereon and request that he remit same to
me by hand
 at his office

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 8th
 day of Jan, 1901.

S. W. James. [L. S.]

Executed in presence of

J. M. Sam

James, S. W.
Col. C. C.

(For Those Already Enrolled.)

No. 186
 DISABLED
 SOLDIER'S PENSION.
 1901.

Name S. W. James
 County Col. C.
 Disability from Col. C. C.
 Amount, \$ 50

Jan. 10th 1901.

JOHN W. LINDSEY.
 Commissioner of Pensions.

WARRANT HANDLED TO
Col. C. C.

no date

James, S. W.
Col. C. C.

(FOR THOSE ALREADY ENROLLED.)

No. 333
 DISABLED
 SOLDIER'S PENSION.
 1902.

Name S. W. James
 County Col. C.
 Co. 1 Regiment 7th
 Disability 50
 Amount, \$ 50

Jan. 10th 1902.

JOHN W. LINDSEY.
 Commissioner of Pensions.

WARRANT HANDLED TO
Col. C. C.

no date

Applicants Heretofore Allowed Pensions.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears S. M. James 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 25 day of December 1831; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a private in Company D, of 7th Regiment of Ga. Volunteers, Anderson's Brigade; that whilst engaged in such military service in the State of Va., on the 30 day of August 1862, he was wounded, injured or diseased as follows:

By gun shot striking left shoulder and fracturing the bones and thereby rendering applicant incompetent to perform ordinary manual avocations of life

Deponent makes application for the pension to which he is entitled for year ending October 29th, 1901. I have heretofore under said law as a resident of Cobb County been allowed an invalid pension of \$50 Dollars, for the year 1900.

Sworn to and subscribed before me, this 8th day of Janu. 1901. Postoffice S. M. James

John A. Hooten, Org.

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

STATE OF GEORGIA,

Cobb County.

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

Given under my official signature and seal, this 8th

day of Janu. 1901.

John A. Hooten
Ordinary Cobb County.



FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears S. M. James 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 December 1831; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a private in Company D, of 7th Regiment of Georgia Volunteers, Anderson's Brigade; that whilst engaged in such military service in the State of Va, on the 30 day of August 1862, he was wounded, injured or diseased as follows:

By gun shot striking left shoulder and fracturing the bones and thereby rendering incompetent to perform ordinary manual avocations of life

Deponent makes application for the pension to which he is entitled for the year ending October 29th, 1902. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of \$50 Dollars, for the year 1901.

Sworn to and subscribed before me, this 8th day of January 1902. Post-office S. M. James

John A. Hooten

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

STATE OF GEORGIA,

Cobb County.

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

Given under my official signature and seal, this 8th

day of January 1902.

John A. Hooten
Ordinary Cobb County.



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

RECEIVED

POWER OF ATTORNEY.

STATE OF GEORGIA.

Colth County. }
I, *S. H. James* hereby authorize *John Hurley* of _____
to receive and receipt for the pension paid hereon and request that he remit same to _____
by _____
at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal this *5th*
day of *Jan* 1903.
S. H. James [L. S.]

Executed in presence of

S. H. James

CODE SECTION 1284.
(FOR THOSE ALREADY ENROLLED.)

No. *883*

DISABLED

SOLDIER'S PENSION

1903.

Name *S. H. James*
County *Colth*
Co. *D* Regiment *7th*
Disability _____
Amount, \$ *50.00*
423 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

Only

Gen. W. Harrison, State Printer, Atlanta.

no data

James, S. H.
Colth

CODE SECTION 1284.
(FOR THOSE ALREADY ENROLLED.)

No. *883*

DISABLED

SOLDIER'S PENSION

1904.

Name *S. H. James*
County *Colth*
Co. *7th* Regiment *Colth*
Disability *Left Shoulder*
Amount, \$ *50.00*
JAN 25 1904

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

Only

Gen. W. Harrison, State Printer, Atlanta.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA.

Colth County. }
I, *S. H. James* hereby authorize *John Hurley* of _____
to receive and receipt for the pension paid hereon, and request that he remit same to _____
by _____
at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *5th*
day of *Jan* 1904.
S. H. James [L. S.]

Executed in presence of

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears *S. M. James* of *Cobb*

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of *1831*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *B*, of *7*th Regiment of *59* Volunteers, *Anderson's* Brigade; that whilst engaged in such military service in the State of *GA*, on the *30* day of *August*, *1862*, he was wounded, injured or diseased as follows:

By gun shot striking the left shoulder and fracturing the bone and thereby rendering applicant unable to perform ordinary avocations of life

Deponent makes application for the pension to which he is entitled for the year ending October 29th, 1903. I have heretofore, under said law, as a resident of *Cobb* County, been allowed an invalid pension of *50* Dollars, for the year 1902.

Sworn to and subscribed before me, this the *5th* day of *May*, 1903. Post-office *Winnell*

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

STATE OF GEORGIA,

Cobb County.

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

Given under my official signature and seal, this *22* day of *Jan*, 1903.

Ordinary *Cobb* County.



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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears *S. M. James* 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 *December*, *1831*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *B*, of *7*th Regiment of *Georgia* Volunteers *Anderson's* Brigade; that whilst engaged in such military service in the State of *GA*, on the *30* day of *August*, *1862*, he was wounded, injured or diseased as follows:

By gun shot striking left shoulder and fracturing the bone and thereby rendering applicant incompetent to perform ordinary manual avocations of life

Deponent makes application for the pension to which he is entitled for the year ending October 29th, 1903. I have heretofore, under said law, as a resident of *Cobb* County, been allowed an invalid pension of *50* Dollars, for the year 1903.

Sworn to and subscribed before me, this the *5th* day of *May*, 1904. *S. M. James* Post-office *Winnell*

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

STATE OF GEORGIA,

Cobb County.

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

Given under my official signature and seal, this *8th* day of *May*, 1904.

Ordinary *Cobb* County.



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

POWER OF ATTORNEY.

STATE OF GEORGIA.

Colt COUNTY. }
John W. James hereby authorize
John W. James of _____
 to receive and receipt for the pension paid hereon, and request that he remit same to
 _____ by _____
 at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 3

day of May 1905. *John W. James* [L. S.]

Executed in the presence of

J. M. Gann

POWER OF ATTORNEY.

STATE OF GEORGIA.

Colt COUNTY. }
John W. James hereby authorize
John W. James of _____
 to receive and receipt for the pension paid hereon, and request that he remit same to
 _____ by _____
 at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 1

day of May 1905. *John W. James* [L. S.]

Executed in the presence of

J. M. Gann

James, S. W.
 (FOR THOSE ALREADY ENROLLED.)

No. 34

DISABLED
 SOLDIER'S PENSION
 1905.

Name *John W. James*
 County *Colt*
 Co. *D* Regiment *7th*
 Disability
 Amount, *\$12* 1905.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO
Ordy
 The Pensioner's and Pension Co., 110 N. Main St.,
 New York, N. Y.

no data

James, S. W.
John W. James

COAST SECTION 120.
 (FOR THOSE ALREADY ENROLLED.)

No. 273

DISABLED
 SOLDIER'S PENSION
 1906.

Name *John W. James*
 County *Colt*
 Co. *D* Regiment *7th*
 Disability
 Amount, *\$50* 1906.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO
Ordy
 The Pensioner's and Pension Co., 110 N. Main St.,
 New York, N. Y.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb COUNTY.

Personally appears *S. H. James* 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 *1837*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *B*, of *1*th Regiment of *Volunteers Anderson's* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *30* day of *August* *1862*, he was wounded, injured or diseased as follows:
By Gun shot Shattering left Shoulder and fracturing the bones thereby rendering applicant unable to perform ordinary manual avocations of life

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1905. I have heretofore, under said law, as a resident of *Cobb* County, been allowed an invalid pension of *50* Dollars, for the year 1904.

Sworn to and subscribed before me, this *2* day of *January* 1905. *S. H. James*
J. W. James Post-office

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

STATE OF GEORGIA,
Cobb COUNTY.

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

Given under my official signature and seal, this day of *January* 1905.

Ordinary

County.

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



FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Cobb County.

Personally appears *S. H. James* of *Cobb* County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of *18*; that he enlisted in the military service of the Confederate States, (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *D*, of *24*th Regiment of *Volunteers*'s Brigade; that whilst engaged in such military service, in the State of *Georgia*, on the *30* day of *August* *1862*, he was wounded, injured or diseased as follows:
Arm disabled

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1905. I have heretofore, under said law, as a resident of *Cobb* County, been allowed an invalid pension of *50* Dollars, for the year 1904.

Sworn to and subscribed before me, this *2* day of *January* 1905. *S. H. James*
John Anthony Post-Office

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

State of Georgia,
Cobb County.

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

Given under my official signature and seal, this day of *January* 1905.

Ordinary *John Anthony* Cobb County.

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



POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

E. W. James, hereby authorize

John W. Lindsey of

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

by

at

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

day of July 1907.

E. W. James [L. S.]

Executed in presence of

W. H. Lamb

James, E. W.
Cobb Co.

Once Success 150.
(FOR THOSE ALREADY ENROLLED)

No. 225

**DISABLED
SOLDIER'S PENSION
1907.**

Name E. W. James

County Cobb

Co. D. 7th Regiment 24th Ia.

Disability

Amount, \$ 5.00

JAN 21 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

no data

Geo. W. H. Lamb, State Printer, Atlanta.

Audited

1889

COMPTROLLER GENERAL

Maimed Soldiers.

Voucher No. 786

Amount \$ 5.00

Paid to E. W. James

For Left arm

disabled

July 21

1889

Included in Warrant No. 10
issued to Treasurer.

1889

WARRANT CLERK

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

W. S. Clay

FOR A. B. CAMPBELL'S REFORMED PENSIONS

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Cobb County.

Personally appears *S. M. James* of *Cobb*

County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the

day of _____ 18____; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the

States, and served as a _____ in Company *D*, of *74th* Regiment of _____ Volunteers _____'s Brigade; that whilst engaged

in such military service in the State of _____, on the _____ day of _____ 186____, he was wounded, injured or diseased as follows:

Arm disabled

Deponent makes application for the pension to which he is entitled for the year ending October 20th, 1907. I have heretofore, under said law, as a resident of *Cobb* County, been allowed an invalid pension of *50.00* Dollars, for the year 1906.

Sworn to and subscribed before me, this the

4 day of *July* 1907.

S. M. James

Postoffice _____

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

State of Georgia,

Cobb County.

I, *John Andrew* Ordinary of said County,

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

Given under my official signature and seal this *4*

day of *July* 1907.

John Andrew Ordinary of *Cobb* County.

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

No. *786.*

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga. July 21 1889

Mr. *S. M. James*

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.

Dec. 24, 1888, and the same having been allowed for

Left arm disabled

He is entitled to receive the sum *50.00* Dollars for such disability, the same being the amount due for the year ending October 24, 1889.

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

J. D. Gordon
GOVERNOR

By the Governor

W. H. Harrison

CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

50.00

Dollars

per above voucher, this

21 of *July*

1889.

A. H. Olney

Audited

18

COMPTROLLER GENERAL

Goble

Maimed Soldiers.

Voucher No. 1115

Amount \$ 50

Paid to S. W. J. Jones

For Arm Disabled

July 13 1890

Included in warrant No.

issued to Treasurer.

18

WARRANT CLERK

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

A. S. Clay

Audited

1891.

COMPTROLLER GENERAL

Jones, S. W.

1891.

Maimed Soldiers.

Voucher No. 576

Amount \$ 50

Paid to S. W. J. Jones

For Arm Disabled

July 11 1891.

Included in warrant No.

issued to Treasurer.

1891.

WARRANT CLERK

Geo. W. Harrison, State Printer, Atlanta.

A. W. Brown

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

No. 1115-

Atlanta, Ga., July 13 1890

Mr. *S. W. James* 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 00/1* Dollars

for such disability, the same being the allowance due for the year ending October 24, 1890

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

By the Governor,
W. H. Harrison GOVERNOR.
CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty 00/1 Dollars.
per above voucher, this 1st of July 1890

*S. W. James per
his atty in fact, R. S. Clay*

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

1891.

No. 376

Atlanta, Ga. July 11 1891.

Mr. *S. W. James* 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 & disabled
He is entitled to receive the sum of _____ Dollars

for such disability, the same being the allowance due for the year ending October 24, 1891.

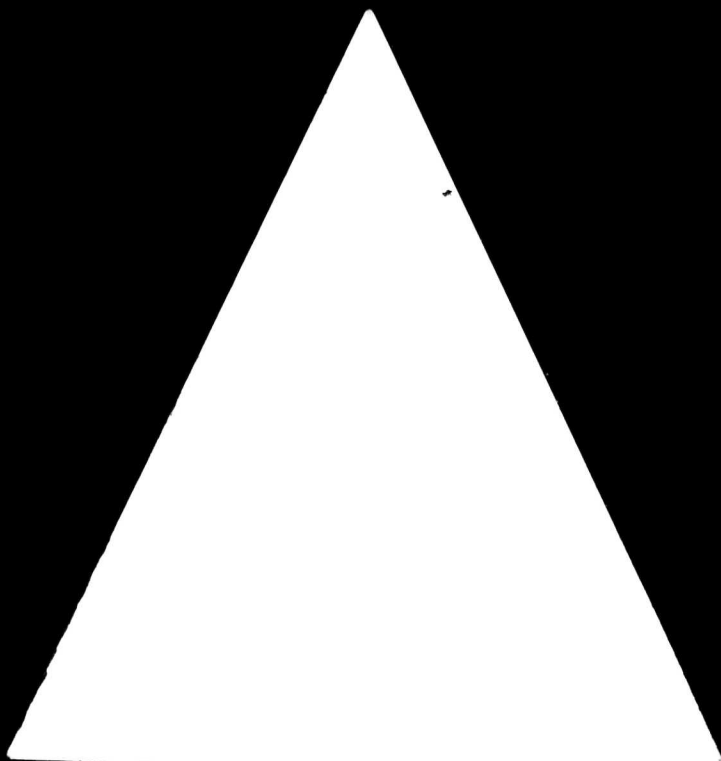
The Treasurer will pay the same and hold his receipt on this voucher and return same to
Executive Department for warrant.

By the Governor,
W. H. Harrison GOVERNOR.
CLERK EXECUTIVE DEPARTMENT.

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

Fifty 00/1 Dollars.
per above voucher, this 11th of July 1891.

*S. W. James
per R. C. Drinn*



Some mistake about
Cuthbert being on Indian
Prisoner Ball from Barber
County - when he died - ~~was~~
first time on any Prisoner
Ball as drawing a Prisoner
from Barber or Cobb County
I cannot allow a Prisoner
of this application until
Cuthbert is located
on Ball - ~~App~~ must be no
County of death. *W. L. L. L.*
Case of Prisoner

Geo. W. Harrison, State Printer.

[NEAL]

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 _____

[SEAL]

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

Personally came Mrs. *L. R. Jannon*

COUNTY OF *Cobb* who says on oath she is the

widow of *Thomas R. Jannon* to whom, in said County of

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

10th day of *Sept* 18 *61*, that she remained his wife up to the *29th*

day of *April* 190 *1*, at which time he died, and that she has not since married.

At the time of his death he was a resident of *Bartow* County, in said State of

Georgia, and was on the *Indigent* pension roll of the State of Georgia, having been allowed

a pension of *\$60⁰⁰* per annum on account of being a soldier in Company *D*

36th Regiment, *Ca.* Volunteers at-large

What affliction have you and how does it effect you? *Erysipelas of lower*

limbs and inflammatory rheumatism of

limbs and lower limbs - Can barely walk.

What have you been doing to earn a support since 1st of January, 1900? *Nothing at all*

Am unable to do any work.

What property or effects had you on 1st January, 1900? *Nothing.*

What have you acquired since, and what income have you now? *Nothing whatever.*

My husband drew a pension in 1901. This was all

exhausted in paying expenses of his sickness and burial.

What disposition have you made of any property since 1st January, 1900, and at what price and for what purpose?

I have had none to dispose of.

Deponent further says that she is now a resident of *Cobb* County and has

continuously resided in the State of Georgia since the _____ day of _____ 18 *57*.

She applies for the pension provided by Act of the General Assembly, approved December 18, 1901.

Sworn to and subscribed before me this *7th* day of *May* 190 *2*.

John A. Taylor *Mrs. L. R. Jannon*

Ordinary of *Ordinary of*

NOTE.—All blank spaces must be filled up.

Cobb County, Ga.

WIDOW'S PENSION,

190.2

No.

Mrs. *L. R. Jannon*

County of *Cobb*

Widow of *Thomas R. Jannon*

Warrent issued *3rd Feb*

and handed to

J. W. LINDSEY,

Commissioner of Pensions,

Geo. W. Harwood, State Printer

9/30-1902 12/5/1902

Pension Office 10/1-1912
Same matter about
husband living in Georgia
Pension for John Rannon
Army when he died - about
1861 when in any Pension
Roll as drawing a Pension
from Rannon or Cobb County
Cannot allow a Pension
to this applicant until
husband is located
on Roll - App. must be as
Army of date. *W. Lindsey*
Care of Pension

AFFIDAVIT FOR THREE WITNESSES.

STATE OF GEORGIA, Personally came J. A. Johnson
COUNTY OF Cobb W. R. Johnson and
Geo. S. Avery known to me to be reputable and truthful person who says
on oath that from his own personal knowledge Mrs. J. R. Jarman
who made the foregoing affidavit is the widow of Thos. R. Jarman
who died in Barlow County and State of Georgia on the
29 day of April 1901, and that she has not since married, that she became his
wife on the 10 day of Sept 1891, and so remained unto the time of his death,
and that she has resided in this State continuously since the _____ day of _____ 18 57
With what affliction does she suffer? Leucorrhoea

What property or income had she on 1st January, 1900?

None

What has she in her possession and control now?

Nothing

Has she supported in 1900 and 1901?

I have supported three girls and I know that she has no
way of support whatever, since her husband's death.

I have no personal interest in the pension asked for

Sworn to and subscribed before me this 25th day of September 1902.

Ordinary Cobb County, Georgia.

PHYSICIANS' AFFIDAVIT.

STATE OF GEORGIA, Personally came before me
COUNTY OF Cobb W. R. Terry
and W. C. Humphries both of whom are known to me to be reputable
physicians, who say on oath that they personally know Mrs. J. R. Jarman
mentioned in the foregoing affidavit, that she is permanently afflicted with (state disease and how it prevents her
earning a support)

Pneumonia and all
age, and general breaking
down of system - W. R. Terry M.D.
W. C. Humphries M.D.

Sworn to and subscribed before me this 25th day of September 1902.

Ordinary Cobb County.

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

STATE OF GEORGIA, I, John Hunter Ordinary,
COUNTY OF Cobb do and for said County of Cobb

State of Georgia, hereby certify that I am acquainted with Mrs. J. R. Jarman
the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to me
by reputable witnesses) that she resides in this County, and that she has resided in the State of Georgia continuously
since the 18th day of May 18 94, and has not lived out of the
State since that date. I also certify that the witnesses, to-wit: J. A. Johnson
W. R. Johnson and Geo. S. Avery, whose testimony she
presents to sustain her claim, are known to me to be truthful witnesses, entitled to full faith and credit as such,
and that the full text of the affidavit was read to and understood by them before same was signed. I am fully
satisfied that this claim is made in good faith, and I have caused the applicant and the witnesses to read or hear
read the proofs they sign. I hope this claim will be
approved for payment in January 1903
In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the 24
day of Sept 1902.

SEAL

John Hunter
Ordinary.

NOTES.

The pension is only payable to those widows whose husbands were on Pension Roll at the time of death. The
marriage must have existed at the time husband was a soldier, and the widow must have remained unmarried since the
death of such husband.

Proofs by one witness and two physicians will be accepted when it is shown that the same can not be furnished,
but in all cases the best proof accessible will be required and it is incumbent on the applicant to make out a clear case
covering the above points.

Affidavits must be made in presence of the Ordinary.

Amendment -
Dec. 13th 1902 -

Georgia, Cobb County -

Personally Comes Mrs. J. R. Jarmor, who being duly sworn deposes and says that at the time of the death of her husband, J. R. Jarmor, he was on the Pension roll of Cherokee County, Ga. State, and that the statement in her original application, placing him on rolls of Bartow County, was an error on her part, arising from the fact that he lived very near the line of the two Counties -

Sworn to and Subscribed before me, this Dec. 13th 1902,
John Darter, Ordway

Personally Comes J. P. Johnson, G. M. Johnson and Ch. S. Sperry, residents of said County, who being duly sworn say that the above statements of Mrs. J. R. Jarmor are true, and that the error arose as therein stated, to the best of their knowledge and belief -

(J. P. Johnson
G. M. Johnson
Chas. Sperry

Sworn to and Subscribed before me, this Dec. 13th 1902,
John Darter, Ordway

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY, I, *Mrs. J. R. Jarmor*, hereby authorize *John Darter* of *Marietta, Ga.* 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 *17th* day of *January* 1905. *Mrs. J. R. Jarmor* [L. S.]

Executed in presence of

Carmen J. R.
Cobb County

To Those Herebefore Paid.

1905.

No. 284

INDIGENT
WIDOW'S PENSION,
For year ending Dec. 31, 1905.

PAID TO
Mrs. J. R. Jarmor
OF
Cobb
County,
Widow of *J. R. Jarmor*
Co. H. 36th Ia.
Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
JAN 23 1905
AND HANDED TO

D

Amendment
Dec. 13th 1902

Georgia, Cobb County -

Personally Comes Mrs. J. R. Jamison, who being duly sworn deposes and says that at the time of the death of her husband, J. R. Jamison, he was on the Pension roll of Cherokee County, Ga. State, and that the statement in her original application, placing him on rolls of Bartow County, was an error on her part, arising from the fact that he lived very near the line of the two Counties -

Sworn to and subscribed before me, this Dec. 13th 1902.
John D. Smith, Ordinary

Personally Comes J. N. Johnson, G. M. Johnson and Ch. S. Avery, residents of said County, who being duly sworn say that the above statements of Mrs. J. R. Jamison are true, and that the error arose as therein stated, to the best of their knowledge and belief -

(J. N. Johnson)

(G. M. Johnson)

(Chas. Avery)

Sworn to and subscribed before me, this Dec. 13th 1902.
John D. Smith, Ordinary

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 2

STATE OF GEORGIA

County of Cobb

PERSONALLY COMES Mrs.

J. R. Jamison

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 January 1st 1894. That she is the Widow of Chas. R. Jamison who was a soldier in Company D of the 36th Regiment of Ca.

Volunteers, that he enlisted in said regiment on or about the month of 1861 and served in the Army up to May 1865. That he died on the 12th day of April 1862

On acct. of age, infirmity, poverty she is unable to support herself

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 1861.

I have been allowed an Indigent pension as a resident of Cobb County, under Act 1900, for the year 1904, and now apply for the pension provided by law for the year ending December 31, 1905

Sworn to and subscribed before me, this 17th day of January 1905. John D. Smith Ordinary. Mrs. J. R. Jamison Post-Office Cobb

State of Georgia, Cobb County. I, John D. Smith Ordinary of said County, certify that I am well acquainted with Mrs. J. R. Jamison, who made the above affidavit and am satisfied that the facts therein stated are true, and I know who is the individual who represents herself to be, and that she has continuously resided in this State since the day of January 1894.

Given under my official signature and seal, this the 17th day of January 1905. John D. Smith Ordinary of Cobb County.

Official Seal

NOTE.-All blanks must be filled. Vouchers and Affidavits must bear date after January 1st, 1905.

John J. King,
Ordinary.

NOTE.—All blanks must be filled.
County. *St. Louis*
Vouchers and Affidavits must bear date after January 1st, 1905.

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.]

Jarrell, J. C.,
Cott G.
No 1912

INDIGENT PENSION.

1902

Name J. C. Jarrell

County Cobb

Post, 4th Va. State Troop

Approved _____ 190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Franklin Printing and Publishing Co., 404 W. Harrison, N.Y.
Atlanta, Georgia.

4/26/02

E

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. 8.]

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

COUNTY

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

1. What is your name and where do you reside? (Give State, County and Postoffice.)
J. C. Farrell, Marietta, Cobb County, Ga.
2. How long and since when have you been a resident of this State? *All my life, since 1848.*
3. When and where were you born? *Newton County, Ga. May 16th, 1848.*
4. When and where did you first enter company and regiment did you enlist or serve? *At 14th Ga. Inf. Regt., at Corning, Ga. June 1864.*
5. How long did you remain in such company and regiment? *About 10 months.*

6. When and where was your company and regiment surrendered and discharged? *I don't know. I was captured at Selma, Ala. February 1865.*

7. Were you present with your company and regiment when it was surrendered? *No.*
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? *I was captured at Selma, Ala. February 1865, and kept prisoner at Selma until paroled.*
9. How much can you earn (gross) per annum by your own exertions or labor? *Not to forty 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"? *2nd ground.*
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? *At upon the third, state whether you are totally blind and when and where you lost your sight? *Have right eye, and shortness of breath. Have been so afflicted for four or five years. This disability has prevented me from doing most of my work. Occasionally am able to work a little.**

13. What property, real and personal, or income, do you possess, and its gross value? *Nothing, but little household goods.*
14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904 and 1905, and what disposition, if any, by sale or gift, have you made of same? *Nothing but little household goods.*

15. In what County did you reside during those years, and what property did you then retain for taxation? *Cobb County. Returned nothing but little household goods.*
16. How were you supported during the years 1901, 1902, 1903, 1904 and 1905? *By my children.*
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *Don't know what it cost. I contribute \$0 to \$50 some.*
18. What was your employment during 1901, 1902, 1903, 1904 and 1905? What pay did you receive in each year? *Have no regular employment. No a days work and occasional means and no homestead. Child six years old.*
19. Have you a family? If so, who composes such family? Give their means of support. Have they a homestead, or other property? Their ages and how employed? *Yes - Wife + 1 Child. They have no means and no homestead. Child six years old.*
20. Are you receiving any pension? If so, what amount and for what disability? *No.*

21. Have you ever made an application for pension before? *One.*
22. How many applications have you ever made and under what name? *One, under name J. C. Farrell. It was returned for additional proofs & was signed in a building.*
23. day of *October* 190*6* at *Corn* County, *Ga.*
J. C. Farrell
Applicant.

Every Question MUST Be Answered.

James H. C. Cott Co.
Oct 1902
INDIGENT PENSION.
1902
James H. C. Cott Co.
Oct 1902
14th Ga. Inf. Regt.
1864
1902
JOHN W. LINDSEY
Commissioner of Pensions.
WARRANT HANDED TO
Ordinary with name of Applicant, Company and Regiment on back as indicated above.
People refusing to sign to be taken to Prison, W.P.
9/26/06
44

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Cobb COUNTY.

N.H. Talley of said State and County, having been presented as a witness in support of the application of J.C. Jarrell for pension under section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? N.H. Talley, Marietta, Cobb County, Ga. R.F. No. 3.
2. Are you acquainted with J.C. Jarrell the applicant; if so how long have you known him? Yes. Since Spring of 1864.
3. Where does he reside, and how long and since when has he been a resident of this State? Marietta, Cobb County, Ga. Has lived in Ga. ever since I know him.
4. When, where and in what company and regiment did he enlist, and how do you know? He was in 4th Co. Reserves, Covington, Ga. June 1864.
5. Were you a member of the same company and regiment? Yes. I was there when he joined.
6. How long did he perform regular military duty? Ten months to my knowledge.
7. When and where was his command surrendered? Captured at Selma, Ala. about April 1st 1865. So I am informed by members of Co.
8. Were you present when it surrendered? No. I was present until March 20th 1865. He was in a great hurry to get out.
9. Was applicant present? He was in the ranks he was captured about December.
10. If he was not present, where was he?

When did he leave his command? For what cause?

By what authority he left? How do you know all of this?

I have always been told by members of Co. that Jarrell was captured at Selma about same time as Co.

11. What property, effects or income has the applicant? (Give your means of knowledge.) Nothing to me as I know except N&K furniture.
12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904 and 1905, and what disposition, if any, did he make of same? Nothing but above.

13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? Not that I know of.

14. What is the applicant's occupation and physical condition? His physical condition is very bad. I don't know of any occupation he has. But think he is able to follow any occupation.
15. Is the applicant unable to support himself by labor of any sort; if so, why? He is unable, I think, on account of poor health.

16. How was he supported during the years 1901, 1902, 1903, 1904 and 1905? By the work of his children.

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

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code. He has shortness of breath that prevents his working at labor and is incapacitated for other employment.

19. Who employs family? What property have they? Children's ages and their earning capacity? Wife + 2 daughters - none - one about 18 years + one 6 yrs. eldest girl works in factory - makes very much.

20. What interest have you in the recovery of a pension by this applicant? Nothing.

Sworn to and subscribed before me, this 1st day of April 1906, at Marietta, Georgia.

John H. Talley Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Cobb COUNTY.

Personally came before me Will Kemp and Joe H. Simpson, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully

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

Applicant has chronic bronchitis and possibly nephritis. Also mild insufficiency of heart at times. Inconspicuous disease for causing a support.

and that he has no interest in said pension being allowed.

Sworn to and subscribed before me, this 1st day of April 1906, at Marietta, Georgia.

Will Kemp M.D. Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cobb COUNTY.

I, John H. Talley Ordinary, in and for said County, hereby certify that the applicant J.C. Jarrell resides in said County, and has been a bona fide resident of this State since the 1st day of January 1894 and that the witnesses, viz.: N.H. Talley & J. H. Simpson

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

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

I further certify that the tax digest of Cobb County shows that applicant returned for taxation in his name in 1901 25 Dollars of property, and in 1902 25 Dollars of property; in 1903 25 Dollars of property; in 1904 25 Dollars of property; in 1905 25 Dollars of property.

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

Witness my hand and seal of office, this 25 day of April 1906, at Marietta, Georgia.

John H. Talley Ordinary.

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

2. Additional affidavits may be attached if blank spaces are insufficient.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

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

WITNESS my hand and seal, this 14 day of June 1907.

[L. S.]

Executed in presence of

Garrett, J. C.,
Coff G.,

(FOR THOSE ALREADY ENROLLED)

No. 611

INDIGENT
SOLDIER'S PENSION
1907.

Name _____

County:

Co. 4 7th Regiment

WARRANT ISSUED

1907

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

DR. W. HANSON, NORTH POCONO, ATLANTA

data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Cobb County.

Personally appears J. G. Jarrell of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 18____; that he is _____ years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of _____ in Company _____ of _____th Regiment of Reserve; that his physical condition is as follows: Infirmary & poverty

that his property consists of the following items: _____

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

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

Sworn to and subscribed before me, this the _____ day of April, 1907. J. G. Jarrell Ordinary.

State of Georgia,

Cobb County.

I, John H. Hooton Ordinary of said County, do certify that I am well acquainted with J. G. Jarrell the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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, 1907.



John H. Hooton Ordinary Cobb County.

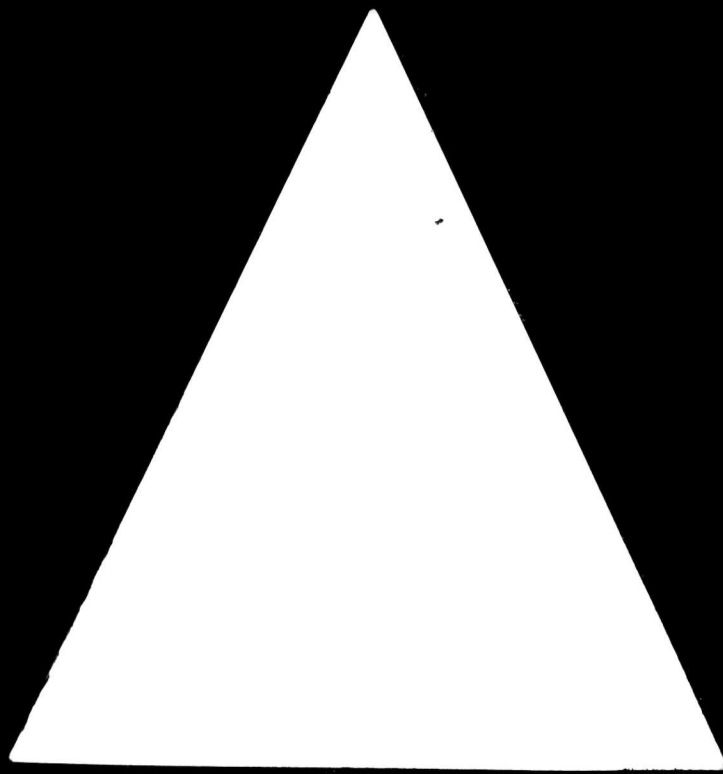
NOTE.—The blank space must be filled.
NOTE.—Affidavits should not be attested before January 1st, 1907.

Georgia
Cobb County

} Personally knows Z. J. Anderson,
a resident of said County, who
being duly sworn deposed and
says that he was in Co. I, 4th
Ga. Reserves, and served in said
Co. from May 16th, 1864, to April
19th 1865. The Applicant, J. C.
Jarrell, enlisted at Covington, Ga.
May 16th, 1864, in said Company
and served up to April 10th
1865, when he was captured with
the Co. at Selma, Ala.
Defendant was present a member
of the same Co. and personally
knows the above stated facts
to be true.

J. J. Anderson
Sworn to and subscribed before
me this Jan. 16th 1906, and
I certify that Z. J. Anderson is
a bona fide resident of said
County, whose statements are
worthy of full faith and credit.
This Jan 16th 1906.

John A. Harkins
Clerk



Jamell, Mrs. J. C.
Q. R. 1925-C-6
WIDOW'S APPLICATION

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

County *Cobb*
Name *Mrs. J. C. Jamell*
Widow of *Mrs. J. C. Jamell*
Company _____
Regiment _____
Date of Husband's Death *Aug. 12, 1925*
Date of Marriage *Mar. 9, 1875*
Approved *John W. Tolant*

OCT 30 1925

Commissioner of Pensions.

10-29-25-C-

STATE OF GEORGIA

COUNTY

J. M. Jamell
Roll

I, *J. M. Jamell*, Ordinary of said County, certify that I know
J. M. Jamell the applicant for pension; that he is the person he repre-
sents himself to be; and that he has been continuously, a bona fide resident citizen of said State since
January 1st, 1920; that I also know *J. M. Jamell* the witness as to
marriage; and that both the foregoing were duly sworn by me before signing the respective affidavits,
and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this *28* day of *Oct.*

(SEAL OF ORDINARY)

J. M. Jamell 1925
of *Cobb* County

Instructions:

- Before any application is forwarded the Ordinary shall swear applicant and the witnesses in the following words:
"You do solemnly swear by the Great Seal of the State of Georgia, that you are true and faithful to the laws of the State of Georgia, and that you will do no violence to the rights of any person, and that you will do no violence to the rights of any person."
- Give each of the witnesses a copy of the questions asked you and the evidence you give shall be the whole truth. So help you God."
- All affidavits must be made before the Ordinary.
- Only widows who are married prior to first January, 1881, are entitled to pension.
- Witnesses must submit copies of marriage licenses if obtainable. If not, prove marriage by some person, or by general reputation.
- Witnesses of Doubled Pensioners must use the Blue Application Book and state and prove full term of husband's service. Doubled Pensioners made no proof of service and were not required to do so.

APPLICATION FOR PENSION BY A WIDOW

WIDOW'S APPLICATION

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

County Cobb
Name Mrs. J. C. Jones
Widow of John W. Jones
Company _____
Regiment _____
Date of Husband's Death Aug. 12, 1925
Date of Marriage May 15, 1915
Approved John W. Toland

OCT 30 1925

Commissioner of Pensions

10-29-25-E

Ordinary's Certificate

STATE OF GEORGIA

Cobb COUNTY.

I, J. M. Morris, Ordinary of said County, certify that I know
Mrs. J. C. Jones the applicant for pension; that he is the person he repre-
sents himself to be, and that he has been, continuously, a bona fide resident citizen of said State since
January 1st, 1920; that I also know J. M. Morris, the witness as to
marriage, and that both the foregoing were duly sworn by me before signing the respective affidavits,
and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 28 day of Oct, 1925

(SEAL OF ORDINARY.)

J. M. Morris 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
give shall be the whole truth. So help you God."
2. Additional affidavits may be attached if blank spaces are sufficient.
3. All affidavits must be made before the Ordinary of the County of residence."
4. Only widows who are married prior to first January, 1881, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general
reputation.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's
service—because Disabled Pensioners made no proof of service and were not required to do so.

APPLICATION FOR PENSION BY A WIDOW
Whose Deceased Husband Was on the Pension Roll of Georgia. (Not to be
Used by the Widow of a Disabled Soldier Pensioner.)

STATE OF GEORGIA.

Cobb COUNTY
Personally before me comes Mrs. J. C. Jarrell of said County,
who, after having been duly sworn, says that she is the widow of J. C. Jarrell
to whom, in the County of Cobb State of Ga she was married on
the 10 day of March 1875 and that she remained his wife, and resided with him to the
date of his death in Sept 12 1925 and that she has not since his death remarried; at the time of
his death he was a resident of Cobb County, in said State of
Georgia, and he was on the State Pension Roll of the State and paid a pension of
\$100 in Cobb County for 1925 (per annum), on account of being a soldier
in Company Regiment (Volunteers or State Militia).

That she is now a bona fide resident citizen of said State of Georgia, and she has, continuously, re-
sided there since for past 69 years 19

Sworn to and subscribed before me, this the
2 day of October, 1925 } Mrs. J. C. Jarrell
J. M. Gann Ordinary } Applicant.
of Cobb County }

(SEAL OF ORDINARY.)

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

STATE OF GEORGIA.

Cobb COUNTY
Personally before me comes J. M. Morris known to be a
responsible and truthful person, residing in said County, who after having been duly sworn, says that
of deponent's own personal knowledge, Mrs. J. C. Jarrell, who made the foregoing
affidavit, is the lawful widow of J. C. Jarrell who died in Cobb
County in said State of Ga on the 12 day of September, 1925, and
that she ~~has~~ not since married; that she became the wife of J. C. Jarrell on
the 10 day of March, 1875; that she and he had resided together as husband
and wife, continuously, since that time day of 19 , and that
was the same man who was on the pension roll of said State of Georgia from Cobb
County Cobb when he died.

Sworn to and subscribed before me, this the
28 day of October, 1925 } J. M. Morris
J. M. Gann Ordinary }
of Cobb County }

(SEAL OF ORDINARY.)

County Cobb when he died.

Sworn to and subscribed before me, this the
28th day of October, 1923.
J. M. Gann Ordinary
 of Cobb County

(SEAL OF ORDINARY.)

J. W. Morris

FILED
 APR 18 1930
 VETERAN SERVICE OFFICE
 A. L. HENSON, Director

FILED
 APR 22 1930
 VETERAN SERVICE OFFICE
 A. L. HENSON, Director

TO PAY
 1930. \$127
 Cig. & C. Tax. \$
 TOTAL

J. Jarrell, J. C. (1923)
 For Cobb County

**Application for
 Expenses of Last
 Illness and Funeral**
 (UNDER ACT OF 1919)

Carl W. Daniell Ordinary
 For: Mrs. J. C. Jarrell
 (Name of Deceased)

Date of Death: Nov. 13, 1923

Amount: \$ 222.00 1923

| PAID TO ORDINARY ON THIS CLAIM: | |
|---------------------------------|----------------------|
| 1923 | FUND FROM WHICH PAID |
| 2-27 | CRC 60.00 |
| 2-28 | 1920 27.00 |
| 3-3-24 | CRC 35.00 |
| TOTAL 122.00 | |

Approved, and ordered paid,
J. L. Henson 1923
 A. L. HENSON,
 Director, Veterans Service Office.

222
 187
 35

STATEMENT
MAYES WARD & CO.
 FUNERAL DIRECTORS AND EMBALMERS
 AMBULANCE SERVICE

TELEPHONE 524
 DAY OR NIGHT

FUNERAL HOME
 214 LAWRENCE ST.

MARIETTA, GA. Dec. 12, 1923

M. Mrs. Geo. Duncan,
 Marietta, Ga. (Mrs. J. C. Jarrell)

Funeral expenses of Mrs. Jane Marion Jarrell

| | | |
|----------|---------------------|--------|
| 11-13-23 | To casket | 165.00 |
| | Dress | 20.00 |
| | Embalming | 15.00 |
| | Hearse trip | 10.00 |
| | Grave | 5.00 |
| | Pd. notice to paper | 4.00 |
| | | 222.00 |

The above and foregoing account is rendered
 for services in the funeral expenses of Mrs.
 Jane Marion Jarrell, who died without owning
 sufficient property to pay this bill.

Mayes Ward & Co.
 Sworn to and subscribed
 before me, this 13 day
 of December, 1923.

Carl W. Daniell
 Ordinary.

July 30
Aug 30
60

FILED

APR 18 1936
VETERAN SERVICE OFFICE
A. L. HENSON, Director

VETERAN SERVICE OFFICE
A. L. HENSON, Director

APR 29 1936
VETERAN SERVICE OFFICE
A. L. HENSON, Director

TO PAY

1930. \$127
Cig. & C. Tax. \$
TOTAL

J. C. Jarrell
For Cobb County

**Application for
Expenses of Last
Illness and Funeral**

(UNDER ACT OF 1919)

Jas. J. Daniell, Ordinary

For: *Mrs. J. C. Jarrell*
(Name of Applicant)

Date of Death: *Nov. 13, 1935*

Amount: \$ ~~75.00~~ *\$60.00*

| PAID TO ORDINARY ON THIS CLAIM | | | |
|--------------------------------|------------|-------|-------|
| FUND FROM WHICH PAID | | | |
| 8-27 | <i>Che</i> | 60.00 | |
| 8-28 | <i>35</i> | 1930 | 27.00 |
| 8-30 | <i>Che</i> | | 27.00 |
| TOTAL | | 35 | 60.00 |

Approved, and ordered paid,

Jas. J. Daniell, 1935
A. L. HENSON,
Director, Veterans Service Office.

222
187
35

MAYES WARD & CO.
FUNERAL DIRECTORS AND EMBALMERS
AMBULANCE SERVICE

TELEPHONE 149
DAY OR NIGHT

FUNERAL HOME
218 LAWRENCE ST.

MARIETTA, GA., Dec. 12, 1935

M. Mrs. Geo. Duncan,

Marietta, Ga. *(Mrs. J. C. Jarrell)*

Funeral expenses of Mrs. Jane Marion Jarrell

| | | |
|----------|---------------------|---------------|
| 11-13-35 | To casket | 165.00 |
| | Dress | 20.00 |
| | Embalming | 15.00 |
| | Hearse trip | 10.00 |
| | Grave | 8.00 |
| | pd. notice to paper | 4.00 |
| | | 222.00 |

The above and foregoing account is rendered for services in the funeral expenses of Mrs. Jane Marion Jarrell, who died without owning sufficient property to pay this bill.

Sworn to and subscribed before me, this 13 day of December, 1935.

Mayes Ward

Jas. J. Daniell
Ordinary.

\$60.00

Marietta, Ga., March 6, 1936

RECEIVED of Jas. J. Daniell, Ordinary, Cobb County,
SIXTY DOLLARS to apply on the funeral expenses of
Confederate Widow Pensioner, Mrs. J. C. Jarrell.

MAYES WARD & COMPANY

By *Mayes Ward*

**Application for
Payment of Expenses of Last Illness and Funeral**

(Under Act of 1919)

(To be disbursed by the Ordinary)

GEORGIA, _____

County: _____

Before me, the Ordinary of said County, comes John D. Collins
(Tax Collector) of said County, who, after being duly sworn, on oath says
that he knew Mrs. J. C. Farrell late of said County, a Confed-
erate pensioner, and that said person is the identical person named and described in the attached
certified copy of burial certificate; and that said pensioner LEFT NO WIDOW and NO ESTATE of
ANY KIND OR VALUE sufficient to pay the expenses of last illness and funeral, which amounted
to the sum of \$ 222 00, as shown by sworn statements FULLY and COMPLETELY
ITEMIZED, hereto attached.

Sworn to and subscribed before me,

this the 27 day of Dec, 1933.
J. S. Danville Ordinary.

John D. Collins

CERTIFICATE OF THE ORDINARY

GEORGIA, _____

County: _____

I certify that John D. Collins who subscribed
to the foregoing affidavit is known to me to be a person whose statement is entitled to full faith and
credit. I further certify that I knew Mrs. J. C. Farrell (Mrs. Jane Marion Farrell) the deceased
pensioner referred to in the foregoing affidavit and that said deceased was at the time of death
regularly enrolled as a pensioner on the records of file in my office. I further certify that said de-
ceased pensioner is the identical person named and described in the attached certified copy of burial
certificate, was not survived by a widow and left no estate of any kind sufficient to pay the expenses
of last illness and burial for which claim is made.

Given under my hand and seal of office, this the 27 day of Dec, 1933.

(Seal of Ordinary)

J. S. Danville Ordinary.

INSTRUCTIONS:

- 1st. Certified copy of Burial Certificate must accompany this application.
- 2nd. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 3rd. Each account must be sworn to before the Ordinary, and in the following form:
"The above and foregoing account is rendered for services in the last illness (or funeral expenses, as the case may be) of _____, who died without owing sufficient property to pay this bill.
- 4th. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed and signed as indicated.
- 5th. The completed voucher—this blank and the bills—must be sent to the Veterans Service Office for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 6th. Return this application, and attached bills, properly receipted, to the Veterans Service Office.
- 7th. Ordinary should see that the back of this blank, when folded, is filled out.
- 8th. This voucher, if approved, will be sent back to you with the funds with which to pay the approved bills. When you have paid the bills and obtained a receipt for each payment, return the voucher, with bills and receipts, to be permanently filed in the Veterans Service Office.
- 9th. The State does not authorize the payment of these expenses in the event a soldier pensioner is survived by a widow, nor if the pensioner left any estate of any kind of value sufficient to pay them, nor if the pensioner had been outside of the State of Georgia for more than twelve (12) months immediately preceding date of death.

permanently filed in the Veterans Service Office.
8th. The State does not authorize the payment of these expenses in the event a soldier pensioner is survived by a widow, nor if the pensioner left any estate of any kind or value sufficient to pay them, nor if the pensioner had been outside of the State of Georgia for more than twelve (12) months immediately preceding date of death.

MARRIAGE LICENSE
OF

J. C. Jarrell
AND

M. M. Hodree

Issued March 9, 1875 19

and recorded on page 286

Book "2" of Marriage Licenses.

W. M. Bennett
Ordinary.

COURT OF ORDINARY, COBB COUNTY
JAMES J. DANIELL, ORDINARY
MARIETTA, GA.

Georgia, Cobb County.

Know all men by these presents, that my interest in the attached bill for the funeral expenses of Mrs. J. C. Jarrell has been transferred to Mrs. Lula J. Duncan, who paid this bill.

Given under my hand and seal this 2 day of March, 1935.

Mayes Ward & Co.
Mayes Ward & Co.
By Mayes Ward

\$127.00

Marietta, Ga., March 2, 1935

RECEIVED of Jas. J. Daniell, Ordinary Cobb County, ONE HUNDRED AND TWENTY-SEVEN DOLLARS to apply on the funeral expenses of Mrs. J. C. Jarrell, Confederate widow pensioner.

Mrs. Lula J. Duncan
Mrs. Lula J. Duncan,
Marietta, Ga.

No. 852



State of Georgia

County of Cobb

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

You are hereby authorized to join

E. C. Merrell

and J. J. Hodges

*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 9th day of

March

1875

J. J. Bennett

*(L.S.)
Ordinary.*

STATE OF GEORGIA

CERTIFICATE

COUNTY OF COBB

*I Certify that E. C. Merrell and J. J. Hodges
were joined in Matrimony by me this 10th day of March
and solemnly five*

*eighteen hundred
and sixteen hundred*

Recorded

*19
Ordinary.*

*J. J. Cable, Minister of the
Gospel.*

LICENSE OBTAINED UNDER OATH BY

PARTY PERFORMING CEREMONY RETURN TO ORDINARY TO BE RECORDED.

I hereby certify the within to be a true copy of the death certificate of *Jade Marion Jarrell* as on file in my office.

I have no seal of office.
UNDERTAKERS...

NOTICE

J. E. Lester, M.D.
Comm. of Health, Cook Co.

The law requires the undertaker or person in charge of the funeral to file a Certificate of Death with the local registrar of the district in which the death occurred, and secure from him a burial or removal permit before any disposition is made of the corpse.

The undertaker or person acting as undertaker is required to obtain all information necessary to make a complete and accurate certificate of death. The "Personal and Statistical Particulars" may be furnished by any competent person acquainted with the facts, who must vouch for the correctness of the information by his or her *signature* in Item 14. The "Medical Certificate of Death" must be made out and signed by the physician last in attendance on the deceased. The facts relating to the disposition of the body (Item 19) must be entered by the undertaker or person acting as undertaker over his *signature*.

In case of any death occurring without medical attention, it is the duty of the undertaker to report the death to the local registrar immediately in order that the registrar may perform his legal duties under such circumstances.

PHYSICIANS...

Statement of cause of death—cause of death means the disease, injury, or complication which causes the death—not the mode of dying, e. g., heart failure, asphyxia, asthenia, etc. As principal cause state the disease or injury causing death. As related causes, name earlier morbid conditions, if any, related to the principal cause and any important complications of the principal cause. Under other contributory causes of importance, give other important diseases or injuries.

In case of deaths from violent causes always state whether the injury was due to *accident, suicide, or homicide*. Where death was due to accidental injury, specify whether injury occurred in the home, in a public place, or industry. Also give manner of injury and nature of injury.

In case of death in which the puerperal state is involved always state that fact, as: Acute nephritis (puerperal).

In case of death from operation, amputation, laparotomy, etc., always name the disease, abnormal condition, or form of external violence for which the operation was performed.

\$ ~~XXXXXX~~ 35.00

September 3, 1936

RECEIVED OF JAS. J. DANIELL, ORDINARY, COOK COUNTY

THIRTY-FIVE

~~XXXXXXXX~~ AND NO/100

DOLLARS

FUNERAL EXPENSES OF MRS. J. C. JARRELL

IN FULL SETTLEMENT OF

WITNESS:


PAYEE SIGN HERE

Jas. J. Daniell

Mayes Ward & Co.

THE ACCOMPANYING CHECK WILL NOT BE PAID UNLESS THIS RECEIPT IS FIRST PRESENTED AND REMAINS ATTACHED TO CHECK.

WRITE FAIRLY WITH UNFADING INK—THIS IS A PERMANENT RECORD. Every item of information should be fully and correctly supplied. Cause of death should be stated in plain terms, so that it may be properly classified. Record of occupation is very important. Was disease or injury caused by dangerous or insanitary conditions or occupation? Where was disease contracted if not at place of death?

|  CERTIFICATE OF DEATH GEORGIA DEPARTMENT OF PUBLIC HEALTH Bureau of Vital Statistics | | Registered No. <u>151</u> |
|---|---|--------------------------------------|
| 1. PLACE OF DEATH Country <u>Cot</u> <u>398</u> <u>Marietta</u> <u>State of Georgia</u> City or Town <u>Marietta</u> Length of residence in this city or town: Yrs. <u>Mo.</u> <u>Do.</u> <u>NON-RESIDENT (Yes or No)</u> Street and Number (No.) <u>(Street)</u> <u>(If death occurred in a hospital, give the name, number of street and number)</u> <u>Was</u> | | |
| 2. FULL NAME <u>Jane Marian Jarrell</u> Residence (City or Town) <u>Marietta</u> (Street and Number) <u>(None)</u> <u>Ga.</u> | | |
| PERSONAL AND STATISTICAL PARTICULARS | | |
| 3. SEX <u>Female</u> | 4. COLOR or RACE <u>White</u> | 5. MARRIAGE <u>Widowed</u> |
| 6. DATE OF BIRTH (month, day, year) <u>July 13</u> 7. AGE <u>80</u> <u>Years</u> <u>Months</u> <u>Days</u> <u>If less than one day</u> <u>Hours</u> <u>Minutes</u> | | |
| 8. OCCUPATION (a) Trade, profession or particular kind of work done, as <u>housekeeper</u> (b) Industry or business in which work was done, as cotton mill, sawmill, bank, etc. (c) Date deceased last worked at this occupation (month and year) <u>11-14-35</u> (d) Total years spent in this occupation <u>33</u> | | |
| 9. BIRTHPLACE <u>S.C.</u> (P. O. Address) <u>S.C.</u> | | |
| 10. NAME <u>A. J. Hedges</u> 11. BIRTHPLACE <u>S.C.</u> (P. O. Address) <u>S.C.</u> | | |
| 12. MAIDEN NAME <u>Julia Tron</u> 13. BIRTHPLACE <u>S.C.</u> (P. O. Address) <u>S.C.</u> | | |
| 14. INFORMANT (Signed) <u>Mrs. G. A. Duncan</u> (Address) <u>Marietta, Ga.</u> | | |
| 15. BURIAL PLACE <u>City Cem.</u> (Cemetery) <u>City Cem.</u> (Date) <u>11-14-35</u> | | |
| 16. UNDERTAKER (Signed) <u>Mary Ward & Co.</u> (Address) <u>Marietta, Ga.</u> | | |
| MEDICAL CERTIFICATE OF DEATH 16. DATE OF DEATH <u>Nov. 13, 1935</u> <u>4:15 P.M.</u> (Month, Day, Year) (Hour) 17. I HEREBY CERTIFY That I attended the deceased from <u>Oct. 20, 1902</u> to <u>Nov. 9, 1935</u> I last saw <u>her</u> alive on <u>Nov. 9, 1935</u> Death is said to have occurred on the date and hour stated above. The principal cause of death and related causes of importance in the order of least and greatest of death, <u>Myocarditis</u> Other contributory causes of importance: _____ What test confirmed diagnosis, <u>Clinical</u> (Specify whether autopsy, opinion, laboratory, or clinical) If death was due to external causes (violence) fill in also the following: Was injury an accident, suicide, or homicide? Where did injury occur (Specify day or town, if outside of State, the county, and also the State) Did injury occur in a home, public place or industry? Manner of injury _____ Nature of injury _____ (Signed) <u>W. H. Perkinson</u> M.D. (Address) <u>Marietta, Ga.</u> | | |
| 18. FILED <u>Nov. 14, 1935</u> (Signed) <u>J. E. Carter, M.D.</u> | | |

\$ ~~30.00~~ 35.00

September 3, 1936

RECEIVED OF JAS. J. DANIELL, ORDINARY, COSS COUNTY

THIRTY-FIVE ~~DOLLARS~~ AND NO/100 _____ DOLLARS

IN FULL SETTLEMENT OF FUNERAL EXPENSES OF MRS. J. O. JARRELL

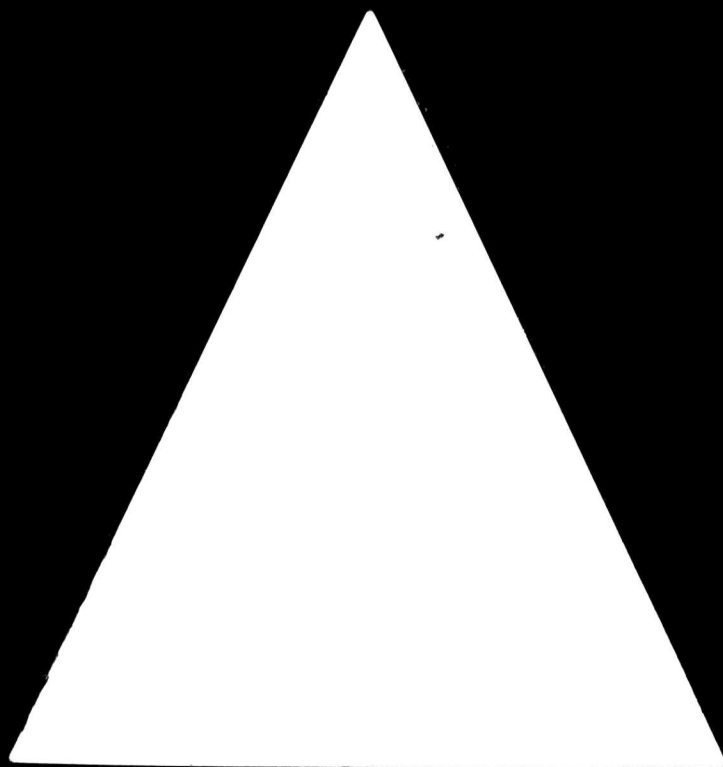
WITNESS:

PAYEE SIGN HERE

Jas. J. Daniell

Mary Ward & Co.

THE ACCOMPANYING CHECK WILL NOT BE PAID UNLESS THIS RECEIPT IS PRESENTED WITH THE CHECK AND REMAINS ATTACHED TO CHECK.



Jenkins, Mary J.
Cobb County

No. *1000000*

Widow's Pension

✓ UNDER ACT 1910.

County

Cobb

Name

Mary J. Jenkins

Widow of

James A. Jenkins

J. W. LINDSEY,
Commissioner of Pensions.

Chas. P. Byrd, State Printer

10/10/10

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

STATE OF GEORGIA.

Mary Jenkins County.

Personally before me comes *Mary Jenkins* of said State and County, and after being duly sworn, on oath says that she desires to apply for a pension allowed under the Act of 1910, and submit testimony to make out the same, true answers makes to the following questions to wit:

1. What is your name, and where do you reside? *Mary Jenkins, Andale, La.*
2. How long and since when have you been a continuing resident in the State of Georgia? *All my life*
3. When, where and to whom were you married? *Dec. 8, 1865 to James A. Jenkins*
4. When, where and in what Company and Regiment did your husband enlist as a soldier in the Confederate Army or Georgia Militia? (State the arms and class of Service. *1865 to 1865. 1st Georgia Cavalry*)
5. When and where did the Command of your husband surrender or discharge from the army? *Albany, Ga. April 1865*
6. Was your husband personally present at the time of the surrender or discharge of this Command? *Yes*
7. If he was not present state clearly where he was?
8. Where was his Command when he left?
 - a. For what cause did he leave his command?
 - b. By whose authority did he leave his Command?
 - c. For how long was he granted leave of absence?
 - e. What was his physical condition when he left his Command?
 - f. What effort did he make to return to his command?
 - g. In what way was he prevented from going back to Command?
 - h. Was he captured by the enemy at any time? *No*
 - i. If so, when and where captured and where held as a prisoner, and when and for what cause released?
- j. When and where did your husband die? Were you residing together when he died? If not, how long had you resided apart? *Oct. 20, 1872. Meriwether Co. Yes.*
9. What property of any description did you own, hold or control for your use and its cash value, Nov. 4, 1908. (State same by items.) *None*
10. What property of any kind have you sold or given away since Nov. 4, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.) *None*
11. What property of any description of any value have you now? *None*
12. What are your annual earnings or income and their value? *None*
13. Have you heretofore been paid a pension by the State? *No*
If so, when and for what cause were you struck from the Roll?

Seen to and subscribed before me this the

20th day of *Aug*, 1910

Mary Jenkins County.

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

STATE OF GEORGIA.

Meriwether County.

Personally before me comes *J. D. Stogier* who after being duly sworn true answers to make, to the following questions, answers as follows:

Widow's Pension

UNDER ACT 1910.

County

Andale

Name

Mary Jenkins

Widow

James A. Jenkins

J. W. LINDSEY,
Commissioner of Pensions

THE P. BIRD STATE PRINT

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

County.

That I, J. M. O'Neal, Ordinary of said County do certify that Mary J. Jenkins the applicant for pension. She is the person she represents herself to be and she is a bonafide continuing resident citizen of said County and was in the 4th Nov., 1908.

That I also know A. H. Pittman the witness who swears to the service of husband, and A. H. Pittman 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 Return County that she has been sworn for Tax is for 1908 for property for the year 1908

Sworn under my hand and official seal of office this 8th day of August 1912

SEAL

(SEAL.)

- NOTES 1. Before any questions are answered the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. 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.

State of Georgia Meriwether County.
I, M. J. O'Neal of said County do hereby
Certify that the within marriage
Certificate is a true copy of the
marriage Certificate of Jamess Jenkins
to Mary J. Jenkins as found on record
in this Office M. J. O'Neal, Ordinary of
Meriwether County
This Aug. 8th 1910.

MARRIAGE LICENSE

OF

AND

Issued

and Recorded on Page

of Marriage License.

Ordinary

1. What is your name and where do you reside? J. D. Strogien
2. How long and since, when have you known Mary J. Jenkins applicant?
3. How long and since when has she continuously resided in this State? (Give date.) I do not know
4. When and to whom was she married? How do you know? I do not know
5. How long and since when did you know Jamess Jenkins her husband? About 12 months past of 1864 & 1865
6. When, where, and in what Company and Regiment did Jamess Jenkins enlist? 5th Regt. Meriwether Militia Co. C. First
7. Were you a member of the same Company? Yes
8. How long within your personal knowledge did he perform actual military service with his Company and Regiment? One year or more
9. When, and where did his Command surrender, and was discharged? At Albany Georgia in Apr. 1865
10. Were you personally present when it was surrendered? Yes If not where were you _____ and how came you there? _____

11. Was the husband of applicant personally present at surrender? Yes If not where was he? _____ when, where and for what cause did he leave Command? (Give date.) _____ By whose authority did he leave his Command? _____ and how long was he granted leave? _____ How do you know all this? _____ Do you state if of your own personal knowledge? (State all you know fully, and how you know it.)
12. For what cause, if you know of your own knowledge was he prevented from returning to his Command? _____
13. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? _____ Swore to and subscribed before me this the 5th day of Aug. 1910. J. D. Strogien Ordinary of Meriwether County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Personally before me comes A. H. Pittman who on oath says that they are freeholders of said County and that they know Mary J. Jenkins 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 and know that she
Notes and accounts due has no property of any kind
Total _____

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 (B)

We also know what property she has now in her possession, use and control to wit:

Acres of land... worth \$ _____

Horses and Mules \$ _____

Cows and Hogs \$ _____

Other property \$ _____

income and earnings \$ _____

Total Value of all property and effects \$ _____

Sworn and subscribed before me this the 8th day of Aug. 1910. A. H. Pittman Ordinary of Meriwether County.

were you _____ and how came you there? _____ If not where
 10. Were you personally present at surrender? yes If not
 where was he? _____ when, where and for what
 cause did he leave Command? (Give date.) _____ By whose
 authority did he leave his Command? _____ and how
 long was he granted leave? _____ How do you know all this?
 Do you state if of your own personal knowledge? (State all you know fully, and how you know it.)
 12. For what cause, if you know of your own knowledge was he prevented from returning to his
 Command?
 13. What effort did he make to return to his Command and how do you know this? Of you
 own knowledge or how?
 Sworn to and subscribed before me this the 5th day of Aug., 1910. J. D. Strogier
mg. Ordeal Ordinary.
 of meriwether County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Personally before me comes A. H. Pittman who on oath says that they
 are freeholders of said County and that they know Mrs. Mary J. Jenkins
 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.

Notes and accounts due.

Total.

Schedule (B)

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

Personal property.

Money, Notes and accounts.

Schedule (C).

We also know what property she has now in her possession, use and control to wit:

Acres of land worth.

Horses and Mules.

Cows and Hogs.

Other property.

Income and earnings.

Total Value of all property and effects.

Sworn and subscribed before me this the 5th day of Aug., 1910.

J. M. Strogier
mg. Ordeal Ordinary.
 of meriwether County.

191 7 SEAL. J. M. Strogier Ordinary.
 County.

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

State of Georgia Meriwether County.
 I mg. Ordeal of said County do hereby
 Certify that the within marriage
 Certificate is a true copy of the
 marriage Certificate of Jamess Jenkins
 to Mary J. Jenkins as found on record
 in this Office mg. Ordeal Ordinary of
meriwether County
 Given under my
 hand and official Signature
This Aug. 9th 1910.

MARRIAGE LICENSE

OF

AND

ISSUED

Book

and Recorded on Page

of Marriage License.

Ordinary.

| | |
|---|----|
| Acres of land worth | \$ |
| Horses and Mules | \$ |
| Cows and Hogs | \$ |
| Other property | \$ |
| income and earnings | \$ |
| Total Value of all property and effects | \$ |

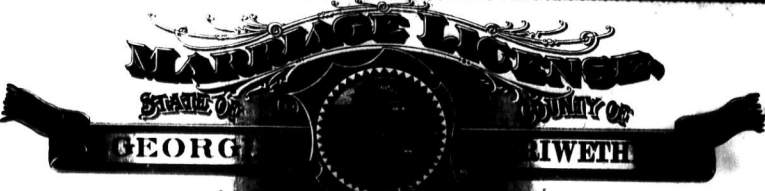
Sworn and subscribed before me this the 24 day of August 1970 by A.S. Pittman
J. M. Smith Ordinary.
of Chatham County.

MARRIAGE

Issued

and Recorded on Page

of Marriage



MARRIAGE LICENSE
STATE OF GEORGIA
MERIWETHER COUNTY

To any JUDGE, JUSTICE OF THE PEACE OR MINISTER OF THE GOSPEL.

You are hereby authorized to join
and
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 _____ day of _____
19____

(L.S.)
Ordinary

STATE OF GEORGIA

CERTIFICATE

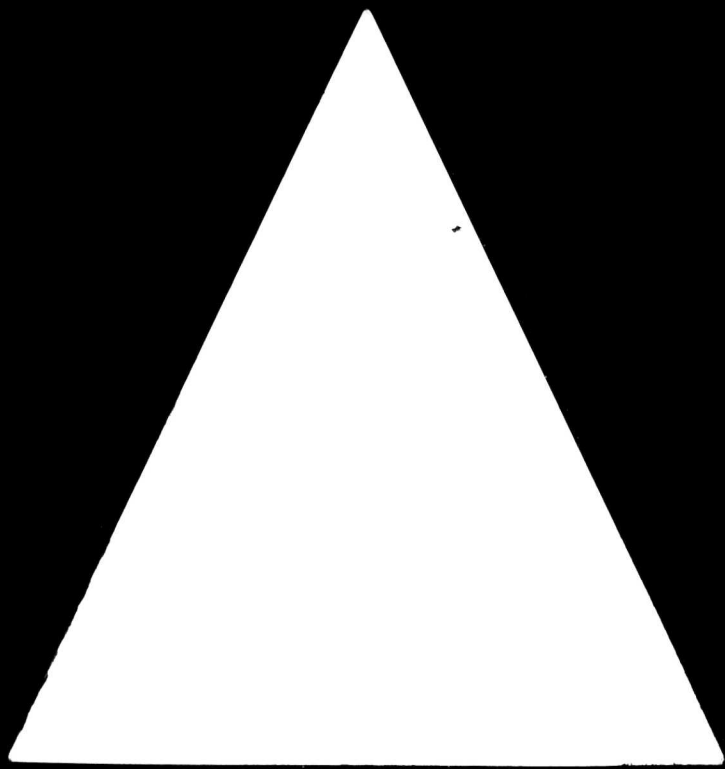
MERIWETHER COUNTY

I certify that James A. Jenkins and Mary J. Jenkins
were joined in Matrimony by me this 8th day of December
1865

Recorded _____

C. F. Humphries, J.P.

Ordinary



POWER OF ATTORNEY.

STATE OF GEORGIA.

West COUNTY.

Alfred Jennings hereby authorize

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

by me at his office

Witness my hand and seal, this 27 day of October 1906.

Executed in the presence of John W. Lindsey [L. S.]

Alfred Jennings

Jennings, Alfred
Colth County
127
1-15

— Code Section 1854.
(FOR THOSE ALREADY ENROLLED.)

No. 749

INDIGENT SOLDIER'S PENSION 1906.

Name Alfred Jennings
County West
of Colth Regiment Ga.
Kala

WARRANT ISSUED

1906.

JOHN W. LINDSEY.

Commissioner of Pensions.

WARRANT HANDED TO Alfred

The Franklin Printing and Publishing Co., Inc., W. H. Harrison, Man.

See
Book
no date

POWER OF ATTORNEY.

STATE OF GEORGIA.

I, Geoffrey Jennings hereby authorize
John Lindsey of
 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 29 day of January, 1906.

Executed in the presence of

J. M. G. Allen

Geoffrey Jennings [i. s.]

*Jennings, also
 127*

— CASE SECTION 1351.
 (FOR THOSE ALREADY ENROLLED.)

No. 749

**INDIGENT
 SOLDIER'S PENSION
 1906.**

Name Geoffrey Jennings
 County Rock
1st Regiment 4th
Co.

WARRANT ISSUED
11 2 1906.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO
Geoffrey

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Cobb County.

Personally appears Alfred Jennings of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____, 18____; that he is _____ years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of _____ in Company _____ of _____ Regiment of _____; that his physical condition is as follows: age & poverty

that his property consists of the following items:

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

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

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

Ordinary.

State of Georgia,

Cobb County.

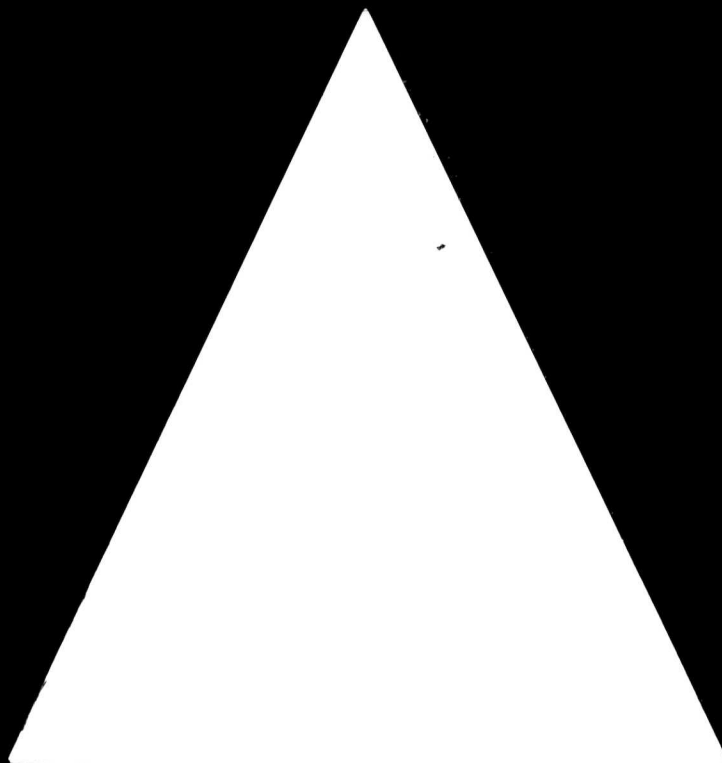
I, John H. Hester Ordinary of said County, do certify that I am well acquainted with Alfred Jennings the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he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

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

Ordinary Cobb County.



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



Prisoner of War
 1863-1865
 1st Cavalry Battalion
 Company 1st
 Army did not
 surrender at
 Vicksburg but
 immediately on
 but also at
 Vicksburg on
 4th of Jan
 1863 and
 account as
 reported by
 J. W. Landry
 Sec of War

John D. Landry
 Capt. Co. 1st
 1863-1865

Confederate
 Soldier's Application

UNDER ACT 1910

Country *Texas*
 Name *B. W. Johnson*
 Company *B*
 Regiment *Cavalry Battalion*
 Approved *Noted*

J. W. LANDRY
 Commissioner of Pensions

CHAS. J. BERRY, State Printer, ALBANY

ENTERED POSTER OFFICE
 ENTERED POSTER OFFICE



Questions for Applicants to Answer

Attest: _____

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

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

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

4. When and where, and in what Company and Regiment, did you enlist? (Give the arm and class of Service) Feb 1863 1st Mass Artillery Co 1st Mass Artillery

5. How long did you remain in the United States Military Service with said Company and Regiment?
(Give date of discharge) until December 1945

1865 August 19

8. If you were not actually present, state specifically and clearly what you were doing at the time.

5. Where was your Command when you took it?

K. M. L. ...

c. For what cause 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?.....

1. Were you captured during the war? No

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

and wife, and its cash value on the 1. Nov. 1908: (Make list by items and value.)
1. Wagon \$100 Wagon 25 House field land \$50

He did not own that land, but it was given to

10. What property of any kind have you or your wife disposed of and for what purpose since 1 Nov. 1908. To whom and for what price:

Land for \$800 for which I now have note for

11. What property of any description of any kind and of any value owned by you or your family at the time of the execution of the foregoing instrument?

possession and control of yourself and wife and its cash value? (Make itemized list)
 1 Nov \$800 1 Nov \$100 None held by me

100

12. What annual or monthly income or earnings of yourself and wife and the entire derived have you? None only my own labor

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

not allowed.

27-00000 } P. M. Johnson

[Handwritten signature]

4-11-68 *WPA* *Consolidated*

100

Confederate

Soldier's Application:

UNDER ACT 1910.

County San Diego

Name Dr. H. K. J.

Company Mc

Regiment 27th

Approved _____

J. W. LINDSEY,

Commissioner of Pen

CHAR. F. BYRD, State Printer, Atlanta.

9-23/2

ENTREPRENEUR OFFICE

EXTENDED POSTER SESSION

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA.

Cherokee County.

S. C. McGeary of said County is hereby presented as a witness in support of the application of B. H. Abbott for Pension provided by the Act of 1910, in said State, and after being sworn to the answers to make in the questions propounded, answers as follows:

1. What is your name and where do you reside? S. C. McGeary
Residence, Cherokee County, Ga.
 How long and since when have you known B. H. Abbott the applicant?
Since 1862

3. Where does he now reside, and since when has he been a bona fide continuing resident in this State and how do you know? Before he was in that home since the 1st of Nov.

4. When, where and in what Company and Regiment did B. H. Abbott enlist during war from 1861 to 1865? (Give date and place) 1862, Millington, Ga. Co. 6, 1st Regt. Bat.

5. How did you obtain your information of this Service? I was present, a member of same Company.

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

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

8. Were you personally present at the Surrender? yes

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

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

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

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? yes

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

Sworn to and subscribed before me, this the 24 day of Sept, 1912, S. C. McGeary Ordinary of Cherokee County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Cherokee County.

Personally before me comes B. H. Abbott B. H. Abbott who on oath says that they are free holders residing in said County and we know the applicant for pension and we know the property that is now in the use, possession and control of himself and wife and of the cash value to wit: Make List by name and value.

1/2 acre owned by wife \$150
House hold effects \$100

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

1908 (State if not by name)

- When and to whom was it sold or given away?
- 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 the property made in good faith and full value?

Sworn to and subscribed before me, this the 10th day of Sept, 1912, B. H. Abbott Ordinary of Cherokee County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Cherokee County.

I, B. H. Abbott Ordinary of said County, certify that I know the applicant B. H. Abbott for Pension is the person he represents himself to be and resides in said County. Yes I also know B. H. Abbott the witness according to the service and B. H. Abbott who are free holders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Returns of yes shows that yes and wife value for tax in 1908 \$ yes for 1909 \$ yes for 1910 \$ yes Sworn under my hand and official seal of office this 10th day of Sept, 1912. B. H. Abbott Ordinary of Cherokee County.

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

Georgia Cherokee County
 I certify that S. C. McGeary is a resident of this County, and was sworn by me before he answered of the foregoing questions, and that he is truthful and trustworthy and his statements are entitled to full faith and credit.
Sept 21st 1912
H. J. Webb Ordinary
Cherokee Co. Ga.

and wife and of the cash value to wit: Make List by item and value
1 note owned by wife \$100
House held by wife \$100

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

Johns, B.W.
Cobb County

No.

1919

Application for Pension Due Deceased Soldier

UNDER ACT 1891

To be paid his Widow or Dependent Children

BY

Mrs. Elizabeth Johns
Widow of B. W. Johns
Cobb County

Co. Regt. Vol.

Approved and paid

191...

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

Rec'd Jan. 12, 1919.

STATE OF GEORGIA.

County

I, Ordinary of said county, do certify
that I personally know the applicant, and that she
is the lawful widow of and was on
the Pension Roll of said
a Pension from county for 12 and at the time
of his death on the day of 191... there was due to
him and unpaid his Pension of Dollars from the State
of Georgia, and I know the within
witness and he is of a truthful and trustworthy character and entitled to full credit.
Given under my hand and seal this day of 191...

..... Ordinary,
..... County.

GEORGIA.

County

I hereby authorize and constitute

lawful attorney to collect and receipt for me in my name the Pension due me for 191... through my de-
ceased husband, who was on
Pension Roll and paid from for 19...

Witness my hand this day of 19...

Attested before me:

Application for Pension Due Deceased Soldier

To Be Paid to His Widow or Dependent Children

UNDER ACT APPROVED OCTOBER 9, 1891

STATE OF GEORGIA, Cobb County

Personally before me comes Mrs. Elizabeth Johnson, of said county, after being duly sworn, on oath says that she is the widow of B. M. Johnson who was duly enrolled as a Private Pensioner from the county of Cobb and was paid a Pension of \$80.00

Dollars from Cobb county for 1918, and that the said B. M. Johnson died in Cobb county on the 12 day of January, 1919, and at the time of his death a Pension of \$90.00 was due him from Cobb county and unpaid for 1918.

Applicant further avows that she married the said B. M. Johnson on the 28 day of July, 1917, in Cherokee county and State of Ga, and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 9 day of May, 1919
J. M. Garner Ordinary
Cobb County. Elizabeth Johnson (L. S.)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Cobb County

Personally before me comes B. H. Smith, who on oath says that he knew B. M. Johnson while in life and that he knows Mrs. Elizabeth Johnson the above applicant; that he knows that the said B. M. Johnson and Elizabeth Bruce were in due form of law married in the county of Cherokee in the State of Ga on the 28 day of July, 1917, and that they resided together as husband and wife from date of marriage to the day of his death on the 12 day of January, 1919, and I now know that she is his dependent widow.

Sworn to and subscribed before me this 7 day of May, 1919.
J. M. Garner Ordinary.
Cobb County. B. H. Smith

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

Georgia, Cherokee County.

Office of Ordinary of said County.

I, J. M. Satterfield, Ordinary & ex-officio Clerk Court Ordinary, Herby certify that the within and foregoing is a true and correct copy of the marriage record of B. M. Jones and Elizabeth Bruce, as the same appears of record and file in this office.

Ordinary, ex-officio Clerk Court Ordinary
Cherokee county, Ga.

W. H. Satterfield Ordinary
LC of Marriage Licenses
and Recorded on Page 355 Book
Issued July 26 1919
Elizabeth Bruce
AND
Henry W. Jones
MARRIAGE LICENSE

B. H. Johns died in Cobb County for 1919, and that the said
 the 12 day of January, 1919, and at the time of his death a Pension of \$90.00
 was due him from Cobb County and unpaid for 1918.
 Applicant further swears that she married the said B. H. Johns on
 the 25 day of July, 1917, in Cherokee County and
 State of Ga, and resided with him from the date of marriage to his death as his
 lawful wife, and is now his dependent widow, and she asks the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 9 day of May, 1919
J. M. Gurn Ordinary Elizabeth Johns (L. S.)
Cobb County.

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Cobb County

Personally before me comes R. H. Smith who
 on oath says that he knew B. H. Johns while in life
 and that he knows Mrs. Elizabeth Johns
 the above applicant; that he knows that the said B. H. Johns
 and Elizabeth Johns were in due form of law married in the county
 of Cherokee in the State of Ga on
 the 25 day of July, 1917, and that they resided together
 as husband and wife from date of marriage to the day of his death on the 12 day of
January, 1919, and I now know that she is his dependent widow.

Sworn to and subscribed before me this 7 day of May, 1919
J. M. Gurn Ordinary R. H. Smith
Cobb County.

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

Hereby certify that the within and foregoing is a true and
 correct copy of the marriage record of B. H. Johns and Elizabeth
 Bruce, as the same appears of record and file in this office.

Ordinary Clerk Court Ordinary
 Cherokee County,
W. R. H. Smith
 of Marriage Licenses
 Issued July 26 1917
 and Recorded on Page 355 Book
 AND
Henry A. Jones
Elizabeth Bruce
 MARRIAGE LICENSE

January 1914, and I now know that she is his dependent widow.
Sworn to and subscribed before me this 7 day of May, 1914.
J. M. Green Ordinary. R. H. Smith
Cash County.

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



You are hereby authorized to join
Berry W Jones and Elizabeth Bruce
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 herein of the fact and date of the marriage.
Given under my hand and seal this 26th day of
July 1967 WRB Moss Ordinary (L.S.)

STATE OF GEORGIA CERTIFICATE CHEROKEE COUNTY
I Certify that Berry W Jones and Elizabeth Bruce
were joined in Matrimony by me this 25th day of July 1967
1867
Recorded Feb 28th 1868 WRB Moss Ordinary
R. F. Phillips M. G.

W. D. BULLARD, Chairman
Powder Springs, Ga.
R. D. DRILE, Vice Chairman and Chair-
man of Finance Committee
Marietta, Ga.
R. N. HUMPHREOUS, Chairman Alms
House Committee
Marietta, Ga.
N. M. MORRIS, Supt. Convicts and
Roads—Phone 312
Marietta, Ga.

OFFICE OF

COMMISSIONERS

ROADS AND REVENUES OF
COBB COUNTY

C. F. MORGAN, Chairman Roads and
Bridges
Kennesaw, Ga.
Dr. L. G. GARRHRTT, Chairman Public
Buildings
Austell, Ga.
H. L. DARFIELD, County Treasurer
Marietta, Ga.
J. R. MILLER, Clerk of Board
Marietta, Ga.

BOARD MEETS 10 O'CLOCK FIRST TUESDAY IN EACH MONTH

MARIETTA, GA., March 17th, 1919.

Hon. W. J. Webb, Ordinary,
Cherokee County,
Canton, Ga.

Dear Sir:-

Will you please forward to J.H. Johns, Marietta, Ga.,
a certificate of the marriage of B. W. Johns to Bettie Bruce,
which marriage occurred shortly after the Civil War closed.

Thanking you in advance for this favor, I am,

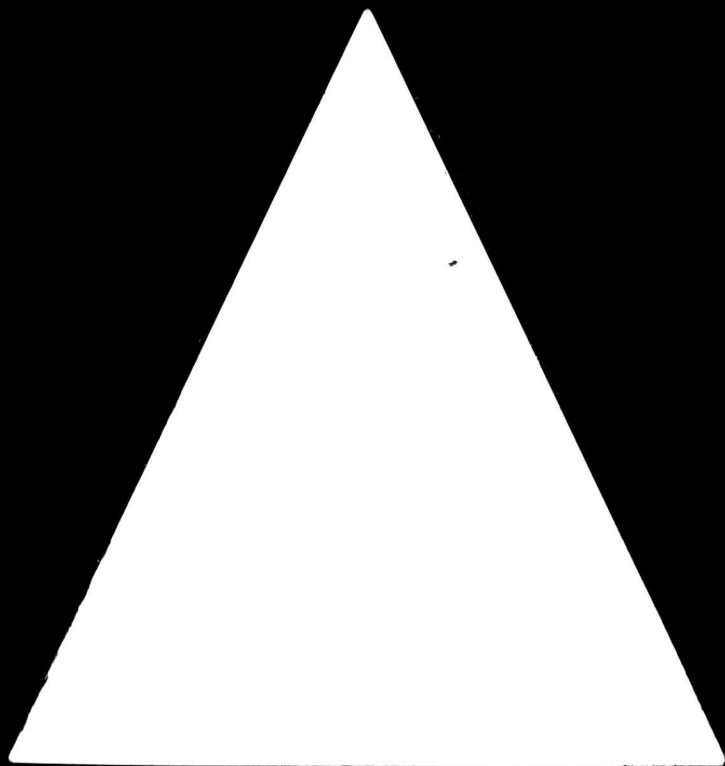
Very truly yours

J. H. Johns

Dear Mr. Johns:

The within is the only record we can find, corres-
ponding with the names you mention. There must be a mistake in
the name somewhere.

Very truly yours,



ORDINARY'S CERTIFICATE

STATE OF GEORGIA

COUNTY

I, *J. H. Clarys*

Ordinary of said County, do certify that I

know *Elizabeth Johns* 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 *27* day of *July* 19*19*

That I also know *E. C. Harris* 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.

(SEAL)

Sworn under my hand and official seal of office this *30* day of *Oct* 19*19*

J. H. Clarys

County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following manner: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence

of witnesses given to you, and that you will not be false in your answers or statements."

2. All affidavits must be made before the Ordinary of the county of residence.

3. Affidavits must be made before the Ordinary of the county of residence.

4. Affidavits must be made before the Ordinary of the county of residence.

5. Affidavits must be made before the Ordinary of the county of residence.

6. Affidavits must be made before the Ordinary of the county of residence.

7. Affidavits must be made before the Ordinary of the county of residence.

8. Affidavits must be made before the Ordinary of the county of residence.

9. Affidavits must be made before the Ordinary of the county of residence.

10. Affidavits must be made before the Ordinary of the county of residence.

11. Affidavits must be made before the Ordinary of the county of residence.

12. Affidavits must be made before the Ordinary of the county of residence.

13. Affidavits must be made before the Ordinary of the county of residence.

14. Affidavits must be made before the Ordinary of the county of residence.

15. Affidavits must be made before the Ordinary of the county of residence.

16. Affidavits must be made before the Ordinary of the county of residence.

17. Affidavits must be made before the Ordinary of the county of residence.

18. Affidavits must be made before the Ordinary of the county of residence.

19. Affidavits must be made before the Ordinary of the county of residence.

20. Affidavits must be made before the Ordinary of the county of residence.

21. Affidavits must be made before the Ordinary of the county of residence.

22. Affidavits must be made before the Ordinary of the county of residence.

23. Affidavits must be made before the Ordinary of the county of residence.

24. Affidavits must be made before the Ordinary of the county of residence.

25. Affidavits must be made before the Ordinary of the county of residence.

26. Affidavits must be made before the Ordinary of the county of residence.

27. Affidavits must be made before the Ordinary of the county of residence.

28. Affidavits must be made before the Ordinary of the county of residence.

Widow's Application To Be Put on Roll in Her Own Right When Husband Was on the Indigent Roll or Put on Under Act of July 11, 1910— As Amended by Act of 1919.

County *Cobb*
Name *Elizabeth Johns*
Widow of *R. H. Johns* 1919
Company *Q*
Regiment *Spurs Battalion*
Approved

W. H. Little
1936
J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-30-1919

ORDINARY'S CERTIFICATE

STATE OF GEORGIA

COUNTY

I, J. M. Garris Ordinary of said County, do certify that I know Mrs. Elizabeth Johns 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 27 day of May 1919

That I also know E. C. Barnes 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 30 day of Oct 1919

(SEAL)

Ordinary.

County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. No help you (ed)."
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 1913.

County

Name

Widow of

Company

Regiment

Approved

J. W. LINDSEY,

Commissioner of Pensions.

Bird Printing Co., State Printers, Atlanta.

10-30-1919

WIDOW'S AFFIDAVIT

STATE OF GEORGIA

Cobb

COUNTY.

Personally before me comes *Elizabeth Johns* of said County.

who, after being duly sworn, says that she is the widow of *B. H. Johns* to whom, in the County of *Cherokee* State of *Ga* she was married on the *24* day of *July* 18*67*, and that she remained his wife, and resided with him to the date of his death in *February* 19*19*, and that she has not since his death remarried. At the time of his death he was a resident of *Cobb* County, in said State of Georgia, and he was on the *Service* Pension Roll of the State and paid a pension of *\$22.00* in *Cobb* County for 19*19* per annum, on account of being a soldier in Company *#1* Regiment *2nd Ga Cavalry Battalion* (Volunteers or State Militia)

That she is now a bona fide resident citizen of said County of *Cobb* and she has so continuously resided since day of *June* 19*01*

Sworn to and subscribed before me, this the

27 day of *August* 19*19*

Ordinary

of *Cobb* County.

(SEAL)

Elizabeth Johns

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

STATE OF GEORGIA,

Cobb

COUNTY.

Personally before me comes *E. C. Barnes* 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. *Elizabeth Johns* who made the foregoing affidavit, is the lawful widow of *B. H. Johns* who died in *Cobb* County in said State of *Ga* on day of *February* 19*19*, and that she has not since remarried. That she became the wife of *Mr. Johns* on the day of *July* 18*67*, and that she and he had resided together as man and wife continuously since day of *July* 18*67*, and that the *for past two years to my knowledge* was the same man who was on the pension roll of said State from *Cobb* County *Ga* when he died.

Sworn to and subscribed before me, this the

6 day of *Sept* 19*19*

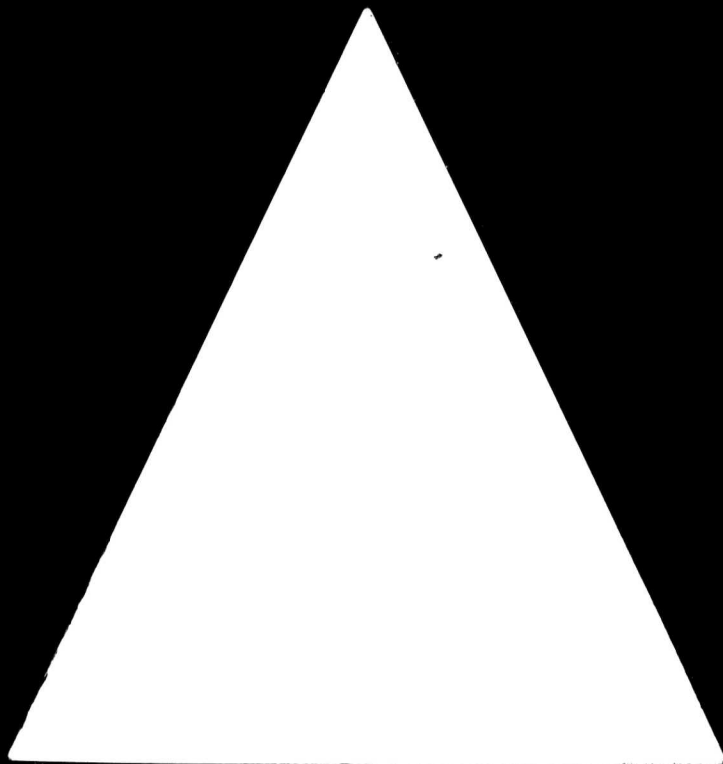
Ordinary

of *Cobb* County.

(SEAL)

E. C. Barnes

Ordinary
County.
(SEAL)



Johns
On file

0

No.

**Confederate
Soldier's Application.**

✓ UNDER ACT 1910.

Country

Colo

Name

R. J. Johns

Company

4

Regiment

Volunteer Regiment
Infantry

Approved

J. W. LINDSEY

Commissioner of Pensions

CHAS. F. BYRD, State Printer, Atlanta

ENTERED ROSTER OCT 10 1912

Questions for Applicants to Answer

County

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

How long and since when have you been a continuous resident citizen of this State?

8. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? No

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) *June 1862 Monterey, Cal. Co. E 1st Cal. Inf. 75*

5. How long did you remain in the actual Military Service with said Company and Regiment?
(Give date of discharge). *Until April 26 1865. 3 years*

6. When and where was your Company and Regiment surrendered or discharged from the Service?
April 26 / 1865, Greenbriar, Va.

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

1. If you were not actually present, state specifically and clearly where you were. *Madison, Wis. and Pennsylvania*

Q Where was your Command when you left it?
 March 11, 61

b. When did you leave the Command? March 1965
c. For what cause did you leave? I was in a bad luck situation

d. By whose authority did you leave? *By order of Admiral Christenbury*

e. For how long was your leave granted? In what way? *Until I was ordered back*

1. Why did you ~~not~~ return to your Command after leave expired? *You had family*

g. In what way were you prevented? _____

1. Were you captured during the war? no

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

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

100 Acres of land Value \$10000.00 2 1/2 % 30
1 Year 40.00 30

10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov.

1908. To whom and for what price?.....

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

| | | | | |
|---|--------------------|--------|--------|-------|
| 1 | Cost of land value | 100.00 | 2 days | 20.00 |
| 1 | Cost of land value | 40.00 | 4 days | 20.00 |

12. What annual or monthly income or earnings of yourself and wife and the source thereof have

13. Are you drawing a pension of any amount from the State or the U.S. Government? *None except what I am on my way*

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was

Return to send author's proof

17 Delphix 1910 R. S. Feltus

Ordinary _____
of _____
Comptroller _____

850- 921- 1021-

Soldier's Application

UNDER ACT 1910.

County

Name _____

Compos

7

1000

J. W. LINDSEY

Commissioner of Pensions

CHAS. F. BYRD, State Printer, Atlanta

ENTERED POSTING 9/27-77

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Cash County.

Personally before me, come William J. J. Jones who on oath says that they are freeholders residing in said County and we know R. S. Jones 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.)

65 acres of land. Value \$1000. 1 house valued 1000. 2 horses valued \$1000.
Unimproved 4000. Unimproved 2000.

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov 1908? (State it fully by items.) None

2. When and to whom was it sold or given to? None

3. What was the price paid or stated to be paid? None

4. What relation is the party to applicant? None

5. What disposition was made of the proceeds of the sale? None

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

or was it made to obtain a pension? Yes

Sworn to and subscribed before me, this the

9 day of March 1912 at 19 o'clock of Ordinary J. J. Jones of Cash County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Cash County.

I, J. J. Jones Ordinary of said County, certify that I know

the applicant R. S. Jones for Pension is the person he represents himself to be and resides in

said County. That I also know R. S. Jones the witness swearing to the

service and J. J. Jones 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 None shows that None and wife

value for tax is in 1908 None for 1909 None for 1910 None

Sworn under my hand and official seal of office this 26 day of March 1912

J. J. Jones Ordinary,

of Cash County.

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

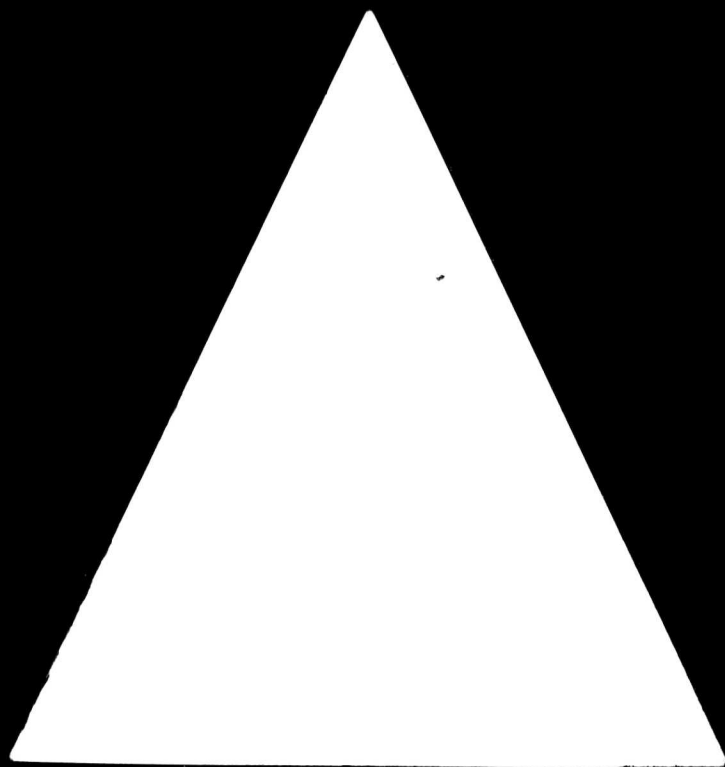
State of Ga
Chatham County }

Personally appeared before
me Francis J. McGehee, who being duly
sworn deposes and says, that he was 2^d
Lieut. in Co. G, 1st Volunteer Regiment of Ga,
in which Co. Robt. Johns served during
the War between the North and South; that
the said Johns was a good and faithful
soldier; that the questions answered by
him in his application for pension are
correct as far as he knows, that those
answers by the witness, J. J. Hunt,
are correct, that he was in command of
the Company at the surrender, on the
26th of April, 1865 and that the said Johns
was sick in the hospital at that time.

Francis J. McGehee
2^d Lieut. Co. G, 1st Vol. Regt. of Ga.

Sworn to before me this 13th of Decr, 1910.

Thos. G. G. G.
Ordinary Chatham Co. Ga.



POWER OF ATTORNEY.

Form No. 3.

STATE OF GEORGIA.

County, }

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 190 _____ [L.S.]

Executed in the presence of _____

Johnson, A. E.
Cobb County
Oct. 11, 1906

Code Section 1350.

No. _____

INVALID SOLDIER'S PENSION, 1906

Name *A. E. Johnson*
County *Cobb*
Co. *E. Cobb Regt. Cav. Regt.*
Disability _____
Amount, \$ _____

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.

6/29/05

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA,

County.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____
day of _____ 190 _____

[L. S.]

Executed in the presence of _____

INVALID

SOLDIER'S PENSION,

1906

Name A. E. Johnson
County Cobb
Co. E Cobb Reg Cav Regt
Disability _____
Amount, \$ 5.00

190 _____

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

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

Type W. Lindsey, State Printer, Atlanta.

6/29/07

FOR USE OF APPLICANTS WHO HAVE NOT HERETOFORE DRAWN.

Form No. 1.

STATE OF GEORGIA,

Cobb County.

PERSONALLY appears A. E. Johnson of said Cobb
County, State of Georgia, who being duly sworn, says on oath that he was born on the _____ day of
July 1880, that he is a born, free citizen and resident of Georgia, and has been
continuously since the _____ day of Oct 1888, that he enlisted
in the military service of the Confederate States (or the State of Cobb Regt) on the
_____ day of May 1864, during the war between the States, and
served in Company E of Cobb Regt 12th Regiment of _____ Volunteers
Youngs Brigade, and was honorably discharged on the _____ day of
April 1865; that whilst engaged in such military service, and in line of duty in
the State of South Carolina, on the _____ day of December 1864
he was disabled or wounded as follows: Horse fell down with me
and injured my privates thereby render-
ing me unable to perform any manual
labor whereby I can make a support
for myself. After my injuries I was
carried out to a private house and was
kept there about six weeks. I then went
to Raleigh North Carolina where I staid
two weeks. I then went back to my Com-
mand and staid with them untill we
surrendered. The disabilities have existed
ever since the injury was received and are perma-
nent and lasting.

Where was command surrendered? Gunneshborough North Carolina.
Was applicant present? I was present If not, where
was he? _____ How come there? _____
And by whose authority? State fully: _____

Deponent desires to participate in the benefits of Section 1260 of the Code, and the Acts amendatory thereof,
and makes application for the pension to which he is entitled for the year thereunder, ending October 28th, 190 _____

Sworn to and subscribed before me, this the
16th day of May 1905 } A. E. Johnson
John Lindsey Ordinary. Post Office _____

NOTE.—State fully nature of wound or character of disease which causes the disability, and explain particularly
the extent of the disability. If claim is based on disease, give full and connected history of disease, tracing its directly
to the service.

NOTE.—Do not trouble to mention wounds which do not disable.

NOTE.—The Ordinary will see that all blank spaces are filled when the affidavits are signed.

The Instructions as Set Out in the Notes must be Observed.

AFFIDAVIT FOR THREE WITNESSES.

Form No. 2.

STATE OF GEORGIA,

Cobb County.

PERSONALLY appears before me, the undersigned Ordinary in and for said County, W. A. Amstead and J. M. Owens personally known to me to be trustworthy citizens, each of whom, being duly sworn according to law, severally say under oath, that they are personally and well acquainted with A. E. Johnson whose application is herewith presented for a pension, that he has resided in this State continuously since the day of October 1864, that he served in Company C of the

Cobb Legion Regiment of Youngs Brigade, and from our personal knowledge he, while in line of duty, was injured by the service as follows: (give full statement, and tell in your own language when, where, and how the injury happened, or the disease was contracted, and to what extent applicant is disabled from work as a direct result thereof. If he does any labor or gain do any, state what.)

Now how felt with him and severely injured him about his private. He was so badly hurt that he did not get back to us for about six or eight weeks and was crippled up very badly when he returned. He was hurt some time about December 1864. We have known applicant ever since he received his injury and he has been unable to perform manual labor ever since he was hurt, sufficient to support himself.

Where was applicant's command surrendered? at Greensborough N. C.

Was he with it? he was Were all of you present? we were

If not, where was he?

Where were you all? Greensborough N. C.

How do you know the facts you state to be true? we were present with him in the same command and this of our own knowledge

We personally know above stated facts. We were with him in the army and have known him ever since.

He was honorably discharged or retired from the service on 26 day of April 1864.

Applicant is permanently disabled as stated and has been so ever since certain knowledge ever since 1864. We have no interest in the recovery of a pension by him.

Sworn to and subscribed before me, this 16th day of May 1895,
John Amstead Ordinary,
J. M. Owens Witness,
W. A. Amstead Witness.

Notes 1.—The Ordinary will see that the full text of the affidavits is understood by the witnesses, and that they are legally qualified to the same.

2.—Witnesses are asked to make their statements full and explicit, tracing disability to its true cause.

3.—All blank spaces must be filled when signed.

4.—Three witnesses are required.

PHYSICIANS' AFFIDAVIT.

Form No. 2.

STATE OF GEORGIA,

Cobb County.

PERSONALLY comes before me John Amstead Ordinary of said County, W. M. Kaul and J. E. Johnson, both known to me as reputable physicians of said County, who, being severally sworn, say on oath, that they have carefully examined A. E. Johnson and after such personal examination, say that the present condition of applicant is as follows: He finds applicant suffering from a continued wound of the Penis and Penis and Left Testicle. Left Testicle is enlarged and inflamed. Also has produced various of Penis and Scrotum. Above named injuries are permanent. Applicant has also chronic Discharge and is practically unable to perform the usual avocations of life.

and that such condition is permanent. Said condition arises from the following facts:

We have treated applicant professionally for _____ years, and his condition, as above stated, does not arise from hereditary or congenital causes, or from vicious or intemperate habits.

Sworn to and subscribed before me, this 16th day of May 1895,
John Amstead Ordinary,
W. M. Kaul Witness,
J. E. Johnson Witness.

Notes 1.—State fully the physical condition and especially the extent of disability. If disability results from wound or injury, state its location, character and present condition. If from disease, give its nature and character, and its causes or origin, as understood by physicians.

Notes 2.—The physicians will be careful to fill every blank space in oath.

STATE OF GEORGIA.

Cobb County.

John Amstead Ordinary of said County,

do certify that I am well acquainted with A. E. Johnson 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 and has been a bona fide resident since the 18th day of January 1894.

I also certify that the witnesses, to-wit: S. S. Raden and J. M. Owens are persons of respectability, that their statements are worthy of full credit and belief, and that the full text of the affidavit was read to and understood by them before they signed the same.

Given under my official signature and seal, this 27th day of June 1895,
John Amstead Ordinary,

Cobb County.

All amending proofs must be executed with the same formality as original proofs, and the Ordinary must so certify.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 6
 day of May 1906.

A. E. Johnson [L. S.]
 Executed in the presence of
W. E. [unclear]

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 17
 day of May 1907.

A. E. Johnson [L. S.]
 Executed in presence of _____

Civil Service 1260.
 (FOR THOSE ALREADY ENROLLED.)

No. 275

DISABLED
 SOLDIER'S PENSION
 1906.

Name A. E. Johnson
 County Cobb
 Co. E. 1st Regt.

Disability _____
 Amount, \$ 57.00
 1906.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO

See Pensions and Pensions Act, Ch. 11, Section 100.

no date

Johnson, A. E.,
Cobb Co.,

Civil Service 1260.
 (FOR THOSE ALREADY ENROLLED.)

No. 227

DISABLED
 SOLDIER'S PENSION
 1907.

Name A. E. Johnson
 County Cobb
 Co. E. 1st Regt.
 Disability discharge
 Amount, \$ 57.00
 1907.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO

See Pensions and Pensions Act, Ch. 11, Section 100.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Cobb County.

Personally appears A. E. Johnson of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of 18; that he enlisted in the military service of the Confederate States, (or of the State of Georgia) during the war between the States, and served as a Private in Company E, of 10th Regiment of Volunteers's Brigade; that whilst engaged in such military service in the State of Georgia, on the 10 day of 186, he was wounded, injured or diseased as follows:

Wounded in Battle, Bone Fracture

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1906. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of \$5.00 Dollars, for the year 1906.

Sworn to and subscribed before me, this the

10 day of January, 1907.

Post-Office

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

State of Georgia,

Cobb County.

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

Given under my official signature and seal, this

day of January, 1907.

Ordinary Cobb County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Cobb County.

Personally appears A. E. Johnson of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of 18; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company E, of 10th Regiment of Volunteers's Brigade; that whilst engaged in such military service in the State of Georgia, on the 10 day of 186, he was wounded, injured or diseased as follows:

Disability

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1907. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of \$5.00 Dollars, for the year 1906.

Sworn to and subscribed before me, this the

17 day of January, 1907.

Postoffice

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

State of Georgia,

Cobb County.

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

Given under my official signature and seal this

day of January, 1907.

Ordinary Cobb County.

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

JOHNSON, A.E.

COBB COUNTY, 1928
1928

Application for Pension Due Deceased Soldier

(UNDER ACT 1891)

(To be paid his Widow or Dependent Children)

BY

Mrs. Fannie Johnson
Widow of A. E. Johnson
of Cobb County

Old or new 12
Date of Death October 12, 1928

Approved and ordered paid

December 26 1928

J. W. LINDSEY
Commissioner of Pensions.

Ordinary: Fill out above in full and send this blank to Pension Office for approval before making any payment. If you wish to receive it with your pay-rolls for permanent filing in the Pension Office.

GEORGIA, Cobb County

I hereby authorize and constitute C. A. Donahoe, of said County, my lawful attorney to collect, and receipt for me by my name, for the Pension due me for 1928 through my deceased husband, A. E. Johnson, who was on Cobb Pension Roll and paid from Cobb County for 1928

Witness my hand this 19 day of December, 1928

Attested before me:
J. S. Jones

Mrs. Fannie Johnson
work

STATE OF GEORGIA,

Cobb County

I, J. M. Gamm, Ordinary of said County, do certify that I personally know Mrs. Fannie Johnson, the applicant, and that she is the lawful widow of A. E. Johnson, and was on the Cobb Pension Roll of said Cobb County, and was paid a Pension from Cobb County for 1928, and at the time of his death on the 12 day of October, 1928, there was due to him and unpaid his Pension of 7.50 Dollars from the State of Georgia, and I know B. M. Donahoe, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 22 day of December, 1928
(Seal)
J. M. Gamm Ordinary
Cobb County.

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Cobb County.

I, J. M. Gamm, Ordinary of said County, do certify that I personally know Mrs. Fannie Johnson, the applicant, and that she is the lawful widow of A. E. Johnson, who was on the Pension Roll of said Cobb County, and was paid a Pension from Cobb County for 1928, and at the time of his death on the 12 day of October, 1928, there was due to him and unpaid his Pension of 7.50 Dollars from the State of Georgia, and I know C. A. Donahoe, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 18 day of December, 1929
(Seal of Ordinary)

J. M. Gamm Ordinary
Cobb County

Johnson, A. E.
Disappeared
Widow of
4th Jan 1928
Cobb County

1929

Application for Pension Due Deceased Soldier

(UNDER ACT 1891)

(To be paid to his Widow)

BY

Mrs. Fannie Johnson
Widow of A. E. Johnson
Date of Marriage July 15, 1926
Date of Death October 12, 1928

Approved and ordered paid,

1929
JOHN W. CLARK,
Commissioner of Pensions.

Ordinary: Fill out above in full and send this blank to Pension Department for approval before making any payment. If you wish to receive it with your pay-rolls for permanent filing in the Pension Department.

Application for Pension Due Deceased Soldier

(To Be Paid to His Widow or Dependent Children)

UNDER ACT APPROVED OCTOBER 9, 1891.

STATE OF GEORGIA, Cobb County

Personally before me comes Mrs. Fannie S. Johnson, of said County, who after being duly sworn, on oath says that she is the widow of A. E. Johnson who was duly enrolled as a Soldier Pensioner from the County of Cobb and was paid a Pension of One Hundred Fifty Dollars from Cobb County for 1928, and that the said A. E. Johnson died in Cobb County on the 12 day of October, 1928, and at the time of his death a Pension of \$50.00 was due him from Cobb County and unpaid for 1922. Applicant further swears that she married the said A. E. Johnson on the 16 day of May, 1896, in Cobb County and State of Georgia, and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 24 day of December, 1928
J. M. Dunn Ordinary
Cobb County Fannie S. Johnson (L. S.)
 (SEAL)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Cobb County

Personally before me comes A. M. Donahoe, who on oath says that he knew A. E. Johnson while in life and that he knows Mrs. Fannie S. Johnson, the above applicant; and knows that the said A. E. Johnson and Fannie S. Johnson were in due form of law married in the County of Cobb in the State of Georgia on the 16 day of May, 1896, and that they were residing together as husband and wife at the time of his death on the 12 day of October, 1928, and I know that she is his dependent widow.

Sworn to and subscribed before me this 24 day of December, 1928
J. M. Dunn Ordinary A. M. Donahoe
Cobb County
 (SEAL)

- INSTRUCTIONS:
- 1st. This form can be used by guardian, or minor children, where there is no widow.
 - 2nd. The Ordinary must in every case send certificate of marriage attached hereto, if marriage is not proven by witness only for framing. Such a certificate is entirely too bulky for use in any sort of pension paper.
 - 3rd. Avoid the use of the enormously large form of marriage certificate in common vogue throughout this State, suitable only for framing. This form is for the use of the widow of disabled soldiers who died after October 26th, and for widows and dependent children of Service soldiers who died after November 1st.
 - 4th. The Ordinary should examine the blank carefully and see that it is fully and correctly completed, and the seals affixed, and that the back, when folded, is filed out.
 - 5th. Pay out no money on this application until it is approved in the Pension Office, and returned to you as your authority to make the payment.
 - 6th. Return this application with your final settlement to the Pension Office.
 - 7th. The widow gets pay-roll for the pension of her husband, signing her name opposite his name thereon.
 - 8th. The pension for only one year can be covered by one voucher. Each separate and distinct transaction and must be so treated. If widow of a "new" pensioner, who was due 1920 and 1921 pensions, she must make two yellow applications—one for each year. Attach a separate marriage license to each yellow blank.

Application for Pension Due Deceased Soldier

(To Be Paid to His Widow)

(UNDER ACT APPROVED OCTOBER 9, 1891)

STATE OF GEORGIA, Cobb County.

Personally before me, the Ordinary of said County, comes Mrs. Fannie Ruth Johnson of said County, who after being duly sworn, on oath says that she is the widow of A. E. Johnson and that said Pensioner was on the Pension Roll of Cobb County and was paid a Pension of Fifty (\$50.00) Dollars from said County for 4 Quarter, 1928, and that the said Pensioner died in Cobb County on the 12 day of October, 1928. Applicant further swears that she married the said A. E. Johnson on the 16 day of May, 1896, in Cobb County and State of Georgia, and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks that the 1 Qr. Pension, 1929 due and unpaid be paid to her.

Sworn to and subscribed before me this 18 day of February, 1929
J. M. Dunn Ordinary Fannie Ruth Johnson (L. S.)
Cobb County
 (Seal of Ordinary)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Cobb County.

Personally before me comes A. A. Donahoe, who on oath says that he knew A. E. Johnson while in life and that he knows Mrs. Fannie Ruth Johnson, the above applicant; and knows that the said A. E. Johnson and Fannie Ruth Johnson were in due form of law married in the County of Cobb in the State of Georgia on the 16 day of May, 1896, and that they were residing together as husband and wife at the time of his death on the 12 day of October, 1928, and that she is his dependent widow.

Sworn to and subscribed before me this 18 day of February, 1929
J. M. Dunn Ordinary A. A. Donahoe
Cobb County
 (Seal of Ordinary)

INSTRUCTIONS.

- 1st. Proof of marriage must be made.
- 2nd. Do not use the commonly large form of marriage certificate in common vogue throughout the State, suitable only for framing. Such a certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage license is the proper thing.
- 3rd. The Ordinary should examine the blank after it is filed in, and see that everything is fully and correctly completed, and the seals affixed, and that the back of application, when folded, is filed in.
- 4th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the payment.
- 5th. Return this application with your final settlement to the Pension Department.
- 6th. The widow or person holding the proper power-of-attorney receipts for this pension by signing name, as widow, opposite the name of deceased on the notice pay roll.
- 7th. The one pension is covered by this application. The another application, on the white blank, to adult widow to roll in her own right.

name.
 3rd. Avoid the use of the enormously large form of marriage certificate in common vogue throughout this State, suitable only for framing. Such a certificate is entirely too bulky for use in any sort of pension paper.
 4th. This form is for widows of disabled soldiers who died after October 31st, and for widows and dependent children of Service soldiers who died after November 1st.
 5th. The Ordinary should examine the blank carefully and see that it is fully and correctly completed, and the seals affixed, and that the back, when folded, is filled out.
 6th. Pay out no money on this application until it is approved in the Pension Office, and returned to you as your authority to make the payment.
 7th. Return this application with your final settlement to the Pension Office.
 8th. The widow signs pay-roll for the pension of her husband, signing her name opposite his name thereon.
 9th. The pension for only one year can be covered by one voucher. Each year's pension is a separate and distinct transaction and must be so treated. If widow of a "new" pensioner, who was due 1920 and 1921 pensions, she must make two yellow applications—one for each year. Attach a separate marriage license to each yellow blank.

10th. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the seals affixed, and that back of application, when folded, is filled in.
 11th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the payment.
 12th. Return this application with your final settlement to the Pension Department.
 13th. The widow or person claiming her proper power-of-attorney receipts for this pension by signing name, as widow, opposite the name of husband on the soldier pay roll.
 14th. Only the one pension is covered by this application. Make another application, on the white blank, to admit widow to rolls in her own right.

STATE OF GEORGIA

Marriage Certificate

0053 COUNTY

This Certifies that A. W. Johnson
 and Mrs. Fannie Strickland
WERE UNITED IN THE HOLY BONDS OF MATRIMONY
 By J. L. Lengley, Minister,
 On the 26 day of December in the year of our Lord 1921 16.
 as appears of record in my office in Marriage Record, book G
 page 274 This 24 day of December 1921.
J. M. Gann
 Ordinary

State of Georgia Cobb County
Personally appears before me the undersigned
Ordinary in and for said county S P Padon
personally known to me to be true & worthy citizen
being duly sworn according to law says that
he are personally and well acquainted with
A E Johnson whose application is herewith
presented for a pension that he has resided
in this state continuously since the year
1845 that he served in company E Cobb's
Ledgers from the first of May 1864 to the
surrender in April 1865 and from my
personal knowledge he while in line of
duty was injured by the enemy as follows
in the state of (S.C.) in the month of December
1864 his horse fell down with him and
injured his privates and from said injury he
was unable for duty for nearly three months
affiant says that he was a member of said
company E Cobb's Ledgers and was with the
command at the time of surrender and was
surrendered at Milltown N.C. and that
A E Johnson was honorably discharged from
the service on the day of April 1865
Applicant is permanently disabled as stated
and has been so to my certain knowledge
ever since 1865
affiant says that he has no interest in the

received of a pension by him
I D^{his} Paden
mark
from to and subscribed
before me this August 27th, 1903.

John A. Paden,
Ordinary
Cobb County, Georgia.

John A. Johnson
Widow's Application
 Cobb County, Ga.
 1937

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

County Cobb
 Name Mrs. Fannie S. Johnson
 Widow of Mr. A. E. Johnson
 Date of Marriage Dec. 26, 1915
 Date of Husband's Death Oct. 11, 1930
 Company 6
 Regiment Cobb's Legion
 Approved DEC 27 1937
W. H. Harrison
 Director

John A. Johnson
By Car
John A. Johnson
July 10 1937

State Dept. Public Welfare,
 Atlanta, Sept. 25, 1937.

A. E. Johnson enlisted as a private in Co. E, Cobb's Legion Co. Cavalry Sept. 24, 1864. He was absent on horse detail since Dec. 20, 1864. Has no horse."

Wm. C. Cobb
Director Confederate Records Div.

Ordinary's Certificate

STATE OF GEORGIA.

Cobb COUNTY.

I, Wm. C. Cobb, Ordinary of said County, do certify that I know Mrs. A. E. Johnson 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 Rev. J. T. Langley

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. C. Cobb
 Cobb County.

INSTRUCTIONS

1. Before any application is received, the Ordinary should examine the application and the name in the following order:—The do not submit name; that you will find answers made in each of the whole parts. No help you do.
2. If the name is not correct, the application should be rejected.
3. Only widows who married prior to January 1st, 1920, are entitled to pension.
4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified to the Ordinary of the County in which the husband or wife resided at the time of death.
5. Affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified to the Ordinary of the County in which the husband or wife resided at the time of death.
6. Do not use the fully sworn Marriage Certificate in place of the State. A short sample form is never to be used.
7. Do not take an application from any widow who is already receiving a pension.

State Dept. Public Welfare,
Atlanta, Sept. 25, 1937.

A. E. Johnson enlisted as a
private in Co. F, Cobb's Legion
of the South, Sept. 2, 1864.
He was discharged on Jan. 1, 1865.
He has been in the service of the
Legion for 27 years. He has
been absent on leave several times
from Feb. 30, 1864. Has no home.

More full name of pensioner

William Johnson
Director Confederate Records Div.

Widow's Application

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

County Cobb
Name Mrs. Annie E. Johnson
Widow of Dr. A. E. Johnson
Date of Marriage Dec. 26, 1915
Date of Husband's Death Oct. 11, 1930
Company 6
Regiment 6th Reg. Cavalry
Approved DEC 27 1937
W. J. Johnson Director.

Ordinary's Certificate

STATE OF GEORGIA.

Cobb COUNTY.

I, Ans. J. Daniell, Ordinary of said County, do certify
that I know Mrs. A. E. Johnson 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 Rev. J. T. Langley
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) Ans. J. Daniell Ordinary.

INSTRUCTIONS:

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

APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,

Cobb COUNTY.

Personally appears before me Mrs. Annie E. Johnson 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. Annie E. Johnson, Marietta Post. O. Cobb Co.
2. How long and since when have you been, continuously, a bona fide resident citizen of the State
of Georgia? All my life Jan. 11th 1875 Age? 86
3. (1) When, (2) where and (3) to whom were you married? Dec. 26th 1915
(a) Marietta Ga. (b) Dr. A. E. Johnson (c) Andy E. Johnson
- a. Have you married since the death of first and soldier's husband? No
- b. When and where did your first husband die? Oct. 11th 1930
- 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, husband
- g. If so, when and for what cause were you or your husband placed on the roll? As husband of
on Conf. soldier pension roll of Cobb Co. Ga.

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

27 day of July, 1937.
Ans. J. Daniell Ordinary
of Cobb County.
(SEAL OF ORDINARY)

Mrs. A. E. Johnson
her
Applicant.

An Affidavit

(Read carefully before making this affidavit.)

State of Georgia.

County of _____

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

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

Sworn to and subscribed before me, this the _____

day of _____, 193 _____

Ordinary,

County.

Questions for Witness as to Marriage and Service of Husband.

STATE OF GEORGIA,

Cobb COUNTY.

Rev. J. T. Langley of said State and County is hereby presented as a witness in support of the application of *Mrs. C. E. Johnson* 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)
Rev. J. T. Langley, Marietta, Ga.
2. How long and since when have you known *Mrs. C. E. Johnson* applicant
50 years or so since she was a young woman
3. Where does she now reside, and since when has she been, continuously, a bona fide, resident citizen of this State? *Marietta, Ga. since she moved to this State all her life*
4. When and to whom was she married? *May 1910 to C. E. Johnson* How do you know? *Inform me personally*
5. How long and since when did you know *Mr. C. E. Johnson* her husband?
from 1910
6. When and where did *Mr. C. E. Johnson* the husband of applicant, die? *Oct. 11, 1930 - Marietta, Ga.*
7. Were the applicant and her husband living together as husband and wife at the date of his death?
yes
8. If not, how long did they live apart before his death?
no

Were they divorced? *no*

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

9. When, where and in what Company and regiment did _____ enlist? (Give date and place).
10. How did you obtain your information of this service?
11. How long within your personal knowledge did he perform actual military service with this Company and Regiment? (Give dates.)
12. When and where was his Command surrendered or discharged? (Give date and place.)
13. Were you personally present with this Command when it was surrendered?
If not, where were you _____ and how came you there?
14. Was the husband of applicant personally present with his Command at its surrender?
If not where was he? _____ and how came him there?
When, where and for what cause did he leave his Command? (Give date.)
By whose authority did he leave his Command?
and how long was he granted leave?
How do you know all that you have stated to be true? (If of your own knowledge, state clearly and specifically).

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

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

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

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

Sworn to and subscribed before me, this the _____

day of *July*, 193 *7*

Ordinary

of *Cobb* County.

(SEAL OF ORDINARY)

Rev. J. T. Langley
Witness

COUNT OF ORDINARY, COBB COUNTY
JAS. J. DANIELL, ORDINARY
MARIETTA, GA.

Georgia, Cobb County.

This is to certify that Dr. A. E. Johnson
and Mrs. Fannie Strickland were married on the 26th
day of December, 1915 as found on Marriage Record
Book G, page 274, Cobb County Records of Marriages.

Given under my hand and seal of office, this
July 24, 1937.

Jas. J. Daniell
Ordinary

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLANTA

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

WHEREAS:

MRS. FANNIE S. JOHNSON, WIDOW OF DR. A. E. JOHNSON,

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 ser-
vice 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, there-
fore,

ORDERED:

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

This, the 27th day of December 19 37.

A. Thor Billm
Director, Confederate Division
State Department of Public
Welfare

STATE OF GEORGIA

Marriage Certificate

CORB

COUNTY

This Certifies that **ALFRED E. JOHNSON**

and **MISS FRANCIS RUTH LAZENBY**

WERE UNITED IN THE HOLY BONDS OF MATRIMONY

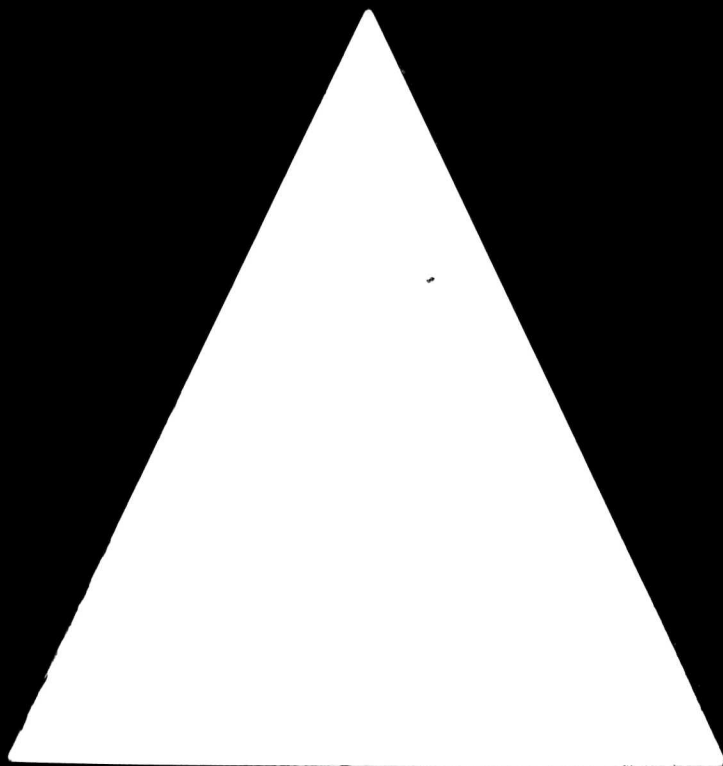
By **J. H. BIVENS, MINISTER,**

On the **16**, day of **May**, in the year of our Lord 192**6**.

As appears of record in my office in Marriage Record, book **H**

page **623**. This **18**, day of **February**, 192**9**.

J. M. Gamm
Ordinary



Johnson, George W.
Colt Co.

OK 1/21/71

**Confederate
Soldier's Application.**

✓ UNDER ACT 1910.

County Colt Co.

Name George W. Johnson

Company Co.

Regiment 4th Reg. of Recruits

Approved _____

J. W. LINDSEY
Commissioner of Revenue

CHAS. F. REED, State Printer, Albany.

1/21/71

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

County.

George W. Johnson 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 to make the answers to make the questions propounded, answers as follows, to wit:

1. What is your name and where do you reside? (Give County and Post-office.) *George W. Johnson, Cobb County, Georgia*

2. How long and since when have you been a continuous resident citizen of this State? *Continuously since 1846*

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 place of Service.) *In Georgia August 1863, Company B, 46th Regiment, Georgia Infantry*

5. How long did you remain in the active Military Service with said Company and Regiment? (Give date of discharge.) *Six months, March 1864*

6. When and where was your Company and Regiment surrendered or discharged from the Service? *In Atlanta, Ga. February 1864*

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 sent to a command which was in the line of march and when sent to fight for which I enlisted I was sent to fight for which I enlisted I was sent to fight for which I enlisted*

a. Where was your Command when you left it? *When did you leave the Command?*

b. For what cause did you leave? *For what cause did you leave?*

c. By whose authority did you leave? *By whose authority did you leave?*

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

f. Why did you not return to your Command after leave expired? *For how long was your leave granted? In what way?*

g. In what way were you prevented? *For how long was your leave granted? In what way?*

h. What effort did you make to return? *For how long was your leave granted? In what way?*

i. Were you captured during the war? *For how long was your leave granted? In what way?*

j. If so, when, and where? In what prison were you held and when were you released? *For how long was your leave granted? In what way?*

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. 1906? (Make list by items and value.) *One town lot and home in the town of Decatur, Ga. worth one hundred and fifty dollars. (1860's)*

10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov., 1906. 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.) *The above stated property only*

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

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

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

Sworn to and subscribed before me, this the *14th* day of *February*, 1914, at *Decatur* County.

John W. Lindsey Ordinary

John W. Lindsey Ordinary

John W. Lindsey Ordinary

John W. Lindsey Ordinary

Soldier's Application.

UNDER ACT 1910.

Confederate

at Jan 1911

Johnson George W.

County *Cobb*

Name *George W. Johnson*

Company *E*

Regiment *46th Georgia*

Approved

J. W. LINDSEY,

Commissioner of Pensions

CHAS. F. STEIN, STATE PRINTER, ATLANTA

11/3/11

QUESTIONS FOR WITNESS AS TO SERVICE

STATE OF GEORGIA.

Cobb County.

I, J. N. Johnson, of said State and County is hereby presented as a witness in support of the application of J. N. Johnson for the pension provided by the Act of 1910, in said State, and after being sworn, give answers to make to the questions propounded, answers as follows:

1. What is your name and where do you reside? J. N. Johnson, Augusta, Ga.
2. How long and since when have you known J. N. Johnson, the applicant? For more than sixty (60) years
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? Augusta, Ga. Since 1910. I moved to Georgia with him in 1864 and have lived in Augusta ever since.
4. When, where and in what Company and Regiment did J. N. Johnson enlist during war from 1861 to 1865? (Give date and place) Company C, 4th Ga. Infantry, August 1862.
5. How did you obtain your information of this Service? By living with him.
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) From Aug. 1862 to Feb. 1864.
7. When and where was his Command surrendered or discharged (give date and place) In Atlanta, Ga. February 1864.
8. Were you personally present at the Surrender? Yes.
9. If not, where were you and how came you there?
10. Was the applicant personally present with his Command at surrender? Yes.
11. If not where was he and how came him there?

12. When did he leave his Command? Feb. 1864. Where was his Command when he left it? Atlanta, Ga. for what cause did he leave?

By whose authority did he leave his own 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 know him for many years and was with him and saw him when he was captured.

13. In what way was he prevented from returning to his Command? He was captured and held in prison.

How do you know? By living with him.

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

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

In what prison was he held? Atlanta, Ga. and when released?

Sworn to and subscribed before me, this the 23rd day of Sept. 1912.

J. N. Johnson Ordinary

Cobb County.

STATE OF GEORGIA.

Cobb County.

I, L. B. Rainey and J. H. Galline, of said County, do hereby certify that we are freeholders residing in said County, and we know the applicant for pension, and we know the property that is now in the name, possession and control of himself and wife and of its cash value to wit: (State List by items and values)

One house at 1111 North Ave. West, Macon.

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov 1908? (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? None.

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

6. Was the disposition of this property made in good faith and full value or was it made to obtain a pension?

Sworn to and subscribed before me, this the 23rd day of Sept. 1912.

J. H. Galline Ordinary

L. B. Rainey Ordinary

Cobb County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Cobb County.

I, J. N. Johnson, Ordinary of said County, certify that I know the applicant J. N. Johnson for Pension is the person he represents himself to be and resides in said County. That I also know J. N. Johnson who are freeholders, that they are all residents of said County and were duly sworn to 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 Receipt of 1912 shows that for 1908 \$700.00 and with value for the year 1908 \$700.00 for 1909 \$700.00 for 1910 \$700.00

Sworn upon a solemn and official oath of office this 23rd day of Sept. 1912.

J. N. Johnson Ordinary

Cobb County.

NOTES: The Ordinary must be sworn to by the applicant and the applicant must be sworn to by the Ordinary before the Ordinary can certify that he knows the applicant and that he is a freeholder.

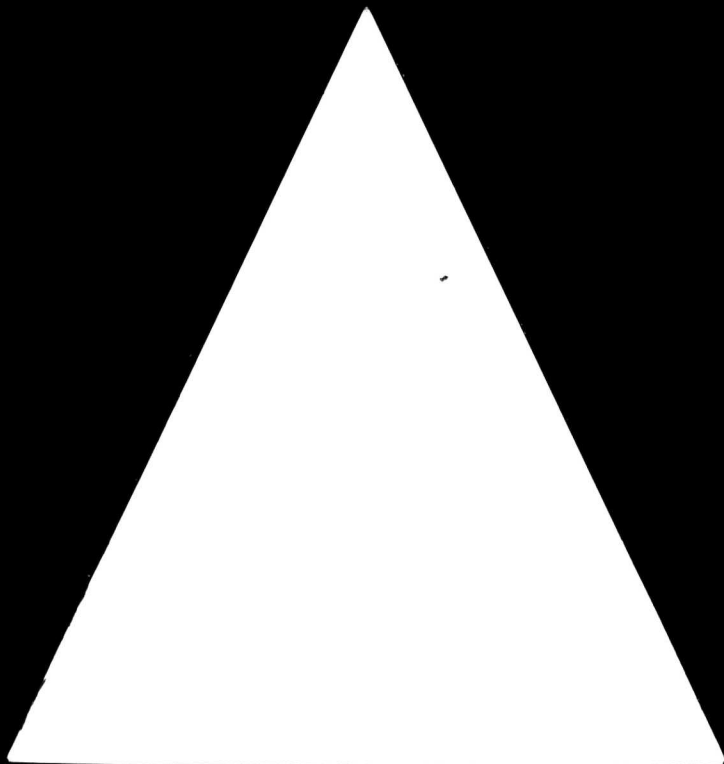
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The Ordinary must also be sworn to by the applicant and the applicant must be sworn to by the Ordinary before the Ordinary can certify that he knows the applicant and that he is a freeholder.



POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb
Know all Men by these Presents, That I, *H. M. Johnson*
County, in said State, do hereby appoint
of *Cobb County Ga.*
me and in my name to receive and accept 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.

H. M. Johnson
Cobb County Ga.
my true and lawful attorney in fact, for
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 *April* 1891, at *Cobb County Ga.*

Executed in the presence of us:

J. B. Mabry
John H. O'Neal

DIRECTIONS.

If allowed, send amount by

me at

and oblige.

to



Johnson H. M.
Cobb County
1891
No. 2225

Widows' Pension

PAID TO

Mrs. H. M. Johnson
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,

H. M. Johnson
Cobb County Ga
W. A. Burrows

County, in said State, do hereby appoint
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
14th day of *April* 1891

H. M. Johnson [S.]

Executed in the presence of us:

J. B. Watson
J. H. Stone Clerks

DIRECTIONS.

If allowed, send amount by

to

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. *H. M. Johnson*, who being sworn according to law, says under
oath that she is the widow of *William Johnson*, who was a soldier in
the service of the Confederate States, and served as a member of Company *H*
of the *1st* Regiment of *Georgia* Volunteers; that he enlisted in said
service on or about the *1st* day of *November* 1862, and was in the
Western Army up to *February* 1862. That while in the
Army, he was on the *1st* day of *1862*, (See Note No. 1)

That during the retreat of the *Western*
Army of Confederate States from
Chattanooga he *remained*
Bremen *Prison*, and *died*
with the same at *Heidelberg*
in *February* 1862 and was buried
to his home in *Garden County Ga*
and *Burned*, at *Franklin Church*
I was present and saw him buried

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 *1st*
day of *October* 1855, and that she has resided in Georgia continuously since the
1st day of *February* 1862; that Georgia is her home, and was such
on the 23d day of December, 1890, and since said date she has not lived in any other State or locality.
Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of
the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February
15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this, the
14th day of *April* 1891:
J. H. Stone
Ordinary.

H. M. Johnson
W. A. Burrows

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

Widow's Pension

PAID TO—

H. M. Johnson

Cobb

COUNTY.

\$100.00.

Warrant Issued

AND HANDED TO

1891

Johnson H. M.
Cobb County
1891
W. A. Burrows

Affidavit for Three Witnesses.

Form No. 2.

STATE OF GEORGIA,

County of Gordon
R. J. Cook,
J. R. Green (each known to said Attesting Officer as truthful,

reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge, Mrs. H. M. Johnson, of the County of Cobb, State of Georgia, is the widow of William Johnson, who was a soldier in Company 1 of the first Regiment of Ga Cavalry Volunteers.

That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the 15 day of September 1862. That while in said service, or by reason of said service in the Army, he lost his life as follows: while serving in the Confederate Army from Chatterbox

that while stationed at Kingston Ferry in service with his command. While there in February 1863, he was taken sick with Pneumonia, and was sent to an old house used as a Field Hospital, where he died in about a week after he was taken sick.

Witnesses know those facts from having been members of the same company with the deceased soldier at the time of his enlistment and death, one of the witnesses J. R. Green, having served with him in his sickness.

We further swear that Mrs. H. M. Johnson 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 27th day of April 1891.

W. H. Black

Ordinary.

J. R. Green
R. J. Cook
J. H. Green

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

Form No. 3.

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. H. M. Johnson 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 April 1891.



J. W. Stone Ordinary.
as to Mrs. H. M. Johnson

Form No. 4.

NOTES.

The pension is only payable to certain classes of widows.

Those whose husbands were killed in service.

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

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

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

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

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

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

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

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

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

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

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

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

By order of the Governor.

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

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

Form No. 2.

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the
2nd day of July, 1893.

J. M. Stone Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, County of Cobb
 KNOW ALL MEN BY THESE PRESENTS, That I, Mrs. H. M. Johnson
 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
 day of July, 1893 H. M. Johnson [L.S.]

Executed in the presence of us:

F. M. Hunter
G. M. Fleming

DIRECTIONS.

Send amount by _____ to
 me at _____, and oblige

Widow's Pension,
 for year ending February 15th, 1893.
PAID TO
Mrs. H. M. Johnson
Cobb COUNTY.
 Warrant Issued
9/10 1893
 AND HANDED TO
Johnson
 1893.
 20. 9/6/94
 Johnson, H. M.
 Cobb County
 FOR THOSE HERETOFORE PAID
 1893.

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.
H. M. Johnson the applicant for a pension in this case, and
 know, from my own knowledge (or from positive proof presented to me by reputable witnesses),
 that she resides in this County, and that she resided in the State of Georgia on December 23,
 1890, and has not lived out of the State since that date. That she is the
 widow of H. M. Johnson deceased, and as such has heretofore
 been allowed a pension for the year ending February 15th, 1893.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office,
 this, the 30th day of July, 1894.

J. M. Stone Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, County of Cobb
 KNOW ALL MEN BY THESE PRESENTS, That I, Mrs. H. M. Johnson
 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
 day of July, 1894. Mrs. H. M. Johnson [L.S.]

Executed in the presence of us:

F. M. Hunter
G. M. Fleming

DIRECTIONS.

Send amount by _____ to
 me at _____, and oblige

Widow's Pension,
 for year ending February 15th, 1894.
PAID TO
Mrs. H. M. Johnson
Cobb COUNTY.
 Warrant Issued
9/10 1894.
 AND HANDED TO
Johnson
 1894.
 20. 9/6/94
 Johnson, H. M.
 Cobb County
 FOR THOSE HERETOFORE PAID
 1894.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of *DeKalb*

Personally comes Mrs.

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

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

continuously ever since *1839* That she is the Widow of

who was a Soldier in Company

of the *1st* Regiment of *Georgia*

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

1862 and served in the Army up to *February* *1863* That he lost hislife on the *13th* day of *July* *1863* (State here

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

that while in the Confederate Army he was attacked with Typhoid and Pneumonia and died at Kingston Tenn. on the 13th day of July 1863.

He was sent to the hospital from the service in the Confederate Army and died as above stated

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 *1839* 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

27th day of *July*, *1893*.

Ordinary.

Post-office

H. H. Johnson
Roswell Ga.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of *Cobb*

Personally comes Mrs.

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

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

continuously ever since *July* *1839* That she is the Widow of

who was a Soldier in Company

of the *1st* Regiment of *Georgia*

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

1862 and served in the Army up to *July* *1863* That he lost hislife on the *13th* day of *July* *1863* (State here

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

that while in the Confederate Army he was attacked with Typhoid and Pneumonia and died at Kingston Tenn. on the 13th day of July 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 *1839* 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

27th day of *July*, *1894*.

Ordinary.

Post-office

H. H. Johnson
Roswell 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.
H. M. Johnson the applicant for a pension in this case, and
know from my own knowledge (or from positive proof presented to me by reputable wit-
nesses), that she resides in this County, and that she resided in the State of Georgia on
December 23, 1890, and has not lived out of the State since that date. That she is the
widow of H. M. Johnson 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 1st day of July, 1895.

J. M. Stone Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Cobb County.

KNOW ALL MEN BY THESE PRESENTS, That I, Mrs. H. M. Johnson

County in said State, do hereby appoint
of Roscoe H. Hembree 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. H. M. Johnson [L. S.]

Executed in the presence of us:

J. M. Stone
Only

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 _____
I, J. M. Stone Ordinary in and for said County of
Cobb State of Georgia, hereby certify that I am acquainted with Mrs.
H. M. Johnson the applicant for a pension in this case, and
know from my own knowledge (or from positive proof presented to me by reputable witnesses), that she
resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived
out of the State since that date. That she is the widow of H. M. Johnson
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 1st day of July, 1895.

J. M. Stone Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Cobb County.

I, H. M. Johnson hereby authorize Roscoe H. Hembree
of Roscoe H. Hembree to receive and receipt for the pension paid thereon and request
that he remit same to me at by him

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of July, 1895. H. M. Johnson

Executed in the presence of

J. M. Stone
Only

FOR THOSE HERETOFORE PAID.
1895.
No. 459
WIDOW'S PENSION.
for year ending February 15th, 1895.
H. M. Johnson
widow of H. M. Johnson
Cobb County.
WARRANT ISSUED
24 July 1895.
AND HANDLED TO
W

FOR THOSE HERETOFORE PAID.
1896.
No. 207
WIDOW'S PENSION.
for year ending February 15th, 1896.
H. M. Johnson
widow of H. M. Johnson
Cobb County.
WARRANT ISSUED
24 July 1896.
AND HANDLED TO
W

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

H. M. Johnson

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

July 18 39 That she is the Widow of H. M. Johnson who was a Soldier in Company J. of the 1st Regiment of Ga

Volunteers, that he enlisted in said Regiment on or about the month of Nov 1867 and served in the Army up to July 1868 That he lost his life on the 13th day of July 1863 (State here

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

That while in the Confederate Army he contracted Typhoid Pneumonia Fever and died at the Hospital in Kingston Tenn. on the 13th day of July 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 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, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this

5th day of July 1895.

J. M. Smith Ordinary.

Post-office

Roswell Ga

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

H. M. Johnson

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

July 18 39 That she is the Widow of H. M. Johnson who was a Soldier in Company J. of the 1st Regiment of Ga

Volunteers, that he enlisted in said regiment on or about the month of Nov 1867 and served in the Army up to July 1868 That he lost his life on the 13th day of July 1863 (State here

That while in the Confederate Army at Kingston Tenn. he contracted Typhoid Fever and died with said disease on the 13th day of July 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 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, 1895, and now apply for the pension provided by law for the year ending February 15th, 1896.

Sworn to and subscribed before me, this

15th day of July 1896.

J. M. Smith Ordinary.

Post-office

Roswell 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
 State of Georgia, hereby certify that I am acquainted with Mrs.
H. M. Johnson 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 November 23, 1890, and has not
 lived out of the State since that date. That she is the widow of H. M. Johnson
 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
23^d day of Jan 1897.
J. M. Stone Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, County of Cobb
 I, H. M. Johnson hereby authorize H. M. Johnson
 of St. M. Remond to receive and receipt for the pension paid hereon and request
 that he remit same to me at by H. M. Johnson
 In Witness Whereof, I have hereunto set my hand and seal, this
Jan day of 1897.
H. M. Johnson Executed in the presence of
John Johnson

POWER OF ATTORNEY.

State of Georgia,
Cobb County.
 I, H. M. Johnson hereby authorize
St. M. Remond to receive and receipt for the pension paid hereon and request that he remit same to
H. M. Johnson at Remond Co. Ga.
 IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 27
 day of January 1898.
H. M. Johnson [L. S.]
 Executed in presence of
H. M. St. John

Form No. 2.

STATE OF GEORGIA, County of Cobb
 I, H. M. Johnson hereby authorize H. M. Johnson
 of St. M. Remond to receive and receipt for the pension paid hereon and request
 that he remit same to me at by H. M. Johnson
 In Witness Whereof, I have hereunto set my hand and seal, this
Jan day of 1897.
H. M. Johnson Executed in the presence of
John Johnson

Johnson H. M. (Mrs)
Cobb County
 For Those Heretofore Paid.

1898.

NO. 2060

WIDOW'S PENSION,

For year ending February 15th, 1898.

Mrs. H. M. Johnson
Widow of
H. M. Johnson

RICHARD JOHNSON,
 Commissioner of Pensions.

WARRANT ISSUED

1/31/1898.

AND HANDLED TO

att
W. W. JOHNSON, STONE PRINTER, ATLANTA

Johnson H. M. (Mrs)
Cobb County
 FOR THOSE HERETOFORE PAID.
 1897.
 No. 2480
 WIDOW'S PENSION,
 For year ending February 15th, 1897.
Mrs. H. M. Johnson
Widow of
H. M. Johnson
 RICHARD JOHNSON,
 Commissioner of Pensions.
 WARRANT ISSUED
2/3
 AND HANDLED TO
att
 1897.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of

Personally Comes Mrs.

Cobb } *H. M. Johnson*
 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 38* 18*38* That she is the Widow of

7 *H. C. Johnson* who was a Soldier in Company
15 of the *15* Regiment of *4th Vol.*
Novt.

Volunteers, that enlisted in said regiment on or about the month of
 186*7* and served in the Army up to *1863* That he lost his
 life on the *13th* day of *July* 1863 (State here

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

he fell in the Crimea, when General Sherman's
army was at the Hospital in King's Mountain
July 13th 1863

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier,
 and that she has never married since his death aforesaid, that she became his wife in the year 18*57*

that Georgia is her home and she resided in this State 23d day of December, 1890, and has not

lived in any other State or locality since that date. I have been allowed a pension 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
29 day of *Jan* 1897. *H. M. Johnson*
J. M. Don Ordinary. Post-office *Roswell Ga*

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of

Personally Comes Mrs.

Cobb } *H. M. Johnson*
 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 *1839* That she is the Widow of

7 *H. M. Johnson* who was a Soldier in Company
15 of the *15* Regiment of *4th Vol.*
Novt.

Volunteers, that he enlisted in said regiment on or about the month of
 186*7* and served in the Army up to *1863* That he lost his
 life on the *13th* day of *July* 1863 (State here

full particulars of the husband's death, when, where and from what cause.) *he fell in the*
Crimea, contributed numerous explosive fuses and
direct in the hospital at Kingston on the
13th day of January 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 18*57*

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
29 day of *Jan* 1898. *H. M. Johnson*
J. M. Don Ordinary. Post-Office *Roswell Ga*

State of Georgia,

County of

Cobb } *H. M. Johnson*
 Ordinary of said County, certify that I am well acquainted

with Mrs. *H. M. Johnson* who made the above affidavit and am satis-
 fied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she
 has continuously resided in this State since the *13th* day of *July* 1863

Given under my official signature and seal this the *29* day of *Jan* 1898.

Official Seal.

Ordinary of *Cobb* County.

POWER OF ATTORNEY.

State of Georgia.

Colt County.

I, H. M. Johnson hereby authorize F. M. Nembry
of Roanoke Co. 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.

X H M Johnson X [L. S.]
mod

Executed in presence of

W. F. Johnson

1899.

NO. 2633

WIDOW'S PENSION,

For year ending February 13th, 1899.

paid to
Mrs. H. M. Johnson

Colt County

Widow of H. M. Johnson

RICHARD JOHNSON,

Commissioner of Pensions

WARRANT ISSUED

2/2
1899.

AND HANDED TO

F. M. N

U.S. W. HARRISON, STATE PAINTER, ATLANTA

POWER OF ATTORNEY.

STATE OF GEORGIA,

Colt County.

I, Wm. H. M. Johnson hereby authorize

F. M. Nembry of

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 2nd

day of Febry 1900.

Executed in presence of

F. M. Nembry

W. H. M. Johnson [L. S.]
mod

1900.

NO. 2633

WIDOW'S PENSION,

For year ending February 13th, 1900.

paid to
Mrs. H. M. Johnson

Colt County

Widow of H. M. Johnson

JNO. W. LINDSEY,

Commissioner of Pensions

WARRANT ISSUED

Feb 13 1900,

AND HANDED TO

Nembry

W. W. HARRISON, STATE PAINTER, ATLANTA

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cobb

Personally Comes Mrs.

H. M. Johnsonwho, 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 1839 That she is the Widow ofH. H. Johnson who was a soldier in Company
of the 1st Regiment of Ga. Hovs.Volunteers, that he enlisted in said regiment on or about the month of
1862 and served in the Army up to Feb'y. 1863 That he lost his
life on the 13th day of Feb'y. 1863 (State here

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

That while in the Confederate Army
about the first of February 1863 he was attacked
with Pneumonia fever, and taken to the
hospital at Ringgold Tenn and died
on the 13th of February 1863Deponent 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 1851I have been allowed a pension as a resident of Cobb County for the year ending
February 15th, 1898, and now apply for the pension provided by law for the year ending February 15th, 1899.Sworn to and subscribed before me, this
13th day of Feb'y. 1899. H. M. Johnson
Ordinary. Post-Office Lawrence Ga.State of Georgia,
County of Cobb Ordinary of said County, certify that I am well acquaintedwith Mrs. H. M. Johnson who made the above affidavit and am satis-
fied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she
has continuously resided in this State since the day of Feb'y. 1863Given under my official signature and seal this the 13th 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.

H. M. Johnsonwho, 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 February 1829 That she is the Widow ofH. H. Johnson who was a soldier in Company
of the 1st Regiment of GeorgiaVolunteers, that he enlisted in said regiment on or about the month of November
1862 and served in the Army up to February 1863 That he lost his
life on the 13th day of Feb'y. 1863 (State here

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

That while in the Confederate army
about the first of February 1863 he was
attacked with Pneumonia fever was
taken to hospital at Ringgold Tenn.
and died with said disease on the
13th of Feb'y. 1863Deponent 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 1851I 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
27th day of Feb'y. 1900. H. M. Johnson
Ordinary. Post-Office LawrenceState of Georgia,
County of Cobb Ordinary of said County, certify that I am well acquaintedwith Mrs. H. M. Johnson who made the above affidavit and am satis-
fied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she
has continuously resided in this State since the day of Feb'y. 1829Given under my official signature and seal, this the 27th day of Feb'y. 1900.Official
Seal.Ordinary of Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Colt County.

I, H M Johnson hereby authorize
J M Hembree of Bowell
to receive and receipt for the pension paid hereon and request that he remit same to
me at Bowell

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 12
day of January, 1901.

H M Johnson [L. S.]

Executed in presence of

W H S + John

To Those Heretofore Paid.

1901.

No. 86

WIDOW'S PENSION,

For year ending February 15th, 1901.
PAID TO
Mrs H M Johnson

Colt County.
Widow of H M Johnson

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

Jan 15 1901,
AND HANDED TO

J M Hembree
One of the State Prisoners, Atlanta, Ga.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Colt County.

I, H M Johnson hereby authorize
J M Hembree of Bowell
to receive and receipt for the pension paid hereon, and request that he remit same to
H M Johnson at Bowell

In Witness Whereof, I have hereunto set my hand and seal, this 12
day of January, 1902.

H M Johnson [L. S.]

Executed in presence of

L. E. Hembree

Johnson Mrs H M
Colt County
To Those Heretofore Paid.

1902.

No. 803

WIDOW'S PENSION,

For year ending Dec. 31, 1902.
PAID TO

Mrs H M Johnson
OF
Colt County,
Widow of H M Johnson
Co. F Regiment, Georgia

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

16 1902
AND HANDED TO
Hembree

One of the State Prisoners, Atlanta, Ga.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

Personally Comes Mrs.

H M Johnson

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 1829

That she is the Widow of

who was a soldier in Company

of the

Regiment of Ga

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

1862 and served in the Army up to

Feb

1863 That he lost his

life on the

13th

day of Feb

1863 (State here

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

That while in the Confederate Army about the 1st of Feb 1863 he was attacked with Rheumatism fever was taken to hospital at Kingston Tenn and died with said disease on the 13th of Feb 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 1861

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

Sworn to and subscribed before me, this

7th day of January 1901.

John A. Crutney Ordinary.

Post Office

H M Johnson

wade

H M Johnson

State of Georgia,

County of Cobb

Ordinary of said County, certify that I am well acquainted

with Mrs. H M Johnson, 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 1829

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

Ordinary of

Cobb County.

Official Seal.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES MRS.

H M Johnson

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

1829

That she is the Widow of

who was a soldier in Company

of the

Regiment of Ga

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

1862, and served in the Army up to

Feb

1863 That he lost his

life on the

13th

day of

Feb

1863 (State here

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

That while in the Confederate Army about the 1st of Feb 1863 he was attacked with Rheumatism fever was taken to hospital at Kingston Tenn and died with said disease on the 13th of Feb 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 1861

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

Sworn to and subscribed before me,

this 6th day of Jan 1902.

John A. Crutney Ordinary.

Post Office

H M Johnson

wade

H M Johnson

State of Georgia,

County of Cobb

Ordinary of said County, certify that I am well

acquainted with Mrs. H M Johnson, 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 1829

(Given under my official signature and seal, this the 6th 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.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

I, H. M. Johnson,
S. M. Kemble of Koswell
 to receive and receipt for the pension paid hereon, and request that he remit same
me at Koswell
 In Witness Whereof, I have hereunto set my hand and seal, this 8
 day of January 1903.

Executed in presence of

L. E. Kemble.

H. M. Johnson
made

[L. 8.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

I, H. M. Johnson,
S. M. Kemble of Koswell
 to receive and receipt for the pension paid hereon, and request that he remit same to
me at Koswell
 In Witness Whereof, I have hereunto set my hand and seal, this 8
 day of January 1904.

Executed in presence of

L. E. Kemble.

H. M. Johnson
made

[L. 8.]

To Those Herebefore Paid

1903.

No. 237

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO
Mrs. H. M. Johnson
Widow of
Cobb
County,

Widow of
H. M. Johnson
Co. F
Regiment 1
1st Infantry

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

11-23 1903.

AND HANDLED TO

Kemble

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

Johnson, H. M. (Widow)
Cobb County

TO THOSE HERETOFORE PAID.

1904.

No. 237

WIDOW'S PENSION

FOR
 YEAR ENDING DECEMBER 31, 1904.

PAID
Mrs. H. M. Johnson
Widow of
Cobb
County,

Widow of
H. M. Johnson
Co. F
Regiment

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

11-23 1904.
 AND HANDLED TO

Kemble

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

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA.

County of Cobb

PERSONALLY COMES MRS.

M. M. Johnsonwho, 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

1829

That she is the Widow of

who was a soldier in Company

of the

Regiment of

Co

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

Nov

1862, and served in the Army up to

Feb

1863. That he lost his

life on the

13

day of

Feb

1863. (State here

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

That while in the Confederate Army about the 1st of Feb 1863 he was attacked with Consumption fever was taken to hospital at Kingston Tenn and died with said disease on the 13th of February 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 1857

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 15 day of Jan 1903.H. H. Johnson

Post Office

Kennell Co

State of Georgia

Cobb

County.

Ordinary of said County, certify that I am well

acquainted with Mrs. M. M. Johnson, 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 15 day of Jan 1903.

Official Seal

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.

M. M. Johnsonwho, 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

1829

That she is the Widow of

who was a soldier in Company

of the

Co

Regiment of

Nov

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

1862, and served in the Army up to

Feb

1863. That he lost his

life on the

13

day of

Feb

1863. (State here

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

While in the Army about the first Feb 1863 Mrs. Johnson's fever was taken to hospital at Kingston Tenn and died

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

I have been paid a pension as a resident of

Cobb

County for the

year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me,

this 15 day of Jan 1904.H. H. Johnson

Post Office

Kennell Co

State of Georgia

Cobb

County.

Ordinary of said County, certify that I am well

acquainted with Mrs. M. M. Johnson, 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 15 day of January 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,

Colt COUNTY.

I, H. M. Johnson, hereby authorize
F. M. Humber of Roswell
to receive and receipt for the pension paid hereon, and request that he remit same to
me at Roswell
In Witness Whereof, I have hereunto set my hand and seal, this 8
day of January 1905.

Executed in presence of

H. M. Johnson [L. S.]
my

POWER OF ATTORNEY.

STATE OF GEORGIA,

Colt COUNTY.

I, F. M. Humber, hereby authorize
F. M. Humber of Roswell
to receive and receipt for the pension paid hereon, and request that he remit same to
me at Roswell
In Witness Whereof, I have hereunto set my hand and seal, this 12
day of January 1905.

Executed in presence of

H. M. Johnson [L. S.]
my

To Those Heretofore Paid.

1905.

No. 236

WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO

Mrs. H. M. Johnson

OF

Colt County,

Widow of H. M. Johnson

Co. 2 — Regiment, 1 54

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

8/22 1905.

AND HANDY TO

F. M. Humber

The Pensioners Pension and Withdrawal Co., Agents,
 Care of Humber, Roswell, Ga. 30088.

To Those Heretofore Paid.

1906.

No. 171

WIDOW'S PENSION

For year ending Dec. 31, 1906.

PAID TO

Mrs. H. M. Johnson

OF

Colt County,

Widow of H. M. Johnson

Co. — Regiment

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1/22 1906.

AND HANDY TO

F. M. Humber

The Pensioners Pension and Withdrawal Co., Agents, Roswell, Ga.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES Mrs.

Mrs. H. M. Johnson

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 Feb. 1879

H. M. Johnson That she is the Widow of
who was a Soldier in Company
of the 1st Regiment of Vol.
Volunteers, that he enlisted in said regiment on or about the month of Feb.
1862, and served in the Army up to February 1863. That he lost his
life on the 13th day of Feb. 1863. (State here
particulars of the husband's death, when, where and from what cause.)

While in the Confederate army about the 1st
of Feb. 1863 he was stricken with pneumonia
fever, was taken to the hospital at Kingston
Ga., and died with said disease on the 13th
of Feb. 1863.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
soldier, and that she has never married since his death aforesaid, and that she became his wife in
the year 1851

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

Sworn to and subscribed before me,
this 2 day of June 1905.
John Antrey, Ordinary.

Post Office

State of Georgia,

Cobb County.I, John Antrey

Ordinary of said County, certify that I am well

acquainted with Mrs. H. M. Johnson Who made the above affidavit and
am satisfied that the facts therein stated are true, and I know who 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 2 day of June 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.

Mrs. H. M. Johnson

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 1879

H. M. Johnson That she is the Widow of
who was a soldier in Company
of the 1st Regiment of Vol.
Volunteers, that he enlisted in said regiment on or about the month of Feb.
1862, and served in the Army up to February 1863. That he lost his
life on the 13th day of February 1863. (State here
particulars of the husband's death, when, where and from what cause.)

Died Kingston Ga 1863

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
soldier, and that she has never married since his death aforesaid, and that she became his wife in
the year 1851

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

Sworn to and subscribed before me
this 2 day of June 1906.
John Antrey, Ordinary.

Post Office

State of Georgia,

Cobb County.I, John Antrey

Ordinary of said County, certify that I am well

acquainted with Mrs. H. M. Johnson who made the above affidavit, and
am satisfied that the facts therein stated are true, and I know who is the individual she represents
herself to be, and that she has continuously resided in this State since the 13
day of February 1863.

Given under my official signature and seal, this 2 day of June 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,

Cobb COUNTY.

I, H. M. Johnson hereby authorize

F. M. Kember

Rosamale

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

me

at

Rosamale

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

day of January 1907.

H. M. Johnson [L. S.]

Executed in presence of

Sara Johnson

Johnson, H. M. (ma)

Cobb County
TO THOSE HERETOFORE SAID.

1907.

No. 176

WIDOW'S PENSION

For Year ending Dec. 31, 1907.

PAID TO

Mrs. H. M. Johnson

OF

Cobb County,

Widow of

Co. Regiment

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1907,

AND HANDED TO

Hecker

Geo. W. Harrison, State Printer, Atlanta.

PAID TO WIDOWS ALLOWED PENSIONS.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of

Cobb

PERSONALLY COMES MRS.

M. Johnson

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

M. Johnson

who was a soldier in Company

*D*of the *1st En*

Regiment of

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

188____, and served in the Army up to 188____. That he lost his

life on the _____ day of _____ 1893 (State here

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

Died of Disease

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

I have been paid a pension as a resident of _____ 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 *4* day of *May* 1907.

John H. Hootney, Ordinary

Post Office

State of Georgia,

Cobb

County.

Ordinary of said County, certify that I am well

acquainted with Mrs. *M. Johnson*, 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 *4* day of *May* 1907.

{ Official
Seal }

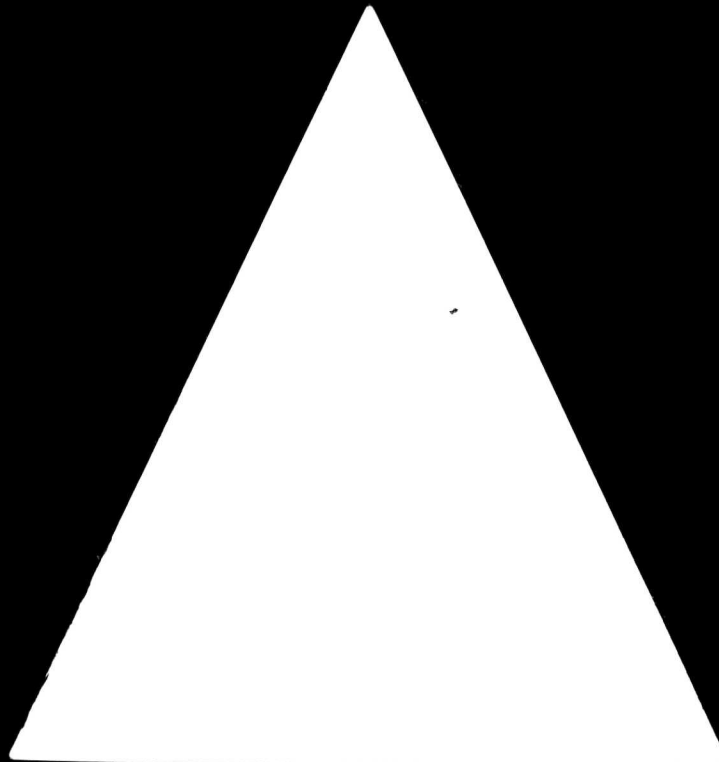
Ordinary of

County.

NOTE.—All blanks must be filled.

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

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



POWER OF ATTORNEY.

Form 5.

STATE OF GEORGIA.

of COBB COUNTY, }

I, James H. Johnson, hereby authorize

of Atlanta Ga. to receive and receipt for the pension allowed and

request that he receipt and

by me at me

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 12 day of July 1897. James H. Johnson

[L. S.]

Executed in presence of:

J. M. Johnson

Recd. Disab. 16 May 1893
App. 4/27/97
Richard Johnson
ACT 24th October, 1897. *Plenary*

No. 3311
Johnson James H.
Atlanta Ga.
INVALID

SOLDIER'S PENSION

1897.

Name James H. Johnson

County Cobb

Disability Rheumatism

Amount, \$ 50

4/27 1897.

RICHARD JOHNSON,

Commissioner of Pensions.

E.R.C. 1941

WARRANT HANDED TO

Johnson

Geo. W. HARRISON, STATE PRINTER, ATLANTA.

2/13/97

Form 8.

COUNTY.

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

day of July 1897.

Executed in presence of:

Form 1

County _____

PERSONALLY appears James of () & 5

County, State of Georgia, who being duly sworn says on oath that he was born on the _____ day of April 1833, that he is a *bona fide* citizen and resident of Georgia, and has been continuously since the _____ day of April 1833.

that he enlisted in the military service of the Confederate States (or the State of _____
_____) during the war between the States, and served as a
Private in Company 4 of 104th Regiment
of Confederate Volunteers. Friends: that whilst engaged in

day of Aug 1862, he was disabled or wounded as follows:

[illegible]

Acts amendatory thereof, and makes application for the pension to which he is entitled for the year thereunder, ending October 26th, 1897.

Sworn to and subscribed before me, this the

day of January 1897.

Ordinary

NOTE.—Do not trouble to mention wounds which do not disable.

The Instructions, as set out in the Notes, MUST be observed.

and said because I found it so nice he would like to make it his own means what

App^d 4/23/97
 Rickalman
 ACT 24th October, 1887. 2/2/97

No. 3311
Johnson
Cable Carriage
INVALID

SOLDIER'S PENSION
1897.

Name Ymago F. Johnson
County Co. B

Disability Pension
Amount, \$ 50
4/27 1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
Jm Stone

2/13/97

AFFIDAVIT FOR THREE WITNESSES.

Form 3

STATE OF GEORGIA,

Cobb County.

PERSONALLY appears before me, the undersigned, Ordinary in and for said County, Cobb

Thomas V. Lang and A. S. Briggs,

and James F. Johnson personally known to me to be trustworthy citizens,

each of whom, being duly sworn according to law, severally say, under oath, that they are personally well acquainted with James F. Johnson

whose application is herewith presented for a pension, that he has resided in this State continuously since the December 15 day of 1866, that he served in Company H

of the 1st Regiment of Infantry Brigade, and from our

personal knowledge he was injured by the service as follows: (give full statement, and tell in your own language when and how the injury happened, and how badly applicant is disabled from work. If he does any labor, or can do any, state what.)

James F. Johnson was a Private in the 1st Mass. when he entered the service. He entered the service on the 1st day of May 1862. He was taken with Rheumatism in the left leg so that he could not walk for some years 1863-4-5-6. He was discharged on account of being not able to do any more work. He has been since discharged. His condition was then better and the same he has not made a full recovery since the war. He is unable to do any work at present and has been for several years.

We personally know above stated facts. We were with him in the army and have known him ever since. He was honorably discharged or retired from the service on day of 1866.

Applicant is permanently disabled as stated and has been so to our certain knowledge ever since 1866. We have no interest in the recovery of a pension by him.

Sworn to and subscribed before me, this

8th day of July 1897.

S. J. Scott

A. S. Briggs
T. V. Lang

Unsworn

Notary Public for the State of Georgia, I certify that the foregoing is understood by the witnesses, and that they are legally qualified to perform.

Witnesses are asked to make their statements full and explicit.

All blank spaces must be filled when signed.

Three witnesses are required.

Said County hereby certifies that Thomas V. Lang is a bona fide citizen of this County, and that he is a reputable witness and is entitled to full credit and belief.

This July 4th 1897

H. P. Anderson ordy. Paulding Co

PHYSICIANS' AFFIDAVIT.

Form 3.

STATE OF GEORGIA,

Cobb County.

PERSONALLY comes before me, Wm. J. Sturge Ordinary of said County,

P. R. Murray and J. F. Hunter, both known to

me as reputable physicians of said County, who being severally sworn, say on oath, that they have care-

fully examined James F. Johnson and after such personal examination,

say that the present condition of applicant is as follows:

He is completely disabled from work on account of Rheumatism

and that the condition is permanent.

We further say that said condition arises from the following facts:

That we know that he has had Rheumatism since Eighteen hundred and seventy eight

We have treated applicant professionally for Seventeen years, and his condition, as above

stated, does not arise from hereditary or congenital causes, or from vicious or

intemperate habits.

Sworn to and subscribed before me, this

1st day of Feb 1897.

Wm. J. Sturge Ordinary.

P. R. Murray
J. F. Hunter

Notary Public for the State of Georgia, I certify that the foregoing is understood by the witnesses, and that they are legally qualified to perform.

Not 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 seen him.

Not 3.—The physicians will be careful to fill every blank space in oath.

STATE OF GEORGIA,

Cobb County.

I, Wm. J. Sturge Ordinary of said County,

do certify that I am well acquainted with James F. Johnson the

applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his

said affidavit are true, and he is disabled, as he claims, and I know he is the individual he represents

himself to be, and that he resides in this County. I also certify that the foregoing witnesses, to-wit

P. R. Murray and J. F. Hunter are persons of respectability, that their statements are worthy of full credit and belief, and that the full text of the affidavit was read to and understood by them before they signed the same.

Given under my official signature and seal this 1st day of Feb 1897.

Wm. J. Sturge Ordinary.

Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, J. F. Johnson hereby authorize J. F. Johnson

of Cobb Co.

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 22nd

day of July 1898. J. F. Johnson [L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, J. F. Johnson hereby authorize J. F. Johnson

of Marble Co.

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 15th

day of July 1899. J. F. Johnson [L. S.]

Executed in presence of

ACT OF MARCH 1862
(For Those Already Enrolled.)

No. 3730

INVALID
SOLDIER'S PENSION.

1898.

Name J. F. Johnson
County Cobb
Disability Disease
Amount, \$ 57.
3/4

1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO
J. F. Johnson

W. W. HARRISON, STATE PRINTER, ATLANTA.

CODE SECTION 100A
(For Those Already Enrolled.)

No. 3774

INVALID
SOLDIER'S PENSION.

1899.

Name J. F. Johnson
County Cobb
Disability Disease
Amount, \$ 57.
3/4

1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED
J. F. Johnson

W. W. HARRISON, STATE PRINTER, ATLANTA.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.
Personally appears *J. Johnston* 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* 18*63*, 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 and Co.* in Company *D*, of *18th Confederate* of *Volunteers*, *Jackson's* Brigade; that whilst engaged in such military service in the State of *Alabama*, on the *18th* day of *July* 1863, he was wounded, injured or diseased as follows:

That he was attacked with inflammation of the lungs from which disease he has never recovered and on account of which he is rendered practically incompetent to perform the ordinary duties of a citizen.

Dependent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1898. I have heretofore under said law as a resident of *Cobb* county been allowed an invalid pension of *\$50.* Dollars, for the year 189*8*.

Sworn to and subscribed before me, this, the *22nd* day of *July*, 1898. *J. Johnston* *Upshaw Cobb Co.*
POST-OFFICE

Notary Statefully 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, *M. Jones* Ordinary of said County, do certify that I am well acquainted with *J. Johnston* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this *22nd* day of *July*, 1898.

Ordinary *M. Jones* *Cobb* County.

A fee
must
and
here.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.
Personally appears *J. Johnston* 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 *18th* day of *April* 18*63*, that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *D*, of *18th Confederate* of *Volunteers*, *Jackson's* Brigade; that whilst engaged in such military service in the State of *Alabama*, on the *18th* day of *July* 1863, he was wounded, injured or diseased as follows:

That while in the said service he contracted rheumatism from which disease he has never recovered and on account of which he is rendered practically incompetent to perform the ordinary duties of a citizen.

Dependent makes application for the pension to which he is entitled for the year ending October 26th, 1898. I have heretofore under said law as a resident of *Cobb* County been allowed an invalid pension of *\$50.* Dollars, for the year 189*8*.

Sworn to and subscribed before me, this, the *15th* day of *Feb.*, 1899. *J. Johnston* *Upshaw P.O.*
POST OFFICE

Notary Statefully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Cobb County.
I, *J. W. Stow* Ordinary of said County, do certify that I am well acquainted with *J. Johnston* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 *Feb.*, 1899.

Ordinary *J. W. Stow* *Cobb* County.

A fee
must
and
here.

POWER OF ATTORNEY.

STATE OF GEORGIA,

I, Joseph Johnston County, Chubb hereby authorize John Adam of Monetta, Ga. to receive and receipt for the pension paid hereon and request that he remit same to me by Adam at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 6th day of March 1900.

Joseph H Johnston [L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

I, J. H Johnston County, Chubb hereby authorize John H. Hooton of Monetta to receive and receipt for the pension paid hereon and request that he remit same to me by hand at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 10th day of January 1901.

J. H Johnston [L. S.]

Executed in presence of _____

John M. Gamm

Johnston, James F.
Chubb G.

COPIES SECTION 126.
(For Those Already Enrolled.)

No. 1286

INVALID
SOLDIER'S PENSION.
1900.

Name J. H Johnston
County Chubb
Disability Disease
Amount, \$ 50.
Warrant issued May 7 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Adam
Chubb
No date

Johnston, James F.
Chubb G.

COPIES SECTION 126.
(For Those Already Enrolled.)

No. 1376

DISABLED
SOLDIER'S PENSION.
1901.

Name J. H Johnston
County Chubb
Disability Disease
Amount, \$ 50.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Chubb
No date

STATE OF GEORGIA

For Applicants Heretofore Allowed Pensions.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears J. F. Johnson of Cobb

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State and County, and has resided therein continuously ever since the 11th day of April 1833; that he enlisted in the military service of the Confederate States (of the State of Ala.) during the war between the States, and served as a private in Company H, of 1st Alabama Regiment of Ala. Volunteers, Jackson's Brigade; that whilst engaged in such military service in the State of Ala., on the 11th day of July 1862, he was wounded, injured or diseased as follows:

That while in the said service he contracted rheumatism from which disease he has never recovered on account of which disease he is rendered practically incompetent to perform the ordinary manual avocations of life.

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1900. I have heretofore under said law as a resident of Cobb County been allowed an invalid pension of \$50 Dollars, for the year 1897.

Sworn to and subscribed before me this, the 6th day of May 1900. James H. Johnston POST OFFICE

Note. State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Cobb County.

I, J. W. Stoney Ordinary of said County, do certify that I am well acquainted with J. F. Johnson the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 6th day of May 1900.

Ordinary J. W. Stoney Cobb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb County.

Personally appears J. F. Johnson 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 11th day of April 1833; that he enlisted in the military service of the Confederate States (or of the State of Ala.) during the war between the States, and served as a private in Company H, of 1st Alabama Regiment of Ala. Volunteers, Jackson's Brigade; that whilst engaged in such military service in the State of Ala., on the 11th day of July 1862, he was wounded, injured or diseased as follows:

That while in the said service he contracted Rheumatism from which disease he has never recovered on account of which he is rendered practically incompetent to perform the ordinary manual avocations of life.

Deponent makes application for the pension to which he is entitled for year ending October 26th, 1901. I have heretofore under said law as a resident of Cobb County been allowed an invalid pension of \$50 Dollars, for the year 1900.

Sworn to and subscribed before me, this the 15th day of January 1901. James H. Johnston Postoffice

Note. State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Cobb County.

I, John Antley Ordinary of said County, do certify that I am well acquainted with J. F. Johnson the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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.

Ordinary John Antley Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, J. F. Johnston hereby authorize John Johnston of _____ to receive and receipt for the pension paid hereon and request that he remit same to by _____

at _____ IN WITNESS WHEREOF, I have hereunto set my hand and seal this 10 day of January 1902.

Executed in presence of

J. F. Johnston [L. S.]

(FOR THOSE ALREADY ENROLLED.)

No. 333

DISABLED

SOLDIER'S PENSION

1902.

Name J. F. Johnston
County Cobb
Co. H Regiment 1st
Disability Confederate
Amount, \$ 10

1/16 1902

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Ordy

Gen. W. Harrison Sharp Pension, Atlanta.

no data

Johnston, J. F.
Cobb County

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, J. F. Johnston hereby authorize John Johnston of _____ to receive and receipt for the pension paid hereon and request that he remit same to by _____

at _____ IN WITNESS WHEREOF, I have hereunto set my hand and seal this 10 day of January 1902.

Executed in presence of

J. F. Johnston [L. S.]

(FOR THOSE ALREADY ENROLLED.)

No. 333

DISABLED

SOLDIER'S PENSION

1903.

Name J. F. Johnston
County Cobb
Co. H Regiment 1st
Disability Confederate
Amount, \$ 50

1/13 1902

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Ordy

Gen. W. Harrison Sharp Pension, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears J. H. Johnson 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 11th day of April 1833; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company H, of 1st Confederate Regiment of 69 Volunteers, Jackson's Brigade; that whilst engaged in such military service in the State of Ala, on the 10th day of July 1862, he was wounded, injured or diseased as follows:

That while in the said service he contracted rheumatism from which disease he never recovered on account of which he is rendered practically incompetent to perform his ordinary manual avocations of life.

Deponent makes application for the pension to which he is entitled for the year ending October 20th, 1902. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of \$50 Dollars, for the year 1901.

Sworn to and subscribed before me, this 10th day of Jan 1902. John Anthony Ordway Post-office Wichard

Note.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Cobb County.

I, John Anthony Ordway Ordinary of said County, do certify that I am well acquainted with J. H. Johnson the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 10th day of Jan 1902.

Ordinary John Anthony Ordway County.

Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1, 1902.

BOARD OF ALLOTTMENT

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears J. H. Johnson 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 11th day of April 1833; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company H, of 1st Confederate Regiment of 69 Volunteers, Jackson's Brigade; that whilst engaged in such military service in the State of Ala, on the 10th day of July 1862, he was wounded, injured or diseased as follows:

That while in the said service he contracted rheumatism from which disease he never recovered and on account of which he is rendered incompetent to perform his usual avocations of life.

Deponent makes application for the pension to which he is entitled for the year ending October 20th, 1903. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of \$50 Dollars, for the year 1902.

Sworn to and subscribed before me, this 10th day of Jan 1903. John Anthony Ordway Post-office Wichard

Note.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Cobb County.

I, John Anthony Ordway Ordinary of said County, do certify that I am well acquainted with J. H. Johnson the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 10th day of Jan 1903.

Ordinary John Anthony Ordway County.

Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1, 1903.

BOARD OF ALLOTTMENT

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

I, John H. Johnson hereby authorize
John H. Johnson of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
_____ by _____
at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 19
day of Jan 1904.

Executed in presence of J. M. Sam [L. S.]

Johnson J. H.
Cobb a

COOR SECTION 1206.
(FOR THOSE ALREADY ENROLLED.)

No. 332

DISABLED
SOLDIER'S PENSION
1904.

Name J. H. Johnson
Country Cobb
Co. _____ Regiment _____
Disability _____
Amount, \$ 50 00
JAN 25 7 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Ordy
Geo. W. Harrison, State Printer, Atlanta.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb COUNTY.

I, J. H. Johnson hereby authorize
John H. Johnson of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
_____ by _____
at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 17
day of Jan 1905.

Executed in the presence of J. M. Sam [L. S.]

Johnson J. H.
Cobb a

COOR SECTION 1206.
(FOR THOSE ALREADY ENROLLED.)
4 - Cobb County - 1906

No. 332

DISABLED
SOLDIER'S PENSION
1905.

Name J. H. Johnson
Country Cobb
Co. _____ Regiment 1st
Disability _____
Amount, \$ 50 00
JAN 23 1 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Ordy
Geo. W. Harrison, State Printer, Atlanta.

no data

FOR THOSE ALREADY ENROLLED

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears *J. H. Johnson* 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* 18*93*; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the

States, and served as a *Private* in Company *A*, of *1st* Regiment of *Volunteers* *Johnson's* Brigade; that whilst engaged in such military service in the State of *Ala*, on the _____ day of *July* 186*2*, he was wounded, injured or diseased as follows:

That while in the said service he contracted Rheumatism from which disease he has never recovered on account of which he is unable to perform the ordinary avocations of life

Deponent makes application for the pension to which he is entitled for the year ending October 31st, 1904. I have heretofore, under said law, as a resident of _____ County, been allowed an invalid pension of _____ Dollars, for the year 1903.

Sworn to and subscribed before me, this _____ day of _____ 1904.

Post-office _____

NOTE.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Cobb County.

I, *John H. Johnson* 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 _____ 1904.

Ordinary *Cobb* County.

NOTE.—Fill all blanks and of Company and Regiment.

NOTE.—All vouchers and affidavits must bear date after January 1, 1904.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb COUNTY.

Personally appears *J. H. Johnson* 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* 18*93*; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the

States, and served as a *Private* in Company *A*, of *1st* Regiment of *Volunteers* *Jackson's* Brigade; that whilst engaged in such military service in the State of *Ala*, on the _____ day of *July* 186*2*, he was wounded, injured or diseased as follows:

Contracted Rheumatism rendering applicant practically incompetent to perform the ordinary avocations of life

Deponent makes application for the pension to which he is entitled for the year ending October 31st, 1905. I have heretofore, under said law, as a resident of _____ County, been allowed an invalid pension of _____ Dollars, for the year 1904.

Sworn to and subscribed before me, this _____ day of *January* 1905.

Post-office _____

NOTE.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Cobb COUNTY.

I, *John H. Johnson* 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 *January* 1905.

Ordinary *Cobb* County.

NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1, 1905.

POWER OF ATTORNEY.

24

I, James Thomas hereby authorize

remitt the same to me at.

by his check or registered mail

Witness my hand this 11 day of

1

1902

Excluded in presence of

Executed in presence of
Joe McKinnon ~~Witness~~
 _____ County _____
 my Notary Public for U.S.
James V. Ferguson
Went

SEAL

No.

**WIDOW'S
Indigent Pension.
1901.**

Name Jessie Johnson
County Cobb

Widow of Geo. A. Johnson
C. E. Co. 1891

Approved *4/8/1* 1901

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT HANDED TO

1901

3/9/07

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb County. }
I, Jennie Johnson hereby authorize John Hartney
of Cobb County, to receive and receipt for the pension allowed and that he
remit the same to me at Monthly by his check or registered mail.
Witness my hand this 11 day of Feb 1901

Executed in presence of
Geo Mann Jennie Johnson L. S.
County.

SEAL

Jennie Johnson
Cobb Co

**WIDOW'S
Indigent Pension.
1901.**

Name Jennie Johnson
County Cobb
Widow of Geo. A. Johnson
Cobb Co. Ga.
Approved 4/8/01 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

1901.

3/9/01

Geo. W. Hartman, State Printer, Atlanta, Ga.

Questions for Applicant.

STATE OF GEORGIA,

Cobb County. }
Mrs. Jennie Johnson of said State and County, desiring to
avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly,
1900, hereby submits her 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.)
Mrs. Jennie Johnson Decatur Ga Co. Cobb
How long and since when have you been a resident of this State? All my life
abt 30th 1884
3. When and where were you born? Cobb County 1835 Oct 20th
4. When and where was your husband born—state his full name, and when were you and he married?
In 1854 C. A. Johnson Decatur Ga
5. When and where, and in what Company and Regiment did your husband enlist or serve during the
war between the States? In 4th March 1862 Cobb County Co. Cobb
6. How long did your husband serve in said Company and Regiment? More than three
years 1862 13th day of May 1862 after surrender
7. When did your husband's Company and Regiment surrender and was discharged?
May 1862 Decatur Ga
8. Was your husband present at the time and place where his Company and Regiment surrendered?
No He was in prison at Rock Island Ill.
9. If not with his command at surrender, state clearly and specifically where he was, when he left com-
mand, for what cause, and by what authority? He was at Rock Island Ill
was captured and held there as a prisoner
10. When and where did your husband die? 1893 on the 20th day of November
in Atlanta Ga.
11. Which of the following grounds do you base your application for Pension, viz: First—Age and
Poverty; Second—Infirmary and Poverty, or Third—Blindness and Poverty? Age and poverty and
Infirmary and poverty
12. If upon the first ground, state how long you have been in such a condition that you cannot earn
your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon
the third, state whether you are totally blind, and when and where you lost your sight. Infirmary and
poverty Not over 40 years
13. What has been your occupation since your husband's death? Nothing
my children have made up my mind to stay with my children
14. How much can you earn gross, by your own exertion or labor? Nothing at all
15. What property, real or personal, or income do you have or possess, and its gross value?
No property
16. What property, real or personal, did you possess at death of husband or he left you, and of the year
1899-1900, and what disposition, if any, by sale or gift, have you made of the same? I had no property
left me none in 1899 or 1900
17. In what counties did you reside in 1899 and 1900, and what property did you return for taxation?
Cobb County Ga
18. How have you been supported since death of husband, and especially for 1899 and 1900?
By my children
19. How much did your support cost for each of those years, and how much did you contribute by your
own labor or income? about \$250 in 1899 I contributed nothing
20. What was your employment during 1899 and 1900—how much did you receive for each year?
No employment
21. Have you a family? If so, who composes such family? Give their means of support. Have they
any lands or other property? No I live with my married children
22. Have you ever made an application for pension before? No
23. How many applications have you made for a Pension, and under what claim? None

Sworn to and subscribed before me this 11th
day of July 1901
of John Hartney County.
Ordinary,
Jennie Johnson

Questions for Witnesses.

STATE OF GEORGIA,

County.

of said State and County, having

been presented as a witness in support of the Application of Mrs. James Johnson
for a Pension under the Act of 1900, and after having been 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? I T Loden in
Rowell Cobb County Georgia
2. Are you acquainted with the applicant, Mrs. James Johnson
If so, how long have you known her? since 1895
3. Where does she reside, and how long and since when has she been a resident of this State?
Cobb County Georgia since her husband's death
4. When and where was she born? in Cobb County Georgia
5. Were you ever acquainted with her husband?
6. Where did he reside in 1861? in Cobb County Ga
7. When and to whom was he married? in 1854 to Annie Brockman
8. When and where was he born? in Ga
9. How long have you known him? 47 years
10. When and where did John A. Johnson enlist in the war between
the States, and in what Company and Regiment did he enlist and how do you know this? at Rowell Cobb
in 1861 in the 1st Ga Cavalry
11. Were you a member of the same Company and Regiment? yes

12. How long did he perform regular military duty? about three years
13. When and where was his Company and Regiment surrendered and discharged from service?
May 1865 at Greensboro N.C.
14. Were you with the command when it surrendered?
15. Was John A. Johnson the husband of applicant present?
he was not
16. If not present, where was he? was in prison at Rich Island Ill
17. When and where did he leave his Command? July 1864 at the same place
- For what cause? lost capture

- By whose authority he left? there of
- How do you know all this? (State fully and clearly) the last time I saw him
was on the 1st of April 1864 and he died
in a hospital at Rowell Cobb County Georgia
18. When and where did John A. Johnson die?
December 1863 in Atlanta Ga
 19. Where did he reside at his death and how long had he been a resident of Georgia at his death?
in Atlanta was a resident of the State since his
 20. Do you of your own knowledge know that applicant is the lawful widow of John A.

21. Has she remained unmarried since her soldier husband's death, and is now his widow?
She has and is the widow of John A. Johnson
22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge?
she has no property or income
I live in the same place and see her often
23. What property, effects or income did applicant possess in 1899 and 1900 and what disposition did she make of it?
had no property, is possess of
no and is in charge
24. Has applicant conveyed any property in last two years or given any away, if so what was it and to whom?
she has not

25. What is applicant's physical condition and her chances and ability to earn a support?
she is very feeble health and is able
to do any thing that would support her

26. Is applicant able to earn a support at labor of any sort, if not why? she is not
on account of being in feeble health
27. How was she supported for 1899 and 1900? by her children whom
are all have their families of their own
28. How much did applicant contribute to her support for last two years? nothing
29. Give a full and complete statement of applicant's physical condition?

30. What interest have you in the recovery of this pension by the applicant? not any
thing what ever
- Sworn to and subscribed before me this 17th
day of July 1901
John C. White Ordinary,
Cobb County. W. D. Loden H. M. Coleman
Witnesses.

Affidavits of Physicians.

STATE OF GEORGIA,

County.

Personally before me comes Gilbert L. Lennett MD and
E. J. L. Lennett MD both known to me to be reputable
physicians of said county, who, being severally sworn, say on oath that they have examined carefully Mrs.
James Johnson applicant for a Pension under Act of 1900, and after
such personal examination say that her physical condition is this: General health bad
depression incident to old age. she is not able to contribute
anything to her own support, her own labor but
is living with her son, and is dependent on him
and we have no interest in said pension if allowed.
Sworn to and subscribed before me this 14th
day of July 1901
John C. White Ordinary,
Cobb County. G. J. Lennett MD
E. J. Lennett MD

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County.

I, John C. White Ordinary in and for said county, hereby
certify that the applicant, Mrs. James Johnson resides in said
county, and has been a bona fide resident of this State since 1861 day of Jan
1901, and that the witnesses, Mr. W. D. Loden H. M. Coleman
are of trustworthy character, and that their statements
are entitled to full faith and credit.

I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses before the same was signed and subscribed.

I further certify that the tax digest of Cobb county shows that applicant
returned for taxation in her own name in 1899 no dollars worth
of property, and in 1900 no dollars worth of property.

Witness my hand and official seal, this 14th day of July 1901.
John C. White Ordinary,
Cobb County.

- Notar-1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth; So help you God."
2. Additional affidavits may be attached, if blank spaces are insufficient.
 3. All affidavits must be made before Ordinary.
 4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 26th April, 1865, not entitled.
 5. Witnesses and two Physicians are necessary to make out claims.

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb County.

I, Jennie Johnson hereby authorize John D. Waring of Cobb County, to receive and receipt for the pension allowed and that he remit the same to me at Month by his check or registered mail.

Witness my hand this 11 day of Feb 1901.

Executed in presence of

Geo. W. Waring Ordinary, Cobb County.

Jennie Johnson L. S. Mark

()
()
()

Questions for Applicant.

STATE OF GEORGIA,

Cobb County.

Mrs. Jennie Johnson of said State and County, desiring to avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly, passed 1900, hereby submits her proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (Give State, County and Post Office)
Mrs. Jennie Johnson Lawrence Co. Ga.
2. How long and since when have you been a resident of this State?
Oct 20th 1889
3. When and where were you born?
Leona Tenney 1850
4. When and where was your husband born—state his full name, and when were you and he married?
In 1884 D. C. Waring, Jr. Lawrence Co. Ga. leaving 22nd December 1884
5. When and where, and in what Company and Regiment did your husband enlist or serve during the war between the States?
On 4th March 1862 Cobb Co. Ga. 1st Regt. Ga. Inf.
6. How long did your husband serve in said Company and Regiment?
More than three years, Hagat home on 16th 13th day of May 1865 after surrender
7. When and where did your husband's Company and Regiment surrender and was discharged?
April 1865. Richmond, Va.
8. Was your husband present at the time and place with his Company and Regiment surrendered?
No. He was in prison at Rock Island Ill.
9. If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause, and by what authority?
He was at Rock Island Ill. was captured and held there as a prisoner
10. When and where did your husband die?
1893 on the 22nd day of January in Atlanta Ga.
11. Which of the following grounds do you base your application for Pension, viz: First—Age and Poverty; Second—Infirmary and Poverty, or Third—Blindness and Poverty?
Age and poverty and Infirmary and poverty
12. If upon the first ground, state how long you have been in such a condition that you cannot earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind, and when and where you lost your sight.
After 1865, I have not been able to do any thing at all for 10 years. Almost breaking down and always
13. What has been your occupation since your husband's death?
Keeping house and my children have no occupation being without children
14. How much can you earn gross, by your own exertion or labor?
Nothing at all
15. What property, real or personal, or income do you have or possess, and its gross value?
No property, no income, but no value
16. What property, real or personal, did you possess at death of husband or he left you, and of the year 1899-1900, and what disposition, if any, by sale or gift, have you made of the same?
I had no property left me, none in 1899 or 1900
17. In what counties did you reside in 1899 and 1900, and what property did you return for taxation?
Cobb County Ga.
18. How have you been supported since death of husband, and especially for 1899 and 1900?
By my children in the home families
19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income?
About \$250.00 in 1900. I contributed nothing
20. What was your employment during 1899 and 1900—how much did you receive for each year?
No employment & nothing received
21. Have you a family? If so, who composes such family? Give their means of support. Have they any lands or other property?
No. I live with my married children
22. Have you ever made an application for pension before?
No
23. How many applications have you made for a Pension, and under what claim?
None

Sworn to and subscribed before me this 11th

day of July 1901
John D. Waring Ordinary,
of Cobb County.

Jennie Johnson
Mark

WIDOW'S

Indigent Pension.

1901.

Name Jennie Johnson
County Cobb
Widow of Geo. D. Johnson
Age 45 years
Approved 4/5/01 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

1901.

Geo. W. Waring, State Printer, Atlanta, Ga.

3/9/01

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, Jessie Johnson hereby authorize

John Aubrey of

to receive and receipt for the pension paid hereon and request that he remit same to

by

at

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 15

day of Jan 1902.

Executed in presence of

J. M. Ann

Jessie Johnson [L. S.]

Indigent Widows
Cobb County
Regular Pensions
Paid

DISABLED
SOLDIER'S PENSION
1902.

Name Jessie Johnson
County Cobb
Co. 1st
Disability 1/4
Amount, \$ 14.02

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

Only

JOHN W. LINDSEY, State Printer, ATLANTA.

Johnson, Jessie
Cobb County
To Those Heretofore Paid.

1903.

No. 144

INDIGENT
WIDOW'S PENSION,
For year ending Dec. 31, 1903.

PAID TO
Mrs. Jessie Johnson
OF

Cobb County,
Widow of J. D. Johnson
Co. 1st Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

AND HANDLED TO

Only

JOHN W. LINDSEY, State Printer, ATLANTA.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, Jessie Johnson 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 14th

day of January 1903.

Executed in the presence of

J. M. Ann

Jessie Johnson [L. S.]

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County,

Personally appears *Jennie Johnson* of *Wt. Co.*
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 *1873*; 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 *Soldier* in Company *E* of *Wt. Regt.*
of *7th* Volunteers, *Hanftown's Brigade*; that whilst engaged
in such military service in the State of *Georgia*, on the *1st* day
of *1864*, he was wounded, injured or diseased as follows:

That she is the widow of A. Johnson
who served in the Confederate Service
that he enlisted March 1864, & died 1893
That owing to age infirmity & poverty
Dependent is unable to support herself

That she has been Enrolled in Wt. Co. as Indigent

Jennie Johnson under application on *January 1902* to which he is entitled for the year
ending October 20th, 1902. I have heretofore, under said law, as a resident of
County, been allowed an invalid pension of
Dollars, for the year 1901.

Sworn to and subscribed before me, this *1st* day of *January* 1902 Post-office

NOTE. - State fully the nature of the wound or character of disease which causes the disability, and explain precisely the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

County,

I, *John A. Burt* 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 *January* 1902.

Ordinary.

County.

NOTE. - Fill all blanks and of Company and Regiment
NOTE. - All vouchers and affidavits must bear date after January 1, 1903.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 1.

STATE OF GEORGIA,

County of *Wt.*

PERSONALLY COMES MRS.

Jennie Johnson
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 *all her life*. That she is the Widow of
A. Johnson who was a soldier in Company
of the *Wt. Regt.* Regiment of *7th*
Volunteers, that he enlisted in said regiment on about the month of
190 *2* and served in the Army up to *April* 186 *5*. That he died
on the *1st* day of *November* 18 *93*

Jennie Johnson *deponent* *cannot*
support herself

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 *50*

I have been allowed an Indigent pension as a resident of *Wt. Co.*
County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the
year ending December 31, 1903.

Sworn to and subscribed before me,
this *1st* day of *January* 1903.
John A. Burt Ordinary.

State of Georgia,

County.

I, *John A. Burt* Ordinary of said County, certify that I am well
acquainted with Mrs. *Jennie Johnson* who made the above affidavit and
am satisfied that the facts therein stated are true, and I know she is the individual who represents
herself to be, and that she has continuously resided in this State since the *1850*
day of *January* *1850*

Given under my official signature and seal, this *14* day of *January* 1903.

Official
Seal.

Ordinary of *Wt.* County.

NOTE. - All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1903.

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb COUNTY.

I, Jennie Johnson
John Anthony of

hereby authorize

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 21

day of June 1904

Jennie Johnson

[L. S.]

Executed in presence of

J. M. K. Ann

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb COUNTY.

I, Jennie Johnson
John Anthony of

hereby authorize

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 6

day of July 1905.

Jennie Johnson [L. S.]

Executed in presence of

J. M. K. Ann

TO THOSE HERETOFORE PAID.

1904.

INDIGENT
 WIDOW'S PENSION

FOR YEAR ENDING DECEMBER 31, 1904

PAID TO

Jennie Johnson

Cobb County.

Widow of John A. Johnson
E. Cobb

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT ISSUED

JAN 25 1904.

AND HANDED TO

E. Cobb

JOHN W. LINDSEY, SECRETARY

To Those Heretofore Paid.

1905.

No. 236

INDIGENT
 WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO

Jennie Johnson

Cobb County.

Widow of

Co. _____ Regiment _____

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

JAN 23 1905.

AND HANDED TO

E. Cobb

JOHN W. LINDSEY, SECRETARY

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 2.

STATE OF GEORGIA.

PERSONALLY COMES MRS.

County of 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 1893. That she is the Widow of

John A. Johnson who was a soldier in Company

of the Cobb Legion Regiment of

Volunteers, that he enlisted in said regiment on or about the month of

1892 and served in the Army up to April 1893. That he died

on the 2 day of Nov 1893

Evening to age Infirmary & present

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 1893

I have been allowed an Indigent pension as a resident of Cobb County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 31, 1904

Sworn to and subscribed before me, this 21 day of Jan 1904 John A. Johnson Ordinary Post Office

State of Georgia, Cobb County.

Ordinary of said County, certify that I am well acquainted with Mrs. Jennie Johnson, 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 21 day of Jan 1904.

John A. Johnson Ordinary of Cobb County

NOTE.—All blanks must be filled. Vouchers and Affidavits must bear date after January 1st, 1904.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 2.

STATE OF GEORGIA.

PERSONALLY COMES MRS.

County of 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 1893. That she is the Widow of

John A. Johnson who was a soldier in Company

of the Cobb Legion Regiment of

Volunteers, that he enlisted in said regiment on or about the month of

1892 and served in the Army up to 1893. That he died on

the 2 day of Nov 1893

Age and poor

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 1893

I have been allowed an Indigent pension as a resident of Cobb County, under Act 1900, for the year 1904, and now apply for the pension provided by law for the year ending December 31, 1905

Sworn to and subscribed before me, this 21 day of Jan 1905 John A. Johnson Ordinary Post Office

State of Georgia, Cobb County.

Ordinary of said County, certify that I am well acquainted with Mrs. Jennie Johnson, 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 21 day of Jan 1905.

John A. Johnson Ordinary of Cobb County

NOTE.—All blanks must be filled. Vouchers and Affidavits must bear date after January 1st, 1905.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, Jennie Johnson hereby authorize
John H. H. H. of Marion, Ga.
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 70

day of January 1906.

Jennie Johnson [L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, Jennie Johnson hereby authorize
John H. H. H. 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 8

day of January 1907.

Jennie Johnson [L. S.]

Executed in presence of

To Those Heretofore Paid

1906.

No. 204

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1906.

PAID TO
Mrs. Jennie Johnson

County

Widow of John H. H.

Co. H. 1st Regiment.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1/22 1906,

AND HANDED TO

any

THE PRINCIPAL AND OTHERS AND PERSONS AS STATED IN

Johnson, Jennie,
Cobb County
To Those Heretofore Paid

1907.

No. 204

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1907.

PAID TO

Mrs. Jennie Johnson

County

Widow of John H. H.

Co. A. 1st Regiment.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1/23 1907,

AND HANDED TO

ONE W. LINDSEY, STATE TREASURER, ATLANTA.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES MRS.

Jennie Johnsonwho, 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

John S. Johnson
of the 1st Regiment of

who was a soldier in Company

Volunteers, that he enlisted in said regiment on or about the month of

186____, and served in the Army up to 188____ That he died on

the ____ day of 18____

Age & Family

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18____

I have been allowed an Indigent pension as a resident of Cobb

County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1906.

Sworn to and subscribed before me

this 19 day of Jan 1906.

Ordinary.

Jennie Johnson

Post Office

State of Georgia,

County of CobbI, John Hurley

Ordinary of said County, certify that I am well

acquainted with Mrs. Jennie Johnson, 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 1day of Jan 1894.Given under my official signature and seal, this 20 day of Jan 1906.Ordinary of Cobb County.Official
SealNOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1906.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Cobb

PERSONALLY COMES MRS.

Jennie Johnsonwho, 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

John A. Johnson
of the Phillips Legion Regiment of

who was a soldier in Company

Volunteers, that he enlisted in said regiment on or about the month of

186____, and served in the Army up to 188____ That he died on

the ____ day of 18____

Age & Family

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18____

I have been allowed an Indigent pension as a resident of Cobb

County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me

this 8 day of Jan 1907.

Ordinary.

Jennie Johnson

Post Office

State of Georgia,

County of CobbI, John Hurley

Ordinary of said County, certify that I am well

acquainted with Mrs. Jennie Johnson, 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 8 day of Jan 1907.Official
SealOrdinary of Cobb County.NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1907.

I, John P. Hadden of Jefferson County, Missouri,
John P. Hadden Clerk of said County, do hereby authorize
John P. Hadden of said County, to receive and receipt for the person allowed and require that he remit same to
John P. Hadden at his office in said County, Missouri,
14th day of May, 1904.
John P. Hadden [L. S.]
 Witness my hand and seal, this _____ day of _____, 1904.
 Executed in presence of _____

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

COCK COUNTY.

Personally came before me John H. Humphreys and W. C. Humphreys, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully John H. Humphreys applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

Severe facial paralysis on right side and partial paralysis of lower extremities with general debility, with some nerve pain.

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 14th day of July, 1907, at W. C. Humphreys Mt. Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, County of Cock, this 14th day of July, 1907.

John H. Humphreys Ordinary of Cock County.

NOTE.

1. Before any petition is 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. All internal affidavits may be taken and 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.

COCK COUNTY. I, John H. Humphreys, Ordinary in and for said County, hereby certify that John H. Humphreys resides in said County, and has been a bona fide resident of this State since the 14th day of July, 1907, and that the witnesses, viz: W. C. Humphreys and John H. Humphreys 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 has taken the oath herein prescribed, and that the full text of the affidavits was read to the applicant and witnesses before same was signed.

I further certify that the tax digest of John H. Humphreys returned for taxation in his name for 1906 of property, and to John H. Humphreys Dollars of

Questions for Applicant.

STATE OF GEORGIA,

COCK County.

I, John H. Humphreys 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) My name is John H. Humphreys and I reside in Cock County, Georgia.
2. How long and since when have you been a resident of this State? I was born in Georgia and have lived here ever since being about 16 years of age.
3. When and where were you born? I was born in Summit County, Georgia, March 17th, 1867.
4. When and where and in what company and regiment did you enlist or serve? I enlisted in the 1st Georgia Infantry Regiment in Company #1, March 17th, 1867.
5. How long did you remain in such company and regiment? About two years then I was sent to the Hospital afterwards joined Gen. Wm. L. Roberts' Command.
6. When and where was your company and regiment surrendered and discharged? discharged on May 12, 1869 at Hampton Va.
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? not more than half of a support
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"? Age & poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? about five years

13. What property, real or personal, or income do you possess, and its gross value? one cow and two pigs worth twenty five dollars
14. What property, real or personal, did you possess in 1864, 1865, 1866, 1867, 1868 and 1869? what disposition, if any, by sale or gift, have you made of same? I had some land and sold it in 1869 to get something to live on. The land was Mountain land in Macon County. I got only \$50 for it.
15. In what County did you reside during those years, and what property did you then return for taxation? I lived in Gilmer County till 1867, then I moved to Cock County and lived there till 1869.
16. How were you supported during the years 1865 and 1866? by my family and one minor child
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? It did not cost much and I worked some
18. What was your employment during 1867 and 1868? What pay did you receive in each year? I worked on rented land
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? I have a wife and one child under 20 and have no homestead

Sworn to and subscribed before me this 14th day of July, 1907, at W. C. Humphreys Mt. Ordinary, John H. Humphreys Applicant, Cock County.

Every Question MUST be Answered

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Cobb COUNTY,

Orlando A. Harty
of said State and County, having been presented
as a witness in support of the application of *Jesse J. Johnson* for pension
under Section 1254, Code, and after being duly sworn true answers to make to the following questions,
deposes and answers as follows:

1. What is your name and where do you reside? *Orlando A. Harty, Reside in Acworth, Ga.*
2. Are you acquainted with *Jesse J. Johnson*, the applicant; if so, how long have you known him? *About four years.*
3. Where does he reside, and how long and since when has he been a resident of this State?
He resides in Cobb County, near Acworth, Ga.
4. When, where and in what company and regiment did he enlist, and how do you know?
I don't know anything in this.
5. Were you a member of the same company and regiment? *No.*
6. How long did he perform regular military duty? *I don't know.*
7. When and where was his command surrendered? *I don't know.*
8. Were you present when it surrendered? *No.*
9. Was applicant present? *I don't know.*
10. If he was not present, where was he?
When did he leave his command? *For what cause?*
By what authority he left? *I don't know.* How do you know all of this?

11. What property, effects or income has the applicant? (Give your means of knowledge).
Little or no income. Have had intimate conversation in 4 years.
12. What property, effects or income did the applicant possess in 1896, 1897, 1898 and 1899, and what disposition, if any, did he make of same? *Has had none to my knowledge except *Capt. Monroe* who *lives in the mountains* and *will be* *is above stated, don't know to whom**
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom?
a little - 20 old and no more.
14. What is the applicant's occupation and physical condition? *Laborer on farm.*

15. Is the applicant unable to support himself by labor of any sort, if so, why? *I would not consider him able to make support, because of *infirmity* and *helped by children*.*
16. How was he supported during the years 1898 and 1899? *Partly by his own labor,*

17. What portion of his support for these two years was derived from his own labor or income?
Could not tell, but think possibly 1/3 & 1/4.

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 65 to 70 yrs. - and not as strong as his age - and seems to be more or less paralyzed.*

19. What interest have you in the recovery of a pension by this applicant? *No interest.*

Sworn to and subscribed before me, this

day of *July*, 1900.
John A. Harty

Orlando A. Harty
Ordinary.

Witness.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
 Wilkes COUNTY.

Piney Davis of said State and County, having been presented as a witness in support of the application of James I. Johnson 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? Piney Davis
Wilkes Co. Ga.
2. Are you acquainted with James I. Johnson, the applicant; if so, how long have you known him? For more than forty years
3. Where does he reside, and how long and since when has he been a resident of this State?
In Cobb Co. Ga. for more than forty years since before 1860.
4. When, where and in what company and regiment did he enlist, and how do you know?
In Meigs Co. Ga. in Co. H. 11th Regt. Ga. Infy. - I was with him.
5. Were you a member of the same company and regiment? Yes.
6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? Were you present with command when discharged? About two years in said Co. 11th Regt. He made a good soldier. He was discharged by order at Hampton Ga. at General Sherman's I was present at time of his discharge from service. At the time of surrender he was in command of Co. H. 11th Regt. Ga. Infy.
7. What property, effects or income has the applicant? (Give your means of knowledge.)
Do not know.
8. What property, effects or income did the applicant possess in 1896, 1897, 1898 and 1899, and what disposition, if any, did he make of same? Do not know.
9. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom?
Do not know.
10. What is the applicant's occupation and physical condition? He was a farmer when able to work. From his present personal appearance he seems to be paralyzed.
11. Is the applicant unable to support himself by labor of any sort, if so, why?
Having known him formerly, and seeing him now, I do not think he is able to support himself at any sort of labor. I speak from his appearance and condition.
12. How was he supported during the years 1898 and 1899?
Do not know.
13. What portion of his support for these two years was derived from his own labor or income?
Do not know.
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? I could not, and can readily see that he is paralyzed and generally broken down, but I am not a physician.
15. What interest have you in the recovery of a pension by this applicant? None.

Sworn to and subscribed before me, this 5th day of July, 1900.
J. C. Allen Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
 Wilkes 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:

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 the _____ day of _____, 1900.
 _____ Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
 Wilkes COUNTY.

I, J. C. Allen, 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 _____, 1899, and that the witness, viz: Piney Davis, 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 applicant and each witness took the oath herein prescribed, and that the full text of the affidavit was read to the applicant and witness before same was signed.

I further certify that the tax of _____ County show that applicant returned for taxation in his name in 1898 _____ Dollars of property, and in 1899 _____ Dollars of property.

In my opinion the foregoing claim is _____ made in good faith.
 Witness my hand and seal of office, this 5th day of February, 1900.
J. C. Allen Ordinary,
 of Wilkes 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.

Amendment -

Georgia Bartow County.
Personally came before me, W. F. Matthews of said County, who on oath says that he knew Jesse J. Johnson in the Army and has known him ever since that he originally belonged to Company "I" of the 1st Georgia Regiment; that he was at home in Furbergh in the year 1864, and after his furbergh expired, he could not get transportation to his old Command and was attached to 1st Command of Gen. W. F. Wofford under and by virtue of an order from Governor Brown, in which Command he arrived at May 19th 1865, when Wofford's Command was disbanded. The said Johnson was a true loyal soldier and a good one.

Given to and subscribed before me, Dec 24-1902 } W. F. Matthews
G. W. Hendricks
Ordinary Bartow Co Ga

I certify that W. F. Matthews is a man of trustworthy character and that I read the foregoing affidavit to him before he signed the same.

G. W. Hendricks
Ordinary Bartow Co

Georgia Tilton County.

Personally came before the undersigned, Ordinary John L. Storer who on oath says:

I was in the same Co and Regt in Wofford's Command, in Capt. Clout's Co and Ralston Bat. with J. J. Johnson, and surrendered with him at Kingston Ga, May 12 1865. He was my neighbor and fellow soldier and the above is true to the best of my knowledge and recollection. He was with me about 5 months next to the surrender. I am a State Examiner sworn to and subscribe before me. C. I. Storer
Nov. Oct 10 1911
J. N. Storer
Ordinary

Georgia Tilton County.

I, J. L. John Ordinary of said County do certify that J. L. Storer who signed the above affidavit is a citizen of State of Georgia, residing in said County and that his statements are worthy of full faith and credit.

Witness my official signature and seal of Office. This Oct 10 1911

Jno. M. Lindsey
Commissioner of Pensions
Atlanta, Ga.

Good in file of 11 1/2
Infantry C.S.A. on A.F. & give
my the Record of one Jesse J. Johnson
I support in record of
L. Johnson

Sept 25, 1862. L. Johnson
L. Johnson

No response has been made to the
Charge of Desertion by Mrs. Jesse J. Johnson
and to appear from the Record of the
10th Infantry. that this man deserted
December 1, 1862.

It is ordered that the name
of Jesse J. Johnson be struck from the
Prisoner Roll of Roanoke County for
Desertion

W. L. Lindsey,
Chief of Pensions

OF

GEORGIA

T. H. TABOR, Ordinary

Ellistav, Ga.

Oct 20 1911

Judge John C. Hart
Dear Judge:

I send you the affidavit to John L. Stover to assist you in getting the pension of J. J. Johnson. I enclose these things:

- 1st Release Certificate was not numbered.
- 2d The Co. was probably not located but known only by the Captains name.
- 3d All soldiers north of the Chattahoochee River were ordered to go in under that Hafford who surrendered at Vicksburg, May 15, 1863.

If the Co. was located you can get the letter of the Co. letter from the State Pension Commission record. It is the same as that of the return - John L. Stover a pensioner.

Yours truly,
J. H. Tabor
Ord.

Leath County
1914

Ex Parte
Alonso

AS
Jesse J. Johnson
Sgt. 1st Reg. Co. Co

Chgo. District

Adm. & May
20-1914

Chgo. District
11-12-1914
Ord. & Stover for
Dis. & Stover for
Ord. & Stover for
Ord. & Stover for

Jno. W. Lindsey,
Commissioner of Pensions,
Atlanta, Ga.

PENSION OFFICE

April 30 1904

To Jesse J. Johnson
L. G. Burns Cott Co Ga.

SIR

You are hereby notified to furnish to this office on or by the 30
day of May 1904, sufficient competent evidence, why you should
not be stricken from the Pension Roll of
County, for cause stated below, preferred against you

of De Kalb County

This evidence must be first-class, made before Ordinary of your County, clearly
and distinct, showing, beyond doubt, your right to this Pension under the law

The Charge is

That you deserted

Dec. 10, 1864

W. T. Lacy
Cous of Burns

State of Alabama,

County of Lawrence.

Before me, an officer of said State, duly authorized by
law to administer oaths, comes Mrs. Mary Jane Centrell, who, after
being duly sworn, deposes and says:

That she is the sister of Jesse J. Johnson, East Point,
Georgia, and was at their home in Gilmer County when said brother
returned there from the Army and nursed him while he was sick there;

That said Jesse J. Johnson returned home about December,
1863, having been granted a furlough from the Army on account of
a severe case of chronic chills and fever; that he remained there
until about August, 1864, when he joined Wofford's command, in which
he served until the close of the War;

That from the time said Jesse J. Johnson returned home until
he enlisted in Wofford's command he was unable at any time to have
made the trip back to Virginia to rejoin his command, and that he was
during that period ~~unable~~ physically unable to have performed military
duty;

That deponent remembers the condition of said Jesse J.
Johnson and swears, without reservation, that he was really and truly
unable to return to his command in Virginia as stated;

That the duties assigned to said Jesse J. Johnson, in
Wofford's command were extremely light and consisted of home guard
service in Millijay, Morgantown and Blue Ridge;

That this affidavit is made for the purpose of being submitted
to the Commissioner of Pensions of the State of Georgia.

agent
Frieda Shivers
Lydia Perryhill.
Sworn to and subscribed before me,
this the 18 day of Feb., 1904.

Mary Jane Centrell
her mark

J. A. Kump
Judge of Probate

Amendment for No 2

George } Personally, since before me Jessie
Cobb Buntz } Johnson who on oath says in
addition to his former affidavit
that after his furlough from hospital expired
he reported to Sergeant Young at Ettey a an
officers Stationed there to furnish transportation
to all soldiers in that section who wanted
to return to their Commands. This was in May
1864. The Transportation lines having been cut
Sergeant Young could not give said transportation
Governor Brown having issued a
general order that all soldiers at home
on furlough or otherwise able for duty
should be assigned to General Woffords
Command to aid in the defense of
Georgia, and when I reported I was
assigned to Woffords Command
under said Order and was sum-
moned with the same on the 12th of May
1865 at Kingston Ga. a
sworn to and ^{his} Jessie Johnson
Subscribed before ^{subscr}

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State of Georgia,
County of Fulton.

Before me, an officer of said State, duly authorized by law to administer oaths, comes Jesse J. Johnson, who, after being duly sworn, deposes, and says:

That he was enlisted in Company F, 11th Ga. Regiment, February 25, 1862 and served with said Company and Regiment until December 1863, when he was granted a furlough on account of sickness, furlough being granted at Atlanta for him to return home in Gilmer County, Ga.;

That he went home suffering with a severe case of chronic chills and fever from which he did not recover within the thirty days, and that his furlough was extended from month to month by Sergeant Young, who was stationed at Eliijay and authorized to extend sick furloughs;

That he was not able to perform military duty, or return to his original command, on account of said physical disability;

That about August 1864, though still too feeble to make the trip back to his original command, he enlisted in Captain Clont's Company, Raiston's Battalion, General Wofford's Command, to do home guard duty in the vicinity of Ellijay, Morgantown and Blue Ridge, and that he remained with said Company until May 1865;

That this affidavit is made to be filed in the Pension Office of the State of Georgia, for the purpose of authorizing the Commissioner of Pensions to reinstate dependent on the pension rolls of said State, from which he was stricken in 1914 on the charge of desertion; the showing of desertion having come about through dependent's inability to return to his original command, leaving no evidence that he did not wilfully and without furlough.

That this affidavit is made by a man 86 years of age, and with full knowledge that he cannot live many years longer.

Sworn to and subscribed before me,
this the 23 day of June, 1928.

A. L. Humphreys
Military Public Relation
County, Georgia

Permission offered
July 21-1922

by Paris

Apprentice to the Restaurant

Dear John, I have to the Power your Potham

This matter, has been continued
for Tuesday -

Handwritten: The first volume of the series

It was to have appeared
but was not. was not signed
A Charles Brown. ~~Wm. L. Brown~~
Super. the Commission of the

[illegible]

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POWER OF ATTORNEY,

STATE OF GEORGIA.

(County)

Know all Men by these Presents, That I,

Marta A. Johnson
Widow of
Samuel A. Johnson
of Cobb County, Ga.

do hereby appoint
Samuel A. Johnson

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 *April*, 1891.

Executed in the presence of us:
Marta A. Johnson
Widow

John H. Stewart
Notary Public

DIRECTIONS.

If allowed, send amount by

me at

, and oblige.

to



Johnson Martha A.
Cobb County
422 1891.
To Milton L. 1893
 No. 2051

Widows' Pension

— PAID TO —

Mrs. Martha A. Johnson

— 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,

County in said State, do hereby appoint

Rosmel G.

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 *24* day of *April* 1891

Executed in the presence of us

J. B. Remick
Wm. Stow
Ordery

DIRECTIONS.

If allowed, send amount by

me at

, and oblige.



Widows' Pension

PAID TO—

Martha A. Johnson

OF

Cobb

COUNTY.

\$100.00.

Warrant Issued

1891

AND HANDED TO

Wm. Stow

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA.

County of *Cobb*

In person come before me, the undersigned Ordinary

in and for the County of *Cobb*

Mrs. *Martha A. Johnson*, who being sworn according to law, says under oath that she is the widow of *Wm. G. Johnson*, who was a soldier in the service of the Confederate States, and served as a member of Company *G*, of the

24 *Twenty-fourth* Regiment of *Confederate* Volunteers; that he enlisted in said service on or about the *30th* day of *April* 1861, and was in the *Eastern* Army up to *July* 1862. That while in the Army, he was on the *day of* 1861, (See Note No. 1)

He was wounded at the 2nd and Battle of Manassas in the State of Virginia and carried to Richmond, Va. and died. I further swear that *W. G. Johnson* has never been heard from since directly after the second Battle of Manassas, and has never returned home since the war and further swears that she arrived in Richmond, Virginia, the day after *W. G. Johnson* was buried, and brought his clothes back home with her.

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 *8th* day of *January* 1859, and that she has resided in Georgia continuously since the *7th* day of *August* 1835; 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, 1891, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this, the

24th day of *April* 1891.

Ordinary.

Martha A. Johnson

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.

Johnson Martha A.
Cobb County

42 1891

20 March 1891

210.0051

Affidavit for Three Witnesses.

Form No. 2.

STATE OF GEORGIA,

In person came before me, the undersigned Ordinary
County of *Barlow* in and for said County, witnesses *Col. R. H. Jones, W. R. Mountcastle Jr*
and *Thomas Johnson* (each known to said Attesting Officer as truthful, reliable and reputable citizens, who severally say under oath, that, from their own personal knowledge, Mrs. *Martha A. Johnson*, of the County of *Cobb* State of Georgia, is the widow of *W. G. Johnson*, who was a soldier in Company *G* of the *22nd* Regiment of *Volunteers*. That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the *30* day of *August* 186*4*. That while in said service, or by reason of said service in the Army, he lost his life as follows: *He was mortally wounded in the second battle of Manassas on the 30th day of August in the State of Virginia, that he was placed in the hospital at Richmond where he died from said wound. Col. R. H. Jones was Colonel in command of the 22nd Regiment and was in this battle. The said W. G. Johnson was second lieutenant and serving at his post when he was shot.*

W. R. Mountcastle was a private in the same Company, G, 22nd Regiment, with W. G. Johnson, that he voted for the said W. G. Johnson when he was elected 2nd Lieutenant in said Company.

Thomas Johnson did not see W. G. Johnson wounded but knows that he was reported as being mortally wounded and was some afterwards reported dead. (Authentically)

We further swear that Mrs. *Martha A. Johnson* 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.

Saw and subscribed before me, this, the *28th* day of *April* 18*91*.
Chas. H. Hendricks
Ordinary.

*R. H. Jones Col. 22nd Regt.
W. R. Mountcastle Jr
Thomas Johnson*

OFFICE OF
ORDINARY

Barlow County

G. W. HENDRICKS, ORDINARY

Cartersville, Ga. -

45

Georgia *I, George W. Hendricks Ordinary*
Barlow County *3* of said Barlow County hereby
certify that *Col. R. H. Jones, W. R. Mountcastle Jr.*
and *Thomas Johnson*, the witnesses in Mrs. *Martha A. Johnson's* claim, are known to me to be
truthful witnesses, entitled to full faith and
credit as such.

Given under my hand and seal of office
this *April 28th* 18*91*.

Chas. H. Hendricks
Ordinary Barlow Co. Ga.

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.