COUNTY

Kelley, J. H.

1890.

DeKalb Co.

No. 893

APPLICATION FOR ALLOWANCE.

FOR

Foot Disabled

Applicant, J. H. Kelly

County, DeKalb

Amount, $ 72

Date of warrant, Feb. 11

Entered on record

Feb. 11 1890

W. H. H.

SECRETARY EXECUTIVE DEPARTMENT.

WARRANT HANDED TO

W. L. Eggard

NOTES.

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

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

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

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

4. If 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.

5. 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.

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

7. No payments can be made for any past year.

W. H. HARRISON,
Clerk Ex. Dept.

Amount, $25 Feb 11

Date of warrant, Feb 11

Entered on record

Feb 11 1890

W H H

SECRETARY EXECUTIVE DEPARTMENT.

WARRANT HANDED TO

W. L. Eggard

...ants, and to enable all parties interested
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...the following suggestions are submitted:
...scription of the wound should be carefully
...d followed by a plain statement of facts
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...f the disease should be given, tracing the
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...to.
...Ordinary of the county of the residence
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...e specially requested to call the attention
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W. H. HARRISON,
Clerk Ex. Dept.

...ES.

NOTES.

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6. The Ordinaries of the several counties are specially requested to call the attention of the physicians and applicants to these points.
7. No payments can be made for any past year.

W. H. HARRISON,
Clerk Ex. Dept.

Feb 11, '90.

1890.

Dekalb Co.

No. 895

APPLICATION FOR ALLOWANCE.

For J. K. Kelley

Applicant, Private

County, Dekalb

Amount, $25 Feb 11

Date of warrant,

Entered on record

Feb 11 1890

W H H

SECRETARY EXECUTIVE DEPARTMENT.

WARRANT HANDED TO

W. L. Eggard

For Use of Applicants Who Have not Heretofore Drawn.

STATE OF GEORGIA,
De Kalb County.

PERSONALLY appears J. K. Kelley of De Kalb 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 continuously since the 22nd day of Sept 1830; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company D, of 42 th Regiment of Ga Volunteers Stovalls Brigade; that whilst engaged in such military service, at the battle of Bennetts Bridge in the State of S. C, on the 29th day of Feb 1865 he was wounded as follows: Shot through the right foot ball entering on the inside of the ball and coming out under side of middle toe. Causing a loss of the toe from foot, and drawing of the toe permanently & incapacitating the foot, and leg. So that it renders the use of a stick and at times crutches necessary.

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year thereunder ending October 26, 1890.

Sworn to and subscribed before me, this the 6th day of Feb 1890 — J. K. Kelley

W. M. Cossedale 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.

Commissioned Officer's Affidavit.

STATE OF GEORGIA,
De Kalb County.

PERSONALLY came before me J. H. H. Burgess, of the county of De Kalb State of Georgia, who, being duly sworn, says that he was a commissioned officer in Company D, of 42th Regiment of Ga Volunteers, and that deponent knows J. K. Kelley, and that he received the wounds (or contracted the disease) in the military service, as stated in his foregoing affidavit, and that wounds (or disease) permanently disables the said J. K. Kelley as stated by him in said affidavit. Deponent further states that said J. K. Kelley is a *bona fide* citizen of this State and resides in De Kalb county.

Sworn to and subscribed before me this 6th day of Feb 1890 — J. H. H. Burgess

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

W. M. Cossedale Ordinary.
De Kalb County.

1890.

DeKalb Co.

No. 903

APPLICATION FOR ALLOWANCE.

Pvt. Co. D 42nd Ga. Vols.

Applicant, J. H. Kelly

County, DeKalb

Amount, $ 50.00

Date of warrant, Feb 11 1890

Entered on record Feb 11 1890

Secretary Executive Department.

Warrant handed to W. H. Ragsdale

necessary.

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year thereunder ending October 26, 1890.

Sworn to and subscribed before me, this the 6th day of Feb 1890 — J. H. Kelley

W. M. Ragsdale, 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.

Commissioned Officer's Affidavit.

STATE OF GEORGIA,

De Kalb County.

PERSONALLY came before me H. H. Burgess, of the county of De Kalb State of Georgia, who, being duly sworn, says that he was a commissioned officer in Company D, of 42 nd Regiment of Ga Volunteers and that deponent knows J. H. Kelley, and that he received the wounds (or contracted the disease) in the military service, as stated in his foregoing affidavit, and that wounds (or disease) permanently disables the said J. H. Kelley as stated by him in said affidavit. Deponent further states that said J. H. Kelley is a *bona fide* citizen of this State and resides in De Kalb county.

Sworn to and subscribed before me this 6th day of Feb 1890 — H. H. Burgess

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

W. M. Ragsdale, Ordinary.
De Kalb County.

STATE OF GEORGIA,

County.

PERSONALLY came

citizens of county, in said State, who, being duly sworn, say that they are well acquainted with and *know, from having been with him in the army*, that he received the wounds (or contracted the disease) in the military service, as stated by him in the foregoing affidavit; that said wounds (or disease) permanently disable applicant, as stated by him; the said applicant is a *bona fide* citizen of this State, and resides in county, and we are well satisfied that all the statements in his affidavit are true.

Sworn to and subscribed before me, this day of 189

NOTE.—Above affidavit *must* be made by three citizens who *personally* know of the service of applicant and can state of their own knowledge precisely how he is *disabled*, and what disables him.

NOTE 2.—The attesting officer must see that each witness reads, or has *read to him the affidavit he signs.*

STATE OF GEORGIA,

DeKalb County.

PERSONALLY comes before me Thos C Avery Ordinary of said county, Thos C Avery and , both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined M. J. H. Kelley and after such examination say that the applicant has been injured as follows: 1st by a Gun Shot wound in right foot the ball entering at Posterior and inner aspect of Os Calcis passing entirely through the length of right foot and making its exit on the Under surface of Middle toe of same. Destroying ligaments bone &c and causing the removal of Meta tarsal bone of the Middle toe of said foot. The destruction of attachment of the ligaments & tendons which are in continuation of the muscles of the leg above is such that the power of motion in foot & ankle which is provided over by the aforesaid muscles ligaments tendons &c is lost thereby not only the foot but the right leg is rendered substantially & essentially useless forever

Sworn to and subscribed before me, this 6th day of Feb 1890 — T. C. Avery M.D. S. C. Hitchcock M.D.

W. M. Ragsdale, 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,

De Kalb County.

I, W. M. Ragsdale Ordinary of said county, do certify that I am well acquainted with J. H. Kelley the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, *and he is disabled, as he claims*, and I know he is the individual he represents himself to be, and that he resides in this county. I also certify that the foregoing witnesses, are persons of respectability, and that their statements are worthy of full credit and belief.

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

Given under my official signature and seal, this 6th day of Feb 1890.

W. M. Ragsdale.

Ordinary. County.

POWER OF ATTORNEY.

STATE OF GEORGIA

County.

KNOW ALL MEN BY THESE PRESENTS, That I, James H Kelly of DeKalb county, in said State, do hereby appoint Jno L Egan and of Atlanta Fulton Co Ga 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 eleventh 11th day of February 1890

Executed in the presence of us: J. H. Kelley [L. S.]

M. F. Hughes
J. W. McGee N. P. Fulton Co Ga

DIRECTION.

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

STATE OF GEORGIA,
DeKalb County.

PERSONALLY comes before me W M Ragsdale Ordinary of said county, Thos C Cleary and , both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined Mr J H Kelley and after such examination say that the applicant has been injured as follows: By a Gun Shot wound in right foot the ball entering at Posterior and inner aspect of Os Calcis passing entirely through the length of right foot and making its exit on the under surface of middle toe of same. Destroying ligaments bone &c and causing the removal of Meta tarsal bone of the Middle toe of said foot. The Destruction of attachment of the ligaments & tendons which are the Continuation of the Muscles of the leg above is such that the power of motion in foot & ankle which is possessed over by the aforesaid muscles ligaments tendons &c is lost therefore not only the foot but the right leg is rendered substantially & essentially useless forever

Sworn to and subscribed before me, this 9th day of Feb 1891 — Thos C Cleary MD; S C Hitchcock M D

W M Ragsdale, — 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
County.

KNOW ALL MEN BY THESE PRESENTS, That I, James H Kelley of DeKalb county, in said State, do hereby appoint Wm L Eggard of Atlanta Fulton Co Ga 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 Eleventh 11th day of February 1890

J H Kelley [L. S.]

Executed in the presence of us:

W M Ragsdale
J. M. McGee N. P. Fulton Co Ga.

DIRECTION.

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

STATE OF GEORGIA,
De Kalb County.

I, W M Ragsdale Ordinary of said County, do certify that I am well acquainted with J H Kelley 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 9th day of Feb 1891.

W M Ragsdale
Ordinary De Kalb. County

STATE OF GEORGIA,
De Kalb County.

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

Given under my official signature and seal, this 20th day of March 1892.

W M Ragsdale
Ordinary De Kalb County.

Kelley, J. H. Co E

1891.

Kelley J. H.

PAID 1891, No

No. 1133

Application for Allowance

FOR THE YEAR ENDING OCTOBER 20, 1891.

Applicant, J H Kelley
County, DeKalb
Amount, $ 24.00
Date of Warrant, Feb 10 1891
Entered on record, Feb 10 1891
W M W
SECRETARY EXECUTIVE DEPARTMENT.

WARRANT DRAWN TO
Geo. W. Harrison, State Printer, Atlanta, Ga.

Kelley, J. H. Co E

No. 1133

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 20, 1892.

Name J H Kelley
County DeKalb
Disability Foot &c
Amount, $ 24
Entered on record Sept 3 1892.

W. H. HARRISON,
Secretary of Executive Department.

AGENT.

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

Kelley J. H. Co
Kelley J. H.
Pd. 1891, Nov
1891.

No. 1733

Application for Allowance

FOR THE YEAR ENDING OCTOBER 26, 1891.

J. H. Kelley
Applicant.
DeKalb
County.
25.10
Amount.
Dec 10 1891.
Date of Warrant.
Dec 10 1891.
Entered on record.
W. H. H.
SECRETARY EXECUTIVE DEPARTMENT.

WARRANT HANDED TO
Wm. H. Harrison, State Printer, Atlanta, Ga.

DeKalb Co
Kelley J. H.
Pd. Aug

SOLDIERS' PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 26, 1892.

Name J. H. Kelley
County DeKalb
Disability 22
Amount, $ 25
Entered on record Dec 13 1892.

W. H. HARRISON,
Secretary of Executive Department.

AGENT.
J. H. Kelley

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
DeKalb County.

PERSONALLY appears J. H. Kelley of DeKalb 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 22 day of Sept 1890; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company D, of 42 th Regiment of Ga Volunteers Stovall 's Brigade; that whilst engaged in such military service at the battle of Benikers Bridge in the State of S.C., on the 9th day of Feb 1865, he was wounded as follows: Shot in right foot fracturing bones for which hand causing permanent wound.

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 Twenty five dollars, for

Sworn to and subscribed before me, this, the 9th day of Feb 1891. J. H. Kelley.
W. M. Reynolds, Ordinary.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
_____ County.

Know all Men by these Presents, That I, of _____ County, State of Georgia, do hereby appoint of _____ my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of 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 _____ 1891.

_____ [L. S.]

Executed in the presence of us:

_____

DIRECTION.

Send money to me as follows, by _____ to _____ P. O. _____ County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
DeKalb County.

PERSONALLY appears J. H. Kelley of DeKalb 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 22 day of Sept 1890; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company D, of 42 th Regiment of Ga Volunteers Stovall 's Brigade; that whilst engaged in such military service at the battle of Benikers Bridge in the State of S.C., on the 9th day of Feb 1865, he was wounded as follows: Shot in right foot fracturing bones for which hand causing permanent wound.

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 Twenty five Dollars for Disabled foot.

Sworn to and subscribed before me this the 26th day of March 1892. J. H. Kelley.
W. M. Reynolds, Ordinary.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
_____ County.

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

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

[L. S.]

Executed in the presence of us:

DIRECTION.

Send money to me as follows, by _____ to _____ P. O. _____ County, Georgia.

9th day of Sept 1891.

Wm Mogsdale, Ordinary.

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

POWER OF ATTORNEY.

STATE OF GEORGIA, }
_____ *County.* }

Know all Men by these Presents, That I, _____

of _____ County, State of Georgia, do hereby appoint

of _____ my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of 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 _____ 1891.

_____ [L. S.]

Executed in the presence of us: }
_____ }
_____ }

DIRECTION.

Send money to me as follows, by _____

_____ to _____ P. O.

_____ County, Georgia.

_____ day of _____ 1892.

Wm Mogsdale, *Ordinary.*

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

POWER OF ATTORNEY.

STATE OF GEORGIA, }
_____ *County.* }

Know all Men by these Presents, That I, _____

of _____

County, in said State, do hereby appoint

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

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

_____ [L. S.]

Executed in the presence of us: }
_____ }
_____ }

DIRECTION.

Send money to me as follows, by _____

_____ to _____ P. O.

_____ County, Georgia.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
_____ *County.* }

Know all Men by these Presents, That I, _____

of _____ County, State of Georgia, do hereby appoint

of _____ my true and lawful attorney in fact, for me and in my name to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of 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 _____ 1893.

_____ [L. S.]

Executed in the presence of us: }
_____ }
_____ }

DIRECTION.

Send money to me as follows, by _____

_____ to _____ P. O.

_____ County, Georgia.

1893.

No. 807

Application for Allowance

For the Year Ending October 24, 1893.

POR

Applicant, Alexander Kelly

County, _____

Amount, 25 [illegible]

Date of Warrant, 3/18

Entered on record, 3/18 1893.

Secretary Executive Department.

WARRANT HANDED TO

Applicant

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
COUNTY. }

Know all Men by these Presents. That I, _____

of _____

County, State of Georgia, do hereby appoint

of _____ my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing me 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.

_____ [L. S.]

Executed in the presence of us }
_____ }
_____ }

DIRECTIONS.

Send money to me as follows, by _____

_____ to _____ P. O.

_____ County, Georgia.

S. H. Kelly J. H.

Kelly J. H.

(For Those Already Enrolled.)

No. 801

Soldier's Pension.

1894.

Name Kelly J. H.

County DeKalb

Disability Wound in foot

Amount, $ 25.00

1894.

W. H. HARRISON,

Secretary Executive Department.

WARRANT HANDED TO

Applicant

Geo. W. Harrison, State Printer, Atlanta

1893.

No. 807

Application for Allowance

For the Year Ending October 26, 1893.

FOR

Applicant, J. H. Kelley

County, De Kalb

Amount, $25 3/18

Date of Warrant, 3/18 1893.

Entered on record, Copy

WARRANT HANDED TO

Applicant

Secretary Executive Department.

Geo. W. Harrison, State Printer, Atlanta.

Kelley, J. H.

1894.

No. 801

Soldier's Pension.

1894.

(For Those Already Enrolled.)

Name Kelly J. H.

County De Kalb

Disability Wound in foot

Amount, $ 25 00

1894.

W. W. HARRISON,

Secretary Executive Department.

WARRANT HANDED TO

Applicant

Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

De Kalb County.

PERSONALLY appears J. H. Kelley of De Kalb 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 22nd day of Sept 1830; that he enlisted in the military service of the Confederate States (or of the State of Ga.) during the war between the States, and served as a Private in Company D, of 42 th Regiment of Ga Volunteers Stovall 's Brigade; that whilst engaged in such military service at the battle of Brushes Bridge in the State of S. C., on the 9th day of Sept 1863; he was wounded as follows: Shot with minnie balls through the right foot. fracturing the bones causing seperation and rendering the foot substantially and essentially useless

Deponent desires to praticipate 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 Twenty Five dollars, for

Sworn to and subscribed before me, this, the 15th day of March 1893.

J. H. Kelley

W. M. Ragsdale, Ordinary

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

STATE OF GEORGIA,

De Kalb County.

I, W. M. Ragsdale Ordinary of said County, do certify that I am well acquainted with J. H. Kelley 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 15th day of March 1893.

W. M. Ragsdale

Ordinary De Kalb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

De Kalb County.

PERSONALLY appears J. H. Kelley of De Kalb 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 22nd day of Sept 1830; 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 42 th Regiment of Ga Volunteers Henderson's Brigade; that whilst engaged in such military service at the battle of Benahers Bridge in the State of S. C. on the 9th day of Sept 1863 he was wounded as follows: Shot with minnie ball through the right foot so fracturing bones as to render the foot substantially and essentially useless.

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

Sworn to and subscribed before me, this, the 8th day of March 1894.

J. H. Kelley

W. M. Ragsdale, 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,

De Kalb County.

I, W. M. Ragsdale Ordinary of said County, do certify that I am well acquainted with J. H. Kelley the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1894.

All's paid seal here

W. M. Ragsdale

Ordinary De Kalb County.

15th day of March 1893. J.H. Kelly

M. McRogsdale Ordinary

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

STATE OF GEORGIA, }
De Kalb County. }

I, M. McRogsdale Ordinary of said County, do certify that I am well acquainted with J.H. Kelly 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 15th day of March 1893.

M. McRogsdale
Ordinary De Kalb County.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1891, 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 Twenty five dollars, for the year 1893.

Sworn to and subscribed before me, this, the 8th day of March 1894. J.H. Kelly

M. McRogsdale 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, }
De Kalb County. }

I, M. McRogsdale Ordinary of said County, do certify that I am well acquainted with J.H. Kelly the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1894.

Affix seal here

M. McRogsdale
Ordinary De Kalb County.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
County. }

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1895.

[L. S.]

Executed in presence of us

DIRECTIONS.

Send money to me as follows, by _____ to _____ P. O. _____ County, Georgia.

Kelly J. H. Co K 1st Ga Inf

(For Those Already Enrolled.)

No. 242

SOLDIER'S PENSION. 1895.

Name J.H. Kelly
County De Kalb
Disability 2nd Lieut
Amount, $ 25.00

1895.

RICHARD JOHNSON, Secretary Executive Department.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

De Kalb

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

Kelly J. H. Co K 1st Ga Inf

(For Those Already Enrolled.)

No. 409

SOLDIER'S PENSION. 1896.

Name J.H. Kelly
County De Kalb
Disability 2nd Lieut
Amount, $ 25.00

1896

RICHARD JOHNSON, Secretary Executive Department

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

De Kalb

Kelly J. H.
Co. K 5th Ga. Cav.

(For Those Already Enrolled.)

No. 2422

SOLDIER'S PENSION.

1895.

Name J. H. Kelly
County DeKalb
Disability Gun shot wound
Amount, $ 25 per 314 1895.

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO
Kelly

Geo. W. Harrison, State Printer, Atlanta.

Kelly J. H.
Co. K 5th Ga. Cav.

(For Those Already Enrolled.)

No. 409

SOLDIER'S PENSION.

1896.

Name J. H. Kelly
County DeKalb
Disability Gun shot wound
Amount, $ 25 per 314 1896.

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO
Kelly

Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
DeKalb County. }

Personally appears J. H. Kelly of DeKalb 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 22d day of Sept 18 70; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company D, of 42 Regiment of Ga Volunteers, Stovall's Brigade; that whilst engaged in such military service at the battle of Deveaux Bridge in the State of S.C., on the 9th day of Feb 1865, he was wounded as follows: Was shot with a minnie ball through the right foot at the Ball of Bendaker Bridge S.C. shattering the bones and cutting the tendons rendering same substantially and essentially useless

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

Sworn to and subscribed before me, this the 23rd day of Feb 1895. J. H. Kelly

Wm Rogsdale, 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, }
DeKalb County. }

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

Given under my official signature and seal, this 25th day of Feb, 1895.

Wm Rogsdale,
Ordinary DeKalb County.

Affix your seal here.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
DeKalb County. }

Personally appears J. H. Kelly of DeKalb 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 22d day of Sept 1870; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company D, of 42 Regiment of Ga Volunteers, Stovall's Brigade; that whilst engaged in such military service in the State of S.C., on the 9th day of Feb 1865, he was wounded, injured or diseased as follows: Was shot with a minnie ball through the right foot at the Ball of Bendakers Bridge S.C. shattering the bones and cutting the tendons rendering same substantially and essentially useless

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1896. I have heretofore as a resident of DeKalb county been allowed a pension of 25.00 dollars, for the year 1895.

Sworn to and subscribed before me, this the 24 day of Feb 1896. J. H. Kelly

Wm Rogsdale, Ordinary.

NOTE—State fully the nature 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, }
DeKalb County. }

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

Given under my official signature and seal, this 24th day of Feb 1896.

Wm Rogsdale

Affix your seal here.

Ordinary DeKalb County.

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 Twenty Five dollars, for the year 1894.

Sworn to and subscribed before me, this the 25th day of Feb 1895. J.H. Kelly

W.M. Rogsdale, 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, De Kalb County.

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

Given under my official signature and seal, this 25th day of Feb 1895.

Affix your seal here.

W.M. Rogsdale, Ordinary DeKalb County.

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 DeKalb county been allowed a pension of 25.00 dollars, for the year 1895.

Sworn to and subscribed before me, this the 24 day of Feb 1896. A.H. Kelly

W.M. Rogsdale, 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, DeKalb County.

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

Given under my official signature and seal, this 24th day of Feb 1896.

Affix your seal here.

W.M. Rogsdale, Ordinary DeKalb 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 1897.

[L. S.]

Executed in presence of

DeKalb Co. Kelly J. H. Act of 24 Oct. 1887. (For Those Already Enrolled.) No. 2856

INVALID SOLDIER'S PENSION. 1897.

Name J.H. Kelly
County DeKalb
Disability Foot
Amount, $ 25.00
3/11 1897.

RICHARD JOHNSON, Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

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

DeKalb Co. Kelly J. H. Act of 24 Oct. 1887. (For Those Already Enrolled.) No. 1948

INVALID SOLDIER'S PENSION. 1898.

Name J.H. Kelly
County DeKalb
Disability Foot
Amount, $ 25.00
2/14 1898.

RICHARD JOHNSON, Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

DeKalb Co
Kelley, J. H.
ACT OF 24 OCT., 1887.
(For Those Already Enrolled.)

No. 2546

INVALID SOLDIER'S PENSION. 1897.

Name J.H. Kelly
County DeKalb
Disability Foot
Amount, $ 25.00

3/1 1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
Sykes

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

Kelley, J. H.
Ga. Co. A 42 Ga Inf
ACT OF 24 OCT., 1887.
(For Those Already Enrolled.)

No. 1948

INVALID SOLDIER'S PENSION. 1898.

Name J.H. Kelly
County DeKalb
Disability Foot
Amount, $ 25.00

2/14 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
Sykes

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
DeKalb County.

Personally appears J.H. Kelley of DeKalb 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 Sept 1830; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company D, of 42 Regiment of Ga Volunteers, Stovall's Brigade; that whilst engaged in such military service in the State of Ga., on the 7 day of Feb 1865, he was wounded, injured or diseased as follows: At Bowlegs Bridge Ga. was wounded with gunshot in right foot fracturing the bones of foot rendering the same entirely useless and essentially useless

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1897. I have heretofore under said law as a resident of DeKalb county been allowed an invalid pension of Twenty four Dollars, for the year 1896.

Sworn to and subscribed before me, this the 12th day of March 1897. J.H. Kelley POST OFFICE

W.M. Ragsdale 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,
DeKalb County.

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

Given under my official signature and seal, this 12 day of March 1897.

Affix your seal here.

W.M. Ragsdale
Ordinary DeKalb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
DeKalb County.

Personally appears J.H. Kelley of DeKalb 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 Sept 1830; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company D, of 42 Regiment of Ga Volunteers, Stovall's Brigade; that whilst engaged in such military service in the State of Ga, on the 7 day of Feb 1865, he was wounded, injured or diseased as follows: At Bowlegs Bridge Ga. was shot through the right foot fracturing the bones of foot rendering the same entirely useless and essentially useless

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

Sworn to and subscribed before me, this the 14 day of Feb 1898. J.H. Kelley POST-OFFICE

W.M. Ragsdale 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,
DeKalb County.

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

Given under my official signature and seal, this 14 day of Feb 1898.

Affix your seal here.

W.M. Ragsdale
Ordinary DeKalb County.

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 DeKalb county been allowed an invalid pension of Twenty four Dollars, for the year 1896.

Sworn to and subscribed before me, this, the 14 day of March 1897. POST OFFICE J.H. Kelly

Wm. Ragsdale 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,
DeKalb **County.**

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

Given under my official signature and seal, this 14 day of March 1897.

Affix your seal here.

Wm. Ragsdale
Ordinary DeKalb County.

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 DeKalb county been allowed an invalid pension of Twenty four Dollars, for the year 1897.

Sworn to and subscribed before me, this, the 14 day of Dec 1898. POST-OFFICE J.H. Kelly

Wm. Ragsdale 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,
DeKalb **County.**

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

Given under my official signature and seal, this 14 day of Dec 1898.

Affix your seal here.

Wm. Ragsdale
Ordinary DeKalb 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 1899.

[L. S.]

Executed in presence of

CODE SECTION 1250.
(For Those Already Enrolled.)
No. 1411

INVALID
SOLDIER'S PENSION.
1899.

Name J.H. Kelly
County DeKalb
Disability Foot
Amount, $ 2.5.

1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

Kelly, J. H.

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

CODE SECTION 1250.
(For Those Already Enrolled.)
No. 1537

INVALID
SOLDIER'S PENSION.
1900.

Name J.H. Kelly
County DeKalb
Disability Foot
Amount, $ 2.5.
Warrant issued July 2 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Kelly, J. H.

CODE SECTION 128.
(For Those Already Enrolled.)
No. 1411

INVALID SOLDIER'S PENSION.

1899.

Name J. H. Kelly
County DeKalb
Disability Foot
Amount, $ 23.
2/6 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

CODE SECTION 128.
(For Those Already Enrolled.)
No. 1537

INVALID SOLDIER'S PENSION.

1900.

Name J. H. Kelly
County DeKalb
Disability Foot
Amount, $ 23.
Warrant issued May 9 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Gen. W. Harrison, Bass Fitzin, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
DeKalb County.

Personally appeared J. H. Kelly of DeKalb 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 23 day of Sept 1830; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company D, of 42 th Regiment of Ga Volunteers, Stovall's Brigade; that whilst engaged in such military service in the State of Va, on the 9 day of Oct 1865, he was wounded, injured or diseased as follows: Was shot in the foot at Bendshers Bridge rendering the same Entirely and Essentially useless

Deponent makes application for the pension to which he is entitled for the year ending October 20th 1899. I have heretofore under said law as a resident of DeKalb County been allowed an invalid pension of Twenty Five Dollars, for the year 1898.

Sworn to and subscribed before me, this the 31 day of Dec 1899. J. H. Kelly POST OFFICE

W. M. Ragsdale 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,
DeKalb County.

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

Given under my official signature and seal, this 31 day of Dec 1899.

Affix your seal here.

W. M. Ragsdale
Ordinary DeKalb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
DeKalb County.

Personally appeared J. H. Kelly of DeKalb 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 23 day of Sept 1830; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company D, of 42d Regiment of Ga Volunteers, Stovall's Brigade; that whilst engaged in such military service in the State of Va, on the 9 day of Oct 1865, he was wounded, injured or diseased as follows: Was wounded at Battle of Bendshers Bridge in the Right [illegible] rendering same entirely and essentially useless

Deponent makes application for the pension to which he is entitled for the year ending October 20th, 1900. I have heretofore under said law as a resident of DeKalb County been allowed an invalid pension of Twenty Five Dollars, for the year 1899.

Sworn to and subscribed before me, this the 4th day of April 1900. J. H. Kelly POST OFFICE

W. M. Ragsdale 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,
DeKalb County.

I, W. M. Ragsdale Ordinary of said County, do certify that I am well acquainted with J. H. Kelly the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 April 1900.

Affix your seal here.

W. M. Ragsdale
Ordinary DeKalb County.

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 DeKalb County been allowed an invalid pension of Eleven Dollars, for the year 1898.

Sworn to and subscribed before me, this, the 31 day of Jan 1899. J H Kelley POST OFFICE

M M Ragsdale 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,
DeKalb **County.**

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

Given under my official signature and seal, this 31 day of Jan 1899.

Affix your seal here.

M M Ragsdale
Ordinary DeKalb County.

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 DeKalb County been allowed an invalid pension of Eleven Dollars, for the year 1899.

Sworn to and subscribed before me, this, the 27 day of Jan 1900. J H Kelley POST OFFICE

M M Ragsdale 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,
DeKalb **County.**

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

Given under my official signature and seal, this day of Jan 1900.

Affix your seal here.

M M Ragsdale
Ordinary DeKalb 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 _____ 1901.

_____ [L. S.]

Executed in presence of

_____

DeKalb Co
Kelley J H

(For Those Already Enrolled.)
CONFEDERATE SERVICE

No. 3690

DISABLED
SOLDIER'S PENSION.
1901.

Name J H Kelley
County DeKalb
Disability Foot
Amount, $ 25.
2/4 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
[illegible]
[illegible] State Prison, Atlanta.

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 _____ 1902.

_____ [L. S.]

Executed in presence of

_____

Kelley J H
Co D 38th Ga

(FOR THOSE ALREADY ENROLLED.)
CONFEDERATE SERVICE

No. 502

DISABLED
SOLDIER'S PENSION
1902.

Name Kelley J H.
County DeKalb
Co. D Regiment 38th Ga
Disability Foot
Amount, $ 25. 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
[illegible]
[illegible] State Prison, Atlanta.

DeKalb Co

K. [illegible] J.H.

CODE SECTION 1250

(For Those Already Enrolled.)

No. 3690

DISABLED

SOLDIER'S PENSION.

1901.

Name J.H. Kelley

County DeKalb

Disability Foot

Amount, $ 25.

2/12 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

[redacted]

Geo. W. Harrison, State Printer, Atlanta.

Kelly J.H.

Co. D 42nd

CODE SECTION 1250.

(FOR THOSE ALREADY ENROLLED.)

No. 502

DISABLED

SOLDIER'S PENSION

1902.

Name Kelly J.H.

County DeKalb

Co. D Regiment 42nd Ga

Disability Foot

Amount, $ 25.

1/20 1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

[redacted]

Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

DeKalb County.

Personally appears J.H. Kelley of DeKalb 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 23d day of Sept 1830; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company D, of 42 th Regiment of Ga Volunteers, Stovall 's Brigade; that whilst engaged in such military service in the State of , on the 7 day of Feb , 1865, he was wounded, injured or diseased as follows:

Ball shot through the right foot at Bentonville, N.C. breaking bones receiving

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 DeKalb County been allowed an invalid pension of Twenty-five Dollars, for the year 1900.

Sworn to and subscribed before me, this the 2 day of Jan 1901. J.H. Kelley Postoffice Lithonia Route 2

W.M. Rogsdale, Ordinary

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

STATE OF GEORGIA,

DeKalb County.

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

Given under my official signature and seal, this 12 day of Jan 1901.

W.M. Rogsdale

Affix your seal here

Ordinary DeKalb County.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA.

DeKalb County.

Personally appears J.H. Kelly of DeKalb 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 23d day of Sept 1830; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company D, of 42 th Regiment of Ga Volunteers, Stovall 's Brigade; that whilst engaged in such military service in the State of , on the 9 day of Feb 1865, he was wounded, injured or diseased as follows:

A Breakers Bridge was shot through right foot passing bones and rendering same Substantially useless

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 DeKalb County, been allowed an invalid pension of Twenty-five Dollars, for the year 1901.

Sworn to and subscribed before me, this the 15 day of Jan 1902. J.H. Kelley Post-office

W.M. Rogsdale

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,

DeKalb County.

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

Given under my official signature and seal, this 15 day of Jan 1902.

W.M. Rogsdale

Affix your seal here

Ordinary DeKalb County.

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

NOTE.—All vouchers and affidavits must bear date after January 1, 1902.

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 DeKalb County been allowed an invalid pension of Twenty & 00/100 Dollars, for the year 1900.

Sworn to and subscribed before me, this the 2 day of Jan 1901. Postoffice J.H. Kelly Smithsville

W.M. Rogdale Ordinary

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

STATE OF GEORGIA,
DeKalb **County.**

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

Given under my official signature and seal, this 12 day of Jan 1901.

Affix your seal here

W.M. Rogdale
Ordinary DeKalb County.

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 DeKalb County, been allowed an invalid pension of Twenty & 00/100 Dollars, for the year 1901.

Sworn to and subscribed before me, this the 15 day of Jan 1902. Post-office J.H. Kelly

W.M. Rogdale

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,
DeKalb **County.**

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

Given under my official signature and seal, this 15 day of Jan 1902.

Affix your seal here

W.M. Rogdale
Ordinary DeKalb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
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.

[L. S.]

Executed in presence of

CODE SECTION 1250.
(FOR THOSE ALREADY ENROLLED.)
No. 539

DISABLED
SOLDIER'S PENSION
1903.

Name J.H. Kelly
County DeKalb
Co. D Regiment 42
Disability Fever
Amount, $ 12 50 1903.

JOHN W. LINDSEY,
Commissioner of Pensions

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

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 _____ 1904.

[L. S.]

Executed in presence of

CODE SECTION 1250.
(FOR THOSE ALREADY ENROLLED.)
No. 221

DISABLED
SOLDIER'S PENSION
1904.

Name J.H. Kelly
County DeKalb
Co. C Regiment 42
Disability Lost Left Foot
Amount, $ 25 00 Year 1904.

JOHN W. LINDSEY,
Commissioner of Pensions

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

CODE, SECTION 1295.
(FOR THOSE ALREADY ENROLLED.)

No. 539

DISABLED

SOLDIER'S PENSION

1903.

Name J. H. Kelly Jr.
County De Kalb
Co. D Regiment 42d
Disability Foot
Amount, $ 12 00 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

CODE, SECTION 1295.
(FOR THOSE ALREADY ENROLLED.)

No. 221

DISABLED

SOLDIER'S PENSION

1904.

Name J. H. Kelley
County De Kalb
Co. K Regiment 42
Disability Shot in foot
Amount, $ 25 00 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
De Kalb County.

Personally appears J H Kelley of De Kalb 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 23d day of Sept 1880; 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 42 th Regiment of Ga Volunteers, Stovall 's Brigade; that whilst engaged in such military service in the State of Ga, on the 9 day of Feb 1865 he was wounded, injured or diseased as follows:
was shot through the right foot at battle of Kenesaw Bridge Ga During Hood's Invasion of Georgia as Recorded on Said Kelley Muster Roll

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 De Kalb County, been allowed an invalid pension of twenty five Dollars, for the year 1902.

Sworn to and subscribed before me, this the 17th day of Jan 1903. J H Kelley Post-office.
W M Ragsdale, Ordinary

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

STATE OF GEORGIA,
De Kalb County.

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

Given under my official signature and seal, this 17th day of Jan 1903.

W M Ragsdale
Ordinary De Kalb County.

Affix your Seal here.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
De Kalb County.

Personally appears J. H. Kelley of De Kalb 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 23 day of Sept 1880; 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 Pvt in Company L, of 42 th Regiment of Ga Volunteers, Stovall 's Brigade; that whilst engaged in such military service in the State of , on the 9 day of Feby 1865, he was wounded, injured or diseased as follows:
was Shot Through right foot

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 De Kalb County, been allowed an invalid pension of twenty five Dollars, for the year 1903.

Sworn to and subscribed before me, this the 20 day of January 1904. James R George
J H Kelley Dec'd
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,
De Kalb County.

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

Given under my official signature and seal, this 20 day of January 1904.

James R George
Ordinary De Kalb County.

Affix your Seal here.

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

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 DeKalb County, been allowed an invalid pension of Twenty five Dollars, for the year 1902.

Sworn to and subscribed before me, this the 17th day of Jan 1903. J. H. Kelley Post-office Redlacy

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, DeKalb County.

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

Given under my official signature and seal, this 17th day of Jan 1903.

W. M. Rogers Ordinary DeKalb County.

Affix your seal here.

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

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 DeKalb County, been allowed an invalid pension of Twenty five Dollars, for the year 1903.

Sworn to and subscribed before me, this the 20 day of January 1904. James R George Post-office J. H. Kelley Dec 24th

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, DeKalb County.

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

Given under my official signature and seal, this 20 day of January 1904.

James R George Ordinary DeKalb County.

Affix your seal here.

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

POWER OF ATTORNEY.

STATE OF GEORGIA, _____ 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 _____ 1905.

_____ [L. S.]

Executed in the presence of

Kelley J. H. DeKalb County (Code Section 1260) (FOR THOSE ALREADY ENROLLED.) No. 2617

DISABLED SOLDIER'S PENSION 1905.

Name J. H. Kelley
County DeKalb Co. A Regiment 32 Ga.
Disability Bad Leg
Amount, $ 2 00 Beginning 4 3 1905.

JOHN W. LINDSEY, Commissioner of Pensions.

WARRANT HANDED TO

The Franklin Printing and Publishing Co., Atlanta. Geo. W. Harrison, Manager and State Printer.

no date

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 _____ 1906.

_____ [L. S.]

Executed in the presence of

Kelley J. H. DeKalb Co. (Code Section 1260) (FOR THOSE ALREADY ENROLLED.) No. 227

DISABLED SOLDIER'S PENSION 1906.

Name J. H. Kelley
County DeKalb Co. A Regiment 32 Ga.
Disability Bad Leg
Amount, $ 3 00 1/2 2 1906.

JOHN W. LINDSEY, Commissioner of Pensions.

WARRANT HANDED TO

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

Kelly J. H.
Dekalb County
(FOR THOSE ALREADY ENROLLED.)
CODE SECTION 1360

No. 260

DISABLED
SOLDIER'S PENSION
1905.

Name J. H. Kelly
County DeKalb
Co. K Regiment 42 Ga
Disability
Amount, $ 12 per
January 23 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

The Franklin Printing and Publishing Co., Geo. W. Harbuge, Mgr.

no date

Kelly J. H.
De Kalb Co.
(FOR THOSE ALREADY ENROLLED.)
CODE SECTION 1360

No. 222

DISABLED
SOLDIER'S PENSION
1906.

Name J. H. Kelly
County De Kalb
Co. D Regiment 42 Ga
Disability Both Legs
Amount, $ 12 per 1906.

JOHN W. LINDSEY.
Commissioner of Pensions.

WARRANT HANDED TO

The Franklin Printing and Publishing Co., Geo. W. Harbuge, Mgr.

7-14-06

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
DeKalb COUNTY.

Personally appears J. H. Kelly of DeKalb 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 ___, of 42 th Regiment of Ga. Volunteers ___ Brigade; that whilst engaged in such military service in the State of ___, on the 19 day of July 1863, he was wounded, injured or diseased as follows: Disable foot, Battle Bridge Ga.

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 DeKalb County, been allowed an invalid pension of Twenty five Dollars, for the year 1904.

Sworn to and subscribed before me, this the 19th day of January 1905.
James R George Ordinary

J. H. Kelly
Post-office Redan

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,
DeKalb COUNTY.

I, James R. George Ordinary of said County, do certify that I am well acquainted with J. H. Kelly the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 January 1905.

James R George
Ordinary DeKalb County.

Affix your seal here.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
DeKalb **County.**

Personally appears J. H. Kelly of DeKalb 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 23 day of Sept 1862; that he enlisted in the military service of the Confederate States, (or of the State of ___) during the war between the States, and served as a Private in Company D, of 52 th Regiment of Georgia Volunteers Stovall 's Brigade; that whilst engaged in such military service in the State of Virginia, on the 3 day of ___ 186 C, he was wounded, injured or diseased as follows: Marshall through calf of both legs

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 ___ County, been allowed an invalid pension of Twenty five Dollars, for the year 1905.

Sworn to and subscribed before me, this the 17 day of January 1906.
James R George Ordinary

J. H. Kelly
Post-Office Decatur Ga

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

State of Georgia,
DeKalb **County.**

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

Given under my official signature and seal, this 17 day of January 1906.

James R George
Ordinary DeKalb County.

Affix your seal here.

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

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 DeKalb County, been allowed an invalid pension of Twenty five Dollars, for the year 1904.

Sworn to and subscribed before me, this the 19th day of January 1905.
James R George Ordinary

J. H. Kelly
Post-office Decatur

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,
DeKalb COUNTY.

I, James R. George Ordinary of said County, do certify that I am well acquainted with J. H. Kelly the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 January 1905.

James R George
Ordinary DeKalb County.

Affix your seal here.

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

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 DeKalb County, been allowed an invalid pension of Twenty five Dollars, for the year 1905.

Sworn to and subscribed before me, this the 17 day of January 1906.
James R George Ordinary

J. H. Kelly
Post-Office Decatur Ga

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

State of Georgia,
De Kalb County.

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

Given under my official signature and seal, this 17 day of January 1906.

James R George
Ordinary DeKalb County.

Affix your seal here.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
DeKALB. 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 _____ 1907.

[L. S.]

Executed in presence of

_____

DISABLED
SOLDIER'S PENSION
1907.

Under Section 1250,
(FOR THOSE ALREADY ENROLLED)

No. 294

Name J. H. Kelly
County DeKALB Co. D Regiment 42
Disability Disabled Foot
Amount, $25.00 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
J. H. Kelly

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

Kelly J. H.
Ft. Lt.

De Kalb

Maimed Soldiers.

Voucher No. 893
Amount $ 25
Paid to J. H. Kelly
For Foot disables

Feby 11 1890

Included in warrant No.
issued to Treasurer.

18

WARRANT CLERK.

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

W. L. Egan

1891.

Maimed Soldiers.

Voucher No. 433
Amount $ 25.00
Paid to J. H. Kelly
For Foot disabled

1891

Included in warrant No.
issued to Treasurer.

1891.

WARRANT CLERK.

Geo. W. Harrison, State Printer, Atlanta.

Kelley J. H.
Co. D

Cross Section 1250.
(FOR THOSE ALREADY ENROLLED)
No. 294

DISABLED
SOLDIER'S PENSION
1907.

Name J. H. Kelley
County DeKALB
Co. D Regiment 42
Disability Disabled foot
Amount, $ 12.50
1 Apr 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
J. H. Kelley

Geo. W. Harrison, State Printer, Atlanta.

July 11 1890

Included in warrant No.
issued to Treasurer.

18

WARRANT CLERK.

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

W. L. Egan

1891.

Included in warrant No.
issued to Treasurer.

1891.

WARRANT CLERK.

Geo. W. Harrison, State Printer, Atlanta.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
DeKALB County.

Personally appears J H Kelly of DeKALB 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 Soldier in Company D, of the 42nd Regiment of Ga Volunteers Stovall's Brigade; that whilst engaged in such military service in the State of ____, on the 29th day of February 1865, he was wounded, injured or diseased as follows:

Disabled foot, Benacker Bridge. S. C.

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 DeKALB County, been allowed an invalid pension of Twenty Five Dollars, for the year 1906.

Sworn to and subscribed before me, this the 18th day of January 1907.

J. H. Kelley

James R George Ordy

Postoffice Decatur Ga

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

State of Georgia,
DeKALB County.

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

Given under my official signature and seal this 18th day of January 1907.

James R George

Ordinary DeKALB County.

Affix your seal here

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

NAME, Kelley, J. H. YEAR 1890 COUNTY DeKalb.

WHEN AND WHERE BORN? Resident of Ga., since Sept. 22, 1830

ENLISTED WHEN AND WHERE?

RANK. Private

COMPANY AND REGIMENT? Co. D, 42d Regt. Ga. Vols. Stovall's Brigade.

NAME OF CAPTAIN AND COLONEL? H. H. Burgess Comm. Off.

WOUNDED? Benacker Bridge, S. C. 29th Feb. 1865. Foot Disabled. (Shot in the right foot)

CAPTURED, [illegible]

RELEASED.

[illegible]

IF [illegible]

ON [illegible]

WHERE.

WITNESSES. H. H. Burgess Comm. Off. No date.

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 DeKALB County, been allowed an invalid pension of Twenty Five Dollars, for the year 1906.

Sworn to and subscribed before me, this the 18 day of January 1907. J. H. Kelly

James R George Ordinary. Postoffice Decatur R.F.D. 2

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,

DeKALB County.

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

Given under my official signature and seal this 18th day of January 1907.

James R George

Ordinary DeKALB County.

Affix your seal here

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

NAME OF CAPTAIN AND COLONEL? H. H. Burgess Comm. Off.

WOUNDED? Benacker Bridge, S. C. 29th Feb. 1865. Foot Disabled. (Shot in the right foot)

CAPTURED, [illegible]

RELEASED.

[illegible]

WHERE.

ATTENDED. H. H. Burgess Comm. Off. No data.

1891.

No. 1253

STATE OF GEORGIA, EXECUTIVE DEPARTMENT. Atlanta, Ga. Feby 10 1891.

Mr. J. H. Kelly of the County of DeKalb 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. 14, 1889, and the same having been examined and allowed for Foot disabled

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

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

W. J. Northen. GOVERNOR.

By the Governor.

SEC'Y EXECUTIVE DEPARTMENT.

$25 00

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

Twenty five 00/100 —— Dollars,

per above voucher, this —— of —— 1891.

J. H. Kelly

No. 893

STATE OF GEORGIA, EXECUTIVE DEPARTMENT. Atlanta, Ga. Feby 11 1890

Mr. J. H. Kelly of the County of DeKalb, 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 Foot disabled

He is entitled to receive the sum of Twenty Five 00/100 Dollars for such disability, the same being the allowance due for the year ending October 24, 1890

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

J. B. Gordon GOVERNOR.

By the Governor.

W. A. Harrison CLERK EXECUTIVE DEPARTMENT.

$25 00

RECEIVED OF STATE TREASURER, R. U. HARDEMAN.

Twenty Five 00/100 Dollars,

per above voucher, this 1st of Feb 1890.

W. A. Eggers

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga. July 20 1891.

Mr. L. N. Kelly of the County of DeKalb 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 Foot disabled

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

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

W. J. Northen.
GOVERNOR.

By the Governor

SEC'Y EXECUTIVE DEPARTMENT

$ 25 00

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

Twenty five 00/100 ——— Dollars,

per above voucher, this 20 of July 1891.

L. N. Kelly

Mr. J. H. Kelly of the County of DeKalb, 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 Foot disabled

He is entitled to receive the sum of Twenty five 00/100 Dollars for such disability, the same being the allowance due for the year ending October 24, 1890

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

J. Bolton Lou
GOVERNOR.

By the Governor,

W. H. Harrison
CLERK EXECUTIVE DEPARTMENT.

$25 00

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Twenty Dollars and 00/100 Dollars,

per above voucher, this 1 of Feb 1890.

J. H. Kelly

Pension office 10/20th.1910.

Husband was on disable roll and his testimony does not show a 6 months actual military service as the law requires. Walker Co. claim. Male blue ablanking, proves service without reference to husband ever having been on pension roll.

J.W.Lindsey,Com.of Pens.

Kelley, Mariah J.
DeKalb Co

On Invalid Roll Jan 1911
No. 761

1911

Widow's Application

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

County DeKalb

Name Mrs Mariah J. Kelley

Widow of J N Kelley

Approved 1956

J. W. LINDSEY
Commissioner of Pensions

Geo. P. Byrd, State Printer, Atlanta.

8 Feb 10

V/N-1911

Pension office 10/29th.1910.

Husband was on disable roll and his testimony does not show a 6 months actual military service as the new law requires. Make out claim on pale blue blankand prove service without reference to husband ever having been on pension roll.

Name Mrs Moriah J. Kelley

Widow of J N Kelley

Approved 6/1956

J. W. LINDSEY
Commissioner of Pensions

Chas. P. Byrd, State Printer, Atlanta.

8/5/10

Nov 15 1911

Pension office 10/29th.1910.

Husband was on disable roll and his testimony does not show a 6 months actual military service as the new law requires. Make out claim on pale blue blankand prove service without reference to husband ever having been on pension roll. J.W. Lindsey, Com. Of Pens.

Kelley, Moriah J.
DeKalb Co.

Ga. Macon Co. No. 1911

Widow's Application

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

County DeKalb

Name Mrs Moriah J. Kelley

Widow of J N Kelley

Approved 6/1956

J. W. LINDSEY
Commissioner of Pensions

Chas. P. Byrd, State Printer, Atlanta.

8/5/10

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,
DEKALB County.

Personally before me comes Mrs. Mariah J. Kelley of said County, who, after being duly sworn, on oath says, that she is the widow of J. H. Kelley to whom in the County of DeKalb State of Georgia she was married on the 3rd day of Nov. 1853 and that she remained his wife, and resided with him to the date of his death in Dec. 30th 1908 and that she has not since his death remarried. At the time of his death he was a resident of DeKalb County, in said State of Georgia, and he was on the Disabled or Invalid Pension Roll of the State and paid a pension of $25.00 DeKalb County for 1908 per annum, on account of being a soldier in Company D. Forty-second Georgia Regiment Volunteers (Volunteers of State Militia.)

At the death of J. H. Kelley he was in the use and possession of the following property Had disposed of all his property before his death, the same being 60 acres of land in DeKalb County, Georgia, Valued $1,200.00 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	None	$
Horses and Mules	None	$
Hogs, Cows, etc	None	$
Total Cash value of all property		$

That she is now a bonafide resident citizen of said County of DeKalb and she has so continuously resided since 4th day of November 1908

Sworn to and subscribed before me this the 29 day of August 1910

Mrs Moriah J. Kelley

James R. George Ordinary.

of DeKalb County.

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

STATE OF GEORGIA,
DEKALB County.

Personally before me come B F Bergen 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. Mariah J. Kelley who made the foregoing affidavit, is the lawful widow of J. H. Kelley who died in DeKalb County in said State of Georgia on 30th day of Dec. 1908 and that she has not since remarried. That she became the wife of J. H. Kelley on the 3rd day of Nov. 18 53 and that she and he had resided together as man and wife continuously since the 3rd day of Nov. 1853 and that the said J. H. Kelley was the same man who was on the pension roll of said State from DeKalb County Georgia when he died.

Sworn to and subscribed before me, this the 29 day of August 1910

B F Bergen

James R. George Ordinary.

of DeKalb County.

That she is now a bonafide resident citizen of said County of DeKalb and she has so continuously resided since 4th day of November 1908

Sworn to and subscribed before me, this the 29 day of August 1910

Mrs Mariah J Kelley

James R George Ordinary.

of DeKalb County.

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

STATE OF GEORGIA,

DEKALB County.

Personally before me come B F Burgess 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. Mariah J. Kelley who made the foregoing affidavit, is the lawful widow of J. H. Kelley who died in DeKalb County in said State of Georgia on 30th day of Dec. 1908 and that she has not since remarried. That she became the wife of J. H. Kelley on the 3rd day of Nov. 18 53 and that she and he had resided together as man and wife continuously since the 3rd day of Nov. 1853 and that the said J. H. Kelley was the same man who was on the pension roll of said State from DeKalb County Georgia when he died.

B F Burgess

Sworn to and subscribed before me, this the 29 day of August 1910

James R George Ordinary.

of DeKalb County.

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,

DEKALB County.

Personally before me comes B.F.Burgess & R.J.Freeman who after being sworn on oath says, that they are freeholders of said County, and that they know Mrs. Mariah J. Kelley said County and knew her said husband J. H. Kelley at his death on the 30th day of Dec. 1908 91 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 $ Nothing That she is now in the use, possession and control of the following property to wit:

of the value of $

B F Burgess

R J Freeman

Sworn to and subscribed before me, this the 29th day of August 1910

James R George Ordinary.

of DeKalb County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

DeKalb County.

I, James R George Ordinary of said County, do certify, that, I know Mrs Mariah J Kelly 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 Nov 4th 1908

That I also know B F Burgess witness as to marriage and I also know B F Burgess & R J Freeman 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 DeKalb County shows that Mariah J Kelly returned property to the amount of for 1908 $ None for 1909 $ None for 1910 $

Sworn under my hand and official seal of office this 29 day of August 1910

(SEAL.) James R George Ordinary.

DeKalb 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

Application for Pension by a Widow Under Act of 1910.--Questions for Applicant.

STATE OF GEORGIA,

DeKalb County.

Personally before me comes Mrs Mariah J Kelley 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? Mrs Mariah J Kelly DeKalb Co
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? Nov 3 1853 DeKalb Co J N Kelly
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.) Feby 1862 Decatur Ga Company D-42 Ga Regiment
5. When and where did the Commands of your husband surrender or discharge from the army? April 1865 Bentonville N C
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? Present
8. Where was his Command when he left?
   a. For what cause did he leave his command?
   b. By whose authority did he leave his Command?
   c. For how long was he granted leave of absence?
   e. What was his physical condition when he left his Command?
   f. What effort did he make to return to his command?
   g. In what way was he prevented from going back to Command?
   h. Was he captured by the enemy at any time?
   i. If so, when and where captured and where held as a prisoner, and when and for what cause released?
   j. When and where did your husband die? Dec 30th 1908 DeKalb Co
   k. Were you residing together when he died? We was
   l. If not, how long had you resided apart?
9. What property of any description did you own, hold or control for your use and its cash value, Nov. 4, 1908. (State same by items.)
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.)
11. What property of any description of any value have you now? Give list and cash value?
12. What are your annual earnings or income and their value?
13. Have you heretofore been paid a pension by the State? If so, when and for what cause were you struck from the Roll?

Sworn to and subscribed before me this the 12 day of May 1911

Mrs Mariah J Kelley

James R George Ordinary.

of DeKalb County.

over

know Mrs. Mariah J. Kelly 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 4th day of Nov 1908

That I also know B F Burgess witness as to marriage and I also know B F Burgess & R J Freeman 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 DeKalb County shows that Mariah J. Kelly returned property to the amount of ... for 1908 $ None for 1909 $ None for 1910 $ ...

Sworn under my hand and official seal of office this 29 day of August 1910

(SEAL.) James R George Ordinary.

DeKalb 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.

c. For how long was he granted leave of absence? ...

e. What was his physical condition when he left his Command? ...

f. What effort did he make to return to his command? ...

g. In what way was he prevented from going back to Command? ...

h. Was he captured by the enemy at any time? ...

i. If so, when and where captured and where held as a prisoner, and when and for what cause released? ...

j. When and where did your husband die? Dec 30th 1908 DeKalb Co

k. Were you residing together when he died? We was

l. If not, how long had you resided apart? ...

9. What property of any description did you own, hold or control for your use and its cash value, Nov. 4, 1908. (State same by items.) ...

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.) ...

11. What property of any description of any value have you now? Give list and cash value? ...

12. What are your annual earnings or income and their value? ...

13. Have you heretofore been paid a pension by the State? If so, when and for what cause were you struck from the Roll? ...

Sworn to and subscribed before me this the 12 day of May 1911

James R George Ordinary.

of DeKalb County.

Mrs Mariah J. X Kelly
Mark

over

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

STATE OF GEORGIA,

DeKalb County.

Personally before me comes D.C. Shepherd 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? D.C. Shepherd DeKalb Co
2. How long and since when have you known ... applicant?
3. How long and since when has she continuously resided in this State? (Give date.) all her life
4. When and to whom was she married? J.H. Kelly How do you know?
5. How long and since when did you know J.H. Kelly her husband? 50 years Since 1860
6. When and where did J.H. Kelly the husband of Applicant die? DeKalb Co Dec 30th 1908
7. Where the Aplicant and her husband living together as husband and wife at the date of his death? they was
8. If not, how long did they live apart before his death? —
Were they divorced? —
9. When, where and in what Company and Regiment did J.H. Kelly enlist? Feby 1862 Decatur Ga Company D - 42 Ga Regt
10. Were you a member of the same Company? I was
11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? Feby 1862 to April 1865 - 3 years
12. When, and where did his Command surrender, and was discharged? April 1865 at Bentonsville N.C
13. Were you personally present when it was surrendered? I was If not where were you Present and how came you there? With my command
14. Was the husband of applicant personally present at surrender? He was If not where was he? Present when, where and for what cause did he leave Command? (Give date.) He did not leave By whose authority did he leave his Command? did not leave and how long was he granted leave? How do you know all this? I was Present Know it of my own Knowledge
15. For what cause, if you know of your own knowledge was he prevented from returning to his Command? did not leave command
16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? did not leave

Sworn to and subscribed before me this the 5th day of May 1911

James R George Ordinary,

of DeKalb County.

D C Shepherd

over

husband? 50 years Since 1863

6. When and where did J. H. Kelly the husband of Applicant die? DeKalb Co Ga Oct 8th 1908

7. Where the Aplicant and her husband living together as husband and wife at the date of his death? They was

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

Were they divorced? —

9. When, where and in what Company and Regiment did J. H. Kelley enlist? Feby 1862 Decatur Ga Company D - 42 Ga Regt

10. Were you a member of the same Company? I was

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? Feby 1862 to April 1865 - 3 years.

12. When, and where did his Command surrender, and was discharged? April 1865 at Bentonville N.C

13. Were you personally present when it was surrendered? I was If not where were you Present and how came you there? With my command

14. Was the husband of applicant personally present at surrender? He was If not where was he? Present when, where and for what cause did he leave Command? (Give date.) He did not leave By whose authority did he leave his Command? did not leave and how long was he granted leave? How do you know all this? I was Present Know it of my own Knowledge

15. For what cause, if you know of your own knowledge was he prevented from returning to his Command? did not leave command

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? did not leave

Sworn to and subscribed before me this the 5th day of May 191 | D. L. Shepard C

James R George Ordinary,

of DeKalb County.

over

Georgia, DeKalb County.

Personally appeared before me, the undersigned, an officer authorized by law to take acknowledgments, administer oaths, &c., J. A. Adcox, who being by me first duly sworn, deposes and says: That he knew J.H. Kelley, that he and said Kelley enlisted at the same time, in Company D. 42nd Georgia Regt., at Decatur, DeKalb County, Georgia, that they were together from the date of their enlistment in Feb'y 1862, till the close of the war in April, 1865, and were discharged at Bentonville, North Carolina, and came home together.

Sworn to and subscribed before me, this the 12th day of May, 1911. | J A Adcox

James R George
Ordinary, DeKalb County, Georgia.

Georgia, DeKalb County.

To any Minister of the Gospel, Justice of the Inferior Court or Justice of the Peace, You are hereby authorized to join James H. Kelley and Jane M, Hilterbrand in the holy state of matrimony 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 3rd Nov. 1853.

Alex Johnson (L.S.)
Ordy.

Georgia, DeKalb County.

I do certify that James H. Kelley & Jane H. Hilterbrand were duly joined in matrimony by me, this 3rd day of Nov. 1853.

Nathan Turner, J.P.

Georgia, DeKalb County.

I, James R. George, Ordinary in and for said County, do hereby certify that the above and foregoing copies of marriage license and certificate of marriage of James H. Kelley and Jane H. Hilderbrand, as the same appears of record in my office in Book A. Record of Marriages for said County, Page 283.

In Witness Whereof, I have hereto set my hand and affixed the seal of said Court of Ordinary, this the 29th day of August, 1910.

James R George
Ordinary, DeKalb County, Georgia.

Georgia, DeKalb County.

Personally appeared before me, the undersigned, an officer authorized by law to take acknowledgments, administer oaths, &c., J. A. Adcox, who being by me first duly sworn, deposes and says: That he knew J.H. Kelley, that he and said Kelley enlisted at the same time, in Company D. 42nd Georgia Regt., at Decatur, DeKalb County, Georgia, that they were together from the date of their enlistment in Feb'y 1863, till the close of the war in April, 1865, and were discharged at Bentonville, North Carolina, and came home together.

Sworn to and subscribed before me, this the 12th day of May, 1911. J A Adcox

James R George
Ordinary, DeKalb County, Georgia.

Given under my hand and seal, this 3rd Nov. 1853.

Alex Johnson (L.S.)
Ordy.

Georgia, DeKalb County.

I do certify that James H. Kolley & Jane M. Hilterbrand were duly joined in matrimony by me, this 3rd day of Nov. 1853.

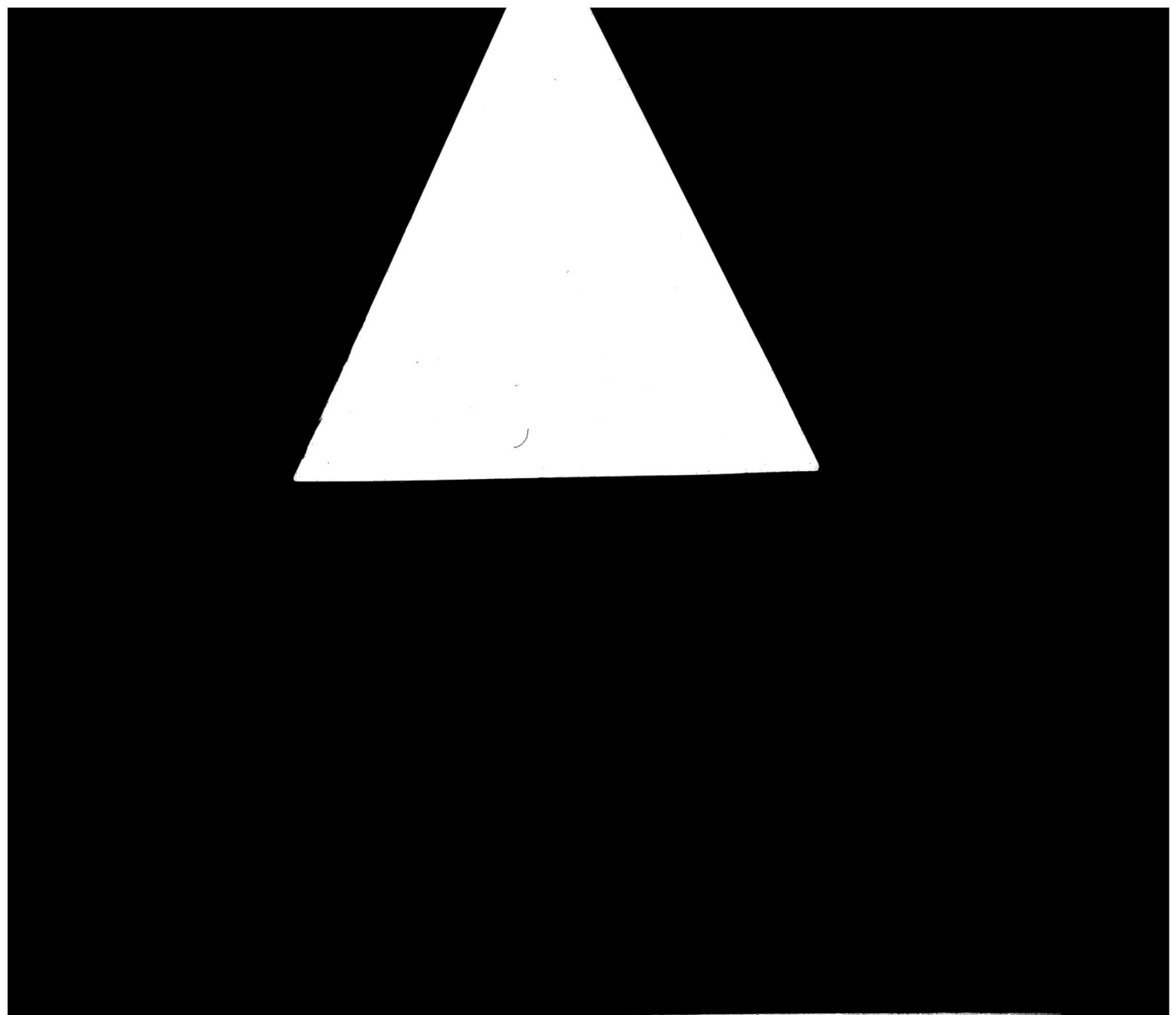
Nathan Turner, J.P.

Georgia, DeKalb County.

I, James R. George, Ordinary in and for said County, do hereby certify that the above and foregoing copies of marriage license and certificate of marriage of James H. Kelley and Jane M. Hilderbrand, as the same appears of record in my office in Book A. Record of Marriages for said County, Page 283.

In Witness Whereof, I have hereto set my hand and affixed the seal of said Court of Ordinary, this the 29th day of August, 1910.

James R George
Ordinary, DeKalb County, Georgia.



Kelly, Robt. A. Private Mch. 4
2. Served through war.

Kelly, M. R. Mrs.
~~Husband~~
~~Deceased~~ R J Kelly
Was on Invalid Roll
Dec 1911
No.
Mrs Kelly

Widow's Pension

UNDER ACT 1910

County DeKalb

Name Mrs M R Kelley

Widow of R J Kelley

D. H. 2. Ga

J. W. LINDSEY,
Commissioner of Pensions.

ENTERED ROSTER OFFICE

Chas. P. Byrd, State Printer

11/10/11 - 11/10-1911

Name Mrs. M. R. Kelly

Widow of R. J. Kelly

Co. H 2 Ga

J. W. LINDSEY,
Commissioner of Pensions.

ENTERED ROSTER OFFICE

Chas. P. Byrd, State Printer

11/10/11 11/10-1911

Kelly, R. J. Private Co. H 2 Ga. Inf. Lewis Thornton's Co.

Kelly, R. J. Pvt. Co. H 2 Ga. Inf. Lewis Thornton's Co.

Widow's Pension

UNDER ACT 1910

No. 2

County DeKalb

Name Mrs. M. R. Kelly

Widow of R. J. Kelly

Co. H 2 Ga.

J. W. LINDSEY,
Commissioner of Pensions.

ENTERED ROSTER OFFICE

Chas. P. Byrd, State Printer

11/10/11 11/10-1911

Application for Pension by a Widow Under Act of 1910.--Questions for Applicant.

STATE OF GEORGIA,
DeKalb County.

Personally before me comes Mrs M R Kelly 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? Mrs M R Kelly
2. How long and since when have you been a continuing resident of the State of Georgia? 76 years Nov 8th 1834
3. When, where and to whom were you married? Dec 6th 1856 Henry County R J Kelly
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) March 1862 Decatur Ga Company D 42 Ga
5. When and where did the Commands of your husband surrender or discharge from the army? April 1865 Bentonville N C
6. Was your husband personally present at the time of the surrender or discharge of this Command? He was not he was wounded in Hospital
7. If he was not present state clearly where he was? Hospital
8. Where was his command when he left? Bentonville
   a. For what cause did he leave his Command? Wounded
   b. By whose authority did he leave his Command? Officers in Command
   c. For how long was he granted leave of absence? He was sent to Hospital
   e. What was his physical condition when he left his Command? Wounded
   f. What effort did he make to return to his Command? made no effort
   g. In what way was he prevented from going back to Command? Wounded
   h. Was he captured by the enemy at any time? Was not
   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? March 17th 1911 DeKalb Co
   k. Were you residing together when he died? In war
   l. If not, how long had you resided apart? ----------
9. What property of any description did you own, hold or control for your use and its cash value, Nov. 1, 1908? (State same by items.) None
10. What property of any kind have you sold or given away since Nov. 1, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.) Nothing
11. What property of any description of any value have you now? Nothing Give list and cash value ----------
12. What are your annual earnings or income and their value? None
13. Have you heretofore been paid a pension by the State? Have not If so, when and for what cause were you struck from the Roll? ----------

Sworn to and subscribed before me this the 7 day of Sept 1911

Mrs M R Kelly

James R Gregory Ordinary.
of DeKalb County.

e. What was his physical condition when he left his Command? made no effort

f. What effort did he make to return to his Command? wounded

g. In what way was he prevented from going back to Command? was not

h. Was he captured by the enemy at any time?

i. If so, when and where captured and where held as a prisoner, and when and for what cause released?

j. When and where did your husband die? March 17th 1911 DeKalb Co

k. Were you residing together when he died? we was

l. If not, how long had you resided apart?

9. What property of any description did you own, hold or control for your use and its cash value, Nov. 1, 1908? (State same by items.) none

10. What property of any kind have you sold or given away since Nov. 1, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.) nothing

11. What property of any description of any value have you now? Nothing Give list and cash value

12. What are your annual earnings or income and their value? None

13. Have you heretofore been paid a pension by the State? Have not

If so, when and for what cause were you struck from the Roll?

Sworn to and subscribed before me this the 7 day of August 1911

Mrs. M. R. Kelly

James R. George Ordinary.

of DeKalb County.

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

STATE OF GEORGIA,

DeKalb County.

Personally before me comes J. W. McWilliams 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 W McWilliams
2. How long and since when have you known Mrs M R Kelly applicant?
3. How long and since when has she continuously resided in this State? (Give date.) 55 years 1855-7
4. When and to whom was she married? R J Kelly How do you know? of my own knowledge
5. How long and since when did you know R J Kelly her husband? 60 years since a boy
6. When and where did R J Kelly the husband of Applicant die? March 17 1911 DeKalb Co
7. Were the applicant and her husband living together as husband and wife at the date of his death? Yes
8. If not, how long did they live apart before his death? Were they divorced?
9. When, where and in what Company and Regiment did R J Kelly enlist? March 1st 1862 - D - 42 Ga Regt
10. Were you a member of the same Company? I was
11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? 3 years
12. When and where did his Command surrender, and was discharged? April 1865 - Bentonville N C
13. Were you personally present when it was surrendered? was not If not where were you at home retired and how came you there? had a talk with R J Kelly out of my knowledge he was
14. Was the husband of applicant personally present at surrender? If not where was he I also understand he was when, where and for what cause did he leave Command? (Give date.) did not leave By whose authority did he leave his Command? Surrender and how long was he granted leave? How do you know all this? What I have Stated is of my own knowledge
15. For what cause if you know of your own knowledge, was he prevented from returning to his Command? Surrender
16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? Surrender

Sworn to and subscribed before me this the 9 day of Nov 1911

J. W. McWilliams Jr

James R. George Ordinary.

of DeKalb County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

DeKalb County.

Personally before me comes J N Gazaway & J N Borring who on oath says that they are freeholders of said County and that they know of said County and know what property she owned on 1th Nov. 1908, and its cash value to be as set out by Schedule (A) as follows

Personal property Nothing $ —

Notes and accounts due $

Total $

Schedule (B).

We know the property sold or given away since Nov. 1th, 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 Nothing $

Other Property $

Income and Earnings $

Total Value of all property and effects $

Sworn and subscribed before me this the 22 day of August 1911

J N Gazaway

J H Borring

James R George Ordinary.

of DeKalb County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

DeKalb County.

I James R. George Ordinary of said County do certify that, I know the applicant for pension. She is the person she represents herself to be and she has been a continuing resident citizen of said County and was on the 1th Nov., 1908.

That I also know J W McWilliams the witness who swears to the service of husband and J N Gazaway & J H Borring who are freeholders. That all of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they all are truthful, trustworthy, and their statements are entitled to full faith and credit.

That the Tax Returns Returned for Tax is for 1908 $. Non for 1910 $. Non

Sworn under my hand and official seal of office this 2 day of November 1911

(SEAL.)

James R. George Ordinary.

DeKalb 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.

death? Yes

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

Were they divorced?

9. When, where and in what Company and Regiment did R J Kelly enlist?
March 2nd 1862 - D - 42 Ga Regt

10. Were you a member of the same Company? I was

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? 3 years

12. When and where did his Command surrender, and was discharged?
April 1865 - Bentonville N C

13. Were you personally present when it was surrendered? was not If not where were you? at home retired and how came you there?
had a Furlough & Left of my knowledge

14. Was the husband of applicant personally present at surrender? If not where was he? I also understand he was when, where and for what cause did he leave Command? (Give date.) did not leave By whose authority did he leave his Command? Surrender and how long was he granted leave? How do you know all this?
what I have stated is of my own knowledge

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

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

Sworn to and subscribed before me this the
day of Nov 1911 J. W. McWilliams Jr

James R George Ordinary.
of DeKalb County.

Horses and Mules Walking $
Cows and Hogs $
Other Property $
Income and Earnings $
Total Value of all property and effects $

Sworn and subscribed before me this the
27 day of August 1911 J H Gazaway
James R George Jr Ordinary. J H Boring
of DeKalb County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
DeKalb County.

I, James R. George Ordinary of said County do certify that, I know the applicant for pension. She is the person she represents herself to be and she has long been a continuing resident citizen of said County and was on the 4th Nov. 1908.

That I also know J W McWilliams the witness who swears to the service of husband, and J H Gazaway & J H Boring who are freeholders. That all of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they all are truthful, trustworthy, and their statements are entitled to full faith and credit.

That the Tax Returns Returned for Tax is for
1908 $ Non for 1910 $ Non

Sworn under my hand and official seal of office this 2 day of
November 1911.

(SEAL.) James R George Ordinary.
DeKalb 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.

OFFICE OF
COURT OF ORDINARY
HENRY COUNTY.
A. G. HARRIS, ORDINARY
J. A. FOUCHE, C. S. C.
A. C. SOWELL, SHERIFF

McDONOUGH, GA., 191

Georgia Henry } To any Judge, Justice
County } of the Superior Court
Justice of Peace or Minister of Gospel
You are hereby authorized to join
Robt J Kelly and Mary L Hogan
in the holy state of matrimony according
to the Constitution and laws of this State
and for so doing this shall be your
sufficient license. Given under
My hand this 15 day of Dec - 1856
Q R Nolan
Ordinary

I certify that Robt J Kelly & Mary L Hogan were
duly joined in matrimony by me this 15 th
day of Dec 1856
N. O. Adamson J P

I hereby certify the above to be a true
copy of record in this office.
A G Harris
Ordinary

Georgia Henry Co. To any Judge, Justice
County } of the Superior Court
Justice of Peace or Minister of Gospel
You are hereby authorized to join
John J Kelly and Mary R Stegum
in the holy state of matrimony according
to the Constitution and laws of this State
and for so doing this shall be your
sufficient license Given under
My hand this 15 day of Dec - 1856

Q R Nolan
Ordinary

I certify that John J Kelly & Mary R Stegum were
duly joined in matrimony by me this 15th
day of Dec 1856

N. C. Adamson J.P.

I hereby certify the above to be a true
Copy of Record in this office.

A. G. Harris
Ord Henry

appd- for $50
8/19 1899
Richd Johnson
John H Purvis

Code Section 1250.

Kelly, R. J.
No.
DeKalb Co.

INVALID
Soldier's Pension,
1899.

Name R. J. Kelly
County DeKalb
Disability Ms + disease
Amount, $ 50

____ 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

3/24.99

Form No. 5.

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 _____ by _____
at _____

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

_____ [L. S.]

Executed in the presence of

_____

Disability Mr Edisman

Amount, $ 50

1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

3/24.99

ttorney.

Form No. 8.

authorize

to receive and receipt for the pension allowed and

by

[L. S.]

Form No. 8.

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 by

at

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

day of 1899.

[L. S.]

Executed in the presence of

Form No. 1.

For Use of Applicants Who have Not Heretofore Drawn.

STATE OF GEORGIA,

Dekalb County.

PERSONALLY appears L J Kelly of said Dekalb

County, State of Georgia, who being duly sworn says on oath that he was born on the 18th day of February 1836, that he is a *bona fide* citizen and resident of Georgia, and has been continuously since the 18th day of February 1836, that he enlisted in the military service of the Confederate States (or the State of) on the 4th day of March 1862, during the war between the States, and served in Company D of 42d th Regiment of Georgia Volunteers Stowalls Brigade, and was honorably discharged on the 26th day of April 1865; that whilst engaged in such military service, and in line of duty in the State of N C, on the 19 day of March 1865 he was disabled or wounded as follows: Shot with Minnie Ball through the right knee at the battle of Bentonville North Carolina During the time I was in Rockitts Comd Said wound I Contracted Cronic Dysentery & Piles, which disabilities I Still suffer with and render me unable to follow my avocation which is farming

Deponent desires to participate in the benefits of Section 1250 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 26th, 1899.

Sworn to and subscribed before me, this the

day of 1899. Post Office

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 signed.

The Instructions as set out in the Notes Must be Observed.

Code Section 1250.

INVALID

Soldier's Pension,

1899.

Name

County

Disability

Amount, $ 50

1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

3/24.99

Code Section 1250.

No. [illegible]

INVALID
Soldier's Pension,
1899.

Name R. J. Kelly

County DeKalb

Disability Mc Intosh

Amount, $ 50

1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

3/24/91

The Instructions as set out in t

From [illegible] wounds received during Dysentery & Piles, which disabilities I still suffer with and render me unable to follow my avocation which is farming

Deponent desires to participate in the benefits of Section 1250 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 26th, 1899.

Sworn to and subscribed before me, this the [illegible] day of March 1899.

[illegible] Ordinary.

R. J. Kelly

Mosby

Post Office [illegible]

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 signed.

Affidavit for Three Witnesses.

Form No. 2.

STATE OF GEORGIA,
DeKalb County.

PERSONALLY appears before me, the undersigned Ordinary in and for said County, H. C. Holcomb and A. C. Burgess and J. H. Kelly 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 R. J. Kelly, whose application herewith presented for a pension, that he has resided in this State continuously since the 18 day of February 1836, that he served in Company D, of the 42 Regiment of Georgia 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 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 work, or can do any, say what.)

Shot with minie Ball, Through the right Knee at the battle of Bentonville North Carolina & during the time he was in the Hospital Contracted Chronic Dysentery and Piles which Disability he still suffers with and renders him unable to follow his avocation which is Farming

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 1865. Applicant is permanently disabled as stated and has been so to our certain knowledge ever since 18 We have no interest in the recovery of a pension by him.

Sworn to and subscribed before me, this 9th day of March 1899.

[illegible] Ordinary.

H. C. Holcomb
J. H. Kelly
A. C. Burgess

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, tracing disability to its true cause.

3. All blank spaces must be filled when signed.

4. Three witnesses are required.

Physicians' Affidavit.

Form No. 3.

STATE OF GEORGIA,
DeKalb County.

PERSONALLY comes before me W. M. Ragsdale Ordinary of said County, Dr A. H. Brantley and Dr B. M. Shaybury, both known to me as reputable physicians of said County, who being severally sworn, say on oath, that they have carefully examined R. J. Kelly and after such personal examination, say that the present condition of applicant is as follows: Applicant suffers from Chronic Dysentery complicated with Piles, & from an old wound of the Knee joint made by a bullet. these troubles all weaken and debilitate him, and greatly impair his ability to work and earn a support for himself and family

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

The Chronic Dysentery causes a constant drain on his system, which is greatly intensified by the Piles. while the old wound interferes in locomotion

We have treated applicant professionally for twenty or more 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 9th day of March 1899.

W. M. Ragsdale
Ordinary.

A. H. Brantley M.D.
B. M. Shaybury M.D.

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 if connected with service, as understood by affiant.

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

Form No. 4

STATE OF GEORGIA,
DeKalb County.

I W. M. Ragsdale, Ordinary of said County, do certify that I am well acquainted with R. J. Kelly 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 Feb 1836

I also certify that the witnesses, to-wit: H. C. Holcomb, J. H. Kelly and A. C. Burgess 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 9th day of March 1899.

W. M. Ragsdale
Ordinary DeKalb County.

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

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 1865. Applicant is permanently disabled as stated and has been so to our certain knowledge ever since 18 . We have no interest in the recovery of a pension by him.

Sworn to and subscribed before me, this 7th day of March 1899.

H. C. Holcomb
J. H. Kelly
2216 Burgess

Wm. Ragsdale,
Ordinary.

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, tracing disability to its true cause.
3 All blank spaces must be filled when signed.
4 Three witnesses are required

We have treated applicant professionally for twenty or more 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 7th day of March 1899.

A. H. Brantley, M.D.
Box 16 Stonefort, Ill.

Wm. Ragsdale,
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 discuss its origin, as understood by affiant.*
NOTE 2. The physicians will be careful to fill every blank space in oath.

Form No. 4

STATE OF GEORGIA,
DeKalb County.

I Wm. Ragsdale, Ordinary of said County, do certify that I am well acquainted with R. J. Kelly 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 Sept 1838

I also certify that the witnesses, to-wit: H. C. Holcomb. J. H. Kelly and C. C. Burgess 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 7th day of March 1899.

Wm. Ragsdale
Ordinary DeKalb 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,
_____ 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

_____

CODE SECTION 120.
(For Those Already Enrolled.)
No. 1865

INVALID
SOLDIER'S PENSION.
1900.

Name R. J. Kelly
County DeKalb
Disability Disease
Amount, $ 32.
Warrant issued Jan 7 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
R. J. Kelly

Geo. W. Harrison, State Printer, Atlanta.

DeKalb Co.
Kelly, R. J.
1865

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 _____ 1901.

_____ [L. S.]

Executed in presence of

_____

CODE SECTION 120.
(For Those Already Enrolled.)
No. 2687

DISABLED
SOLDIER'S PENSION.
1901.

Name R. J. Kelly
County DeKalb
Disability Disease
Amount, $ 32.
2/4 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

Pd. Cata

CODE SECTION 1260
(For Those Already Enrolled.)

No. 1877

INVALID SOLDIER'S PENSION. 1900.

Name R.J. Kelly
County DeKalb
Disability Disease
Amount, $ 32.
Warrant issued Dec 1 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Kelly

Geo. W. Harrison, State Printer, Atlanta.

DeKalb Co.
Kelly R.J.
110 Extra

CODE SECTION 1260
(For Those Already Enrolled.)

No. 2682

DISABLED SOLDIER'S PENSION. 1901.

Name R.J. Kelly
County DeKalb
Disability Disease
Amount, $ 32.
1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Kelly

Geo. W. Harrison, State Printer, Atlanta.

No Extra

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
DeKalb County.

Personally appears R. J. Kelly of DeKalb 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 18 day of Oct 1836; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company D, of 42 Regiment of Ga Volunteers, Stovall 's Brigade; that whilst engaged in such military service in the State of Georgia, on the day of 1863, he was wounded, injured or diseased as follows: Was wounded at the battle of Bentonville N.C. in right knee-crippling leader. Also contracted piles while in service and from said wounds and disease he is unable to work for a support.

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 DeKalb County been allowed an invalid pension of Dollars, for the year 1899.

Sworn to and subscribed before me, this the 22 day of Nov 1900. R. J. Kelly POST OFFICE Decatur Ga R.F.D. 4

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,
DeKalb County.

I, W.M. Rogsdale Ordinary of said County, do certify that I am well acquainted with R.J. Kelly the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 Nov 1900.

Affix your seal here.

W.M. Rogsdale
Ordinary DeKalb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
DeKalb County.

Personally appears R.J. Kelley of DeKalb 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 Oct 1836; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States and served as a Private in Company D, of 42 th Regiment of Ga Volunteers, Stovall 's Brigade; that whilst engaged in such military service in the State of , on the 19 day of March 1865, he was wounded, injured or diseased as follows: Was wounded at the battle of Bentonville N.C. in right knee-crippling leader. Also contracted piles while in service and from said wounds and disease he is unable to work for a support.

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 DeKalb County been allowed an invalid pension of Fifty Dollars, for the year 1900.

Sworn to and subscribed before me, this the 5th day of Dec 1901. R. J. Kelley Postoffice Decatur R.F.D. 4

W.M. Rogsdale Ordinary

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

STATE OF GEORGIA,
DeKalb County.

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

Affix your seal here.

W.M. Rogsdale
Ordinary DeKalb County.

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 De Kalb County been allowed an invalid pension of Dollars, for the year 189 Sixteen

Sworn to and subscribed before me, this the 22 day of Nov 1900. R. J. Kelly POST OFFICE

W. M. Rogsdale 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,
De Kalb **County.**

I, W. M. Rogsdale Ordinary of said County, do certify that I am well acquainted with R. J. Kelly the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 Nov 1900.

Affix your seal here.

W. M. Rogsdale
Ordinary De Kalb County.

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 De Kalb County been allowed an invalid pension of Fifty Dollars, for the year 1900.

Sworn to and subscribed before me, this the 5 day of Feb 1901. R. J. Kelly Postoffice

W. M. Rogsdale Ordinary

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

STATE OF GEORGIA,
De Kalb **County.**

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

Affix your seal here.

W. M. Rogsdale
Ordinary De Kalb 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 1902.

[L. S.]

Executed in presence of

Kelly R. J.
DeKalb Co.

(FOR THOSE ALREADY ENROLLED.)
CODE SECTION 1250.

No. 1202.

DISABLED
SOLDIER'S PENSION
1902.

Name Kelly R. J.
County De Kalb
Co. D Regiment 42nd
Disability Body + Disease
Amount, $ 50.
1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

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.

[L. S.]

Executed in presence of

Kelly R. J.
DeKalb Co.

(FOR THOSE ALREADY ENROLLED.)
CODE SECTION 1250.

No. 1331

DISABLED
SOLDIER'S PENSION
1903.

Name R. J. Kelly
County De Kalb
Co. D Regiment 42 A
Disability
Amount, $
1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta

Kelly R. J.
DeKalb Co.

(FOR THOSE ALREADY ENROLLED.)

No. 12 02

DISABLED

SOLDIER'S PENSION

1902.

Name Kelly R.J.
County DeKalb
Co. D Regiment 42 d
Disability Body + Disease
Amount, $ 50.

1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

Kelly R.J.
DeKalb Co. Ga.

CORRECTION 1903.

(FOR THOSE ALREADY ENROLLED.)

No. 331

DISABLED

SOLDIER'S PENSION

1903.

Name R.J. Kelly
County DeKalb
Co. D Regiment 42 d
Disability [illegible]
Amount, $ [illegible]

1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
DeKalb County.

Personally appears R.J. Kelly of DeKalb 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 Oct 1836; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States and served as a Private in Company D, of 42th Regiment of Ga Volunteers, Stovall's Brigade; that whilst engaged in such military service in the State of N.C., on the 19th day of March 1865, he was wounded, injured or diseased as follows: was wounded at battle of Bentonville N.C. and Contracted bilis from wound, wound & and disease he is unable to work for a support

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 DeKalb County, been allowed an invalid pension of [illegible] Dollars, for the year 1901.

Sworn to and subscribed before me, this the 15 day of Jan 1902. R.J. Kelly
Post-office
W.M. Ragsdale, Ordinary

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

STATE OF GEORGIA,
DeKalb County.

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

Given under my official signature and seal, this 15 day of Jan 1902.

Affix your seal here

W.M. Ragsdale
Ordinary DeKalb 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,
DeKalb County.

Personally appears R.J. Kelly of DeKalb 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 Oct 1836; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States and served as a Private in Company D, of 42 th Regiment of Ga Volunteers, Stovall's Brigade; that whilst engaged in such military service in the State of N.C., on the 19 day of March 1865 he was wounded, injured or diseased as follows: was wounded in right [illegible] and Contracted Bilis now in Condition that can not Learn a support

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 DeKalb County, been allowed an invalid pension of [illegible] Dollars, for the year 1902.

Sworn to and subscribed before me, this the 17th day of Jan. 1903. R.J. Kelly
Post-office
W.M. Ragsdale, Ordinary

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

STATE OF GEORGIA,
DeKalb County.

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

Given under my official signature and seal, this 17 day of Jan 1903.

Affix your seal here

W.M. Ragsdale
Ordinary [illegible] County.

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

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

Sworn to and subscribed before me, this the 15 day of Jan 1902. R J Kelly Post-office W M Rogsdale, Ordinary

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

STATE OF GEORGIA, DeKalb **County.**

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

Given under my official signature and seal, this 15 day of Jan 1902.

Affix your seal here

W M Rogsdale Ordinary DeKalb County.

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

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

Sworn to and subscribed before me, this the 17th day of Jan. 1903. R J Kelly Post-office W M Rogsdale, Ordinary

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

STATE OF GEORGIA, DeKalb **County.**

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

Given under my official signature and seal, this 17 day of Jan 1903.

Affix your seal here

W M Rogsdale Ordinary DeKalb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA, }
County. }

I, 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 1904.

[L. S.]

Executed in presence of

(CODE SECTION 1280.)
(FOR THOSE ALREADY ENROLLED.)
No. 217

DISABLED
SOLDIER'S PENSION
1904.

Name R J Kelly
County DeKalb
Co. C Regiment 42
Disability wounded knee
Amount, $ 50.00

1/25 1904.

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT HANDED TO

Kelly R.J. DeKalb County
Co. C 42 Ga
Disability
Amount $ 50.00

no date

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 1905.

[L. S.]

Executed in the presence of

(CODE SECTION 1280.)
(FOR THOSE ALREADY ENROLLED.)
No. 220

DISABLED
SOLDIER'S PENSION
1905.

Name R J Kelly
County DeKalb
Co. C Regiment 42 Ga
Disability
Amount, $ 50.00

Jan 23 1905.

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT HANDED TO

Kelly R.J. DeKalb County
Co. C 42 Ga
Disability
Amount $ 50.00

no date

CODE SECTION 1260.
(FOR THOSE ALREADY ENROLLED.)

No. 27

DISABLED
SOLDIER'S PENSION
1904.

Name R. J. Kelley
County De Kalb
Co. L Regiment 42
Disability wounded knee
Amount, $ 50.00

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT HANDED TO

Geo. W. Hardeman, State Printer, Atlanta.

no date

Kelly R.J. De Kalb County

CODE SECTION 1260.
(FOR THOSE ALREADY ENROLLED.)

No. 320

DISABLED
SOLDIER'S PENSION
1905.

Name R. J. Kelley
County De Kalb
Co. L Regiment 42 Ga
Disability
Amount, $ 50.00

January 23 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
De Kalb County.

Personally appears R. J. Kelley of De Kalb 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 Feby 1866; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Pvt in Company L, of 42 th Regiment of Ga Volunteers Stovall 's Brigade; that whilst engaged in such military service in the State of , on the 19 day of March 1865, he was wounded, injured or diseased as follows: Wounded in right knee Cured Comp Disa

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 De Kalb County, been allowed an invalid pension of Fifty Dollars, for the year 1903.

Sworn to and subscribed before me, this the 20 day of January 1904.

his
R. J. Kelley
mark

James R George Ordinary

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,
De Kalb County.

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

Given under my official signature and seal, this 20 day of January 1904.

James R George
Ordinary De Kalb County.

Affix your seal here.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
De Kalb COUNTY.

Personally appears R. J. Kelley of De Kalb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of 18 ; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a in Company L, of 42 th Regiment of Ga. Volunteers 's Brigade; that whilst engaged in such military service in the State of , on the 19 day of Jan 1865, he was wounded, injured or diseased as follows: Chronic disease, Hemmia, Bronchitis

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 De Kalb County, been allowed an invalid pension of Fifty Dollars, for the year 1904.

Sworn to and subscribed before me, this the 19th day of January 1905.

R. J. Kelley

James R George Ordinary

Post-office Decatur

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,
De Kalb COUNTY.

I, James R. George Ordinary of said County, do certify that I am well acquainted with R. J. Kelley the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 January 1905.

James R George
Ordinary De Kalb County.

Affix your seal here.

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

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 DeKalb County, been allowed an invalid pension of Fifty Dollars, for the year 1903.

Sworn to and subscribed before me, this the 20 day of January 1904. James R George Ordinary

R J Kelley his mark

Post-office

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

STATE OF GEORGIA, DeKalb County.

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

Given under my official signature and seal, this 20 day of January 1904.

James R George Ordinary. DeKalb County.

Affix your seal here.

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

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 DeKalb County, been allowed an invalid pension of Fifty Dollars, for the year 1904.

Sworn to and subscribed before me, this the 19th day of January 1905. James R George Ordinary

R J Kelley

Post-office Decatur

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, DeKalb COUNTY.

I, James R George Ordinary of said County, do certify that I am well acquainted with R J Kelley the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 January 1905.

James R George Ordinary DeKalb County.

Affix your seal here.

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

POWER OF ATTORNEY.

STATE OF GEORGIA, _____ 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 _____ 1906.

_____ [L. S.]

Executed in the presence of

_____

Code Section 1260. (FOR THOSE ALREADY ENROLLED.) No. 3243

DISABLED SOLDIER'S PENSION 1906.

Name R F Kelley Co. Ala Regiment 4th Ga

County DeKalb

Disability Right Knee

Amount, $ 50.00

1/23 1906.

JOHN W. LINDSEY, Commissioner of Pensions.

WARRANT HANDED TO

R F Kelley Lithia Springs Ga. R.F.D. 1

POWER OF ATTORNEY.

STATE OF GEORGIA, DeKALB. 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 _____ 1907.

[L. S.]

Executed in presence of

_____

Code Section 1260. (FOR THOSE ALREADY ENROLLED.) No. 3243

DISABLED SOLDIER'S PENSION 1907.

Name R F Kelley

County DeKalb

Co. A Regiment 4th Ga Vol

Disability Wound right knee

Amount, $ 50

1/31 1907.

JOHN W. LINDSEY, Commissioner of Pensions.

WARRANT HANDED TO

R F Kelley Lithia Springs R.F.D. 1

Code Section 1260.
(FOR THOSE ALREADY ENROLLED.)

No. 364

DISABLED
SOLDIER'S PENSION
1906.

Name R. J. Kelly
County De Kalb
Co. A Regiment 42 Ga
Disability Right Knee
Amount, $ 50.00 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Code Section 1260.
(FOR THOSE ALREADY ENROLLED.)

No. 364

DISABLED
SOLDIER'S PENSION
1907.

Name R. J. Kelly
County DeKALB
Co. D Regiment 42 Ga
Disability Wounded Right Knee
Amount, $ 50 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, Mgr. Franklin Printing Co., Atlanta.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
De Kalb County.

Personally appears R. J. Kelly of De Kalb 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 Feb 18 62 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 Soldier in Company D, of 42 th Regiment of Ga Volunteers Evans's Brigade; that whilst engaged in such military service in the State of Bentonville on the 19 day of March 1865, he was wounded, injured or diseased as follows:

Wounded in right knee, and contracted typhoid fever.

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 De Kalb County, been allowed an invalid pension of Fifty Dollars, for the year 1905.

Sworn to and subscribed before me, this the 17 day of January 1906.
James R George Ordinary

R. J. Kelly
Post-Office Decatur

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,
De Kalb County.

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

Given under my official signature and seal, this 17th day of January 1906.

James R George
Ordinary De Kalb County.

Affix your seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
DeKALB County.

Personally appears R J Kelly of DeKALB 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 Soldier in Company D, of 42 th Regiment of Georgia Volunteers Evans's Brigade; that whilst engaged in such military service in the State of , on the 19th day of March 1865, he was wounded, injured or diseased as follows:

Wound & Disease. Wounded Bentonville.

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 DeKALB County, been allowed an invalid pension of Fifty Dollars, for the year 1906.

Sworn to and subscribed before me, this the 15 day of January 1907.
James R George Ordinary

R. J. Kelly
Postoffice Decatur

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,
DeKALB County.

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

Given under my official signature and seal this 15 day of January 1907.

James R George
Ordinary DeKALB County.

Affix your seal here

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

in such military service in the State of [illegible], on the [illegible] day of Feb 186[illegible], he was wounded, injured or diseased as follows:

Wounded in right knee, and contracted fever

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 DeKalb County, been allowed an invalid pension of Fifty Dollars, for the year 1905.

Sworn to and subscribed before me, this the 17 day of January 1906.

R J Kelly

Post-Office Decatur

James R George Ordinary

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

State of Georgia,

DeKalb County.

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

Given under my official signature and seal, this 17th day of January 1906.

James R George

Ordinary DeKalb County.

Affix your seal here

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

Wound & Disease. Wounded Bentonville.

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 DeKALB County, been allowed an invalid pension of Fifty Dollars, for the year 1906.

Sworn to and subscribed before me, this the 15 day of January 1907.

R. J. Kelly

Postoffice Decatur

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,

DeKALB. County.

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

Given under my official signature and seal this 15 day of January 1907.

James R George

Ordinary DeKALB. County.

Affix your seal here

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

NAME Kelly, R J YEAR 1899 COUNTY DeKalb

WHEN AND WHERE BORN? February 18, 1836 - Resided in Georgia all life.

ENLISTED WHEN AND WHERE? March 4, 1862

RANK

COMPANY AND REGIMENT? Co D 42nd Regt. Georgia Vols Stovall's Brigade

NAME OF CAPTAIN AND COLONEL?

WOUNDED? March 9, 1865 - North Carolina - Shot with minie ball through the right knee at the battle of Bentonville, N C. - During the time in hospital applicant states he contracted chronic dissentery and piles, which trouble still disables him in trying to follow ordinary vocations.

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED? April 26, 1865

IF NOT PARoLED AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. H C Holcomb, J H Kelly, A C Burgess - same company. - No date

mh

NAME Kelly, R J YEAR 1899 COUNTY DeKalb

WHEN AND WHERE BORN? February 18, 1836 - Resided in Georgia all life.

ENLISTED WHEN AND WHERE? March 4, 1862

RANK

COMPANY AND REGIMENT? Co D 42nd Regt. Georgia Vols Stovall's Brigade

NAME OF CAPTAIN AND COLONEL?

WOUNDED? March 9, 1865 - North Carolina - Shot with minie ball through the right knee at the battle of Bentonville, N C. - During the time in hospital applicant states he contracted chronic dysentery and piles which trouble still disables him in trying to CAPTURED, WHEN AND WHERE? follow ordinary vocations.

RELEASED.

WHEN AND WHERE SURRENDERED? April 26, 1865

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. H C Holcomb, J H Kelly, A C Burgess - same company - No date

mh

Form No. 5.

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

Know all Men by these Presents, That I,

of

County, in said State, do hereby appoint

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

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

[L. S.]

Executed in the presence of us:

DIRECTIONS.

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

Widows' Pension

PAID TO

Mrs. Martha M. Kelley,

OF

Co. STY.

$100.00

Warrant Issued

1891

AND HANDED TO

Chas. W. Harrison, Public Printer, Atlanta.

Kelley, Sarah M.

Pd. Taft County

1891.

No. 3801

POWER OF

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

to from the State of Georgia as a widow of

affidavit; hereby authorizing my said attorne

be issued by the Governor, or for any sum of

aforesaid.

IN WITNESS WHEREOF, I

day of

Executed in the presence of us:

If allowed, send amount by

me at

COUNTY.

$100.00.

Warrant Issued

1891

AND HANDED TO

Geo. W. Harrison, State Printer Atlanta.

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA,

County.

Know all Men by these Presents, That I,

of

County, in said State, do hereby appoint

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

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

[L. S.]

Executed in the presence of us:

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 De Kalb } In person came before me, the undersigned Ordinary in and for the County of De Kalb

Mrs. Sarah M. Kelley, who being sworn according to law, says under oath that she is the widow of William Kelley, who was a soldier in the service of the Confederate States, and served as a member of Company H, of the 2d Regiment of Georgia Volunteers; that he enlisted in said service on or about the 27 day of April 1862, and was in the Confederate Army up to Sept 1862 That while in the Army, he was on the day of 186 2 (See Note No. 1)

He took Lowes and was sent to a hospital in Chattanooga Tenn, where he died of the fever on the 21st day of Sept 1862.

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 2 th day of May 1857, and that she has resided in Georgia continuously since the day of 1842; 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 20 day of April 1891. her Sarah M. Kelley mark

W. M. Mogsdale. Ordinary.

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

Kelley, Sarah M.
Widow
DeKalb County.

No. 3070

1891.

Widows' Pension

PAID TO

Mrs. Sarah M. Kelley

OF

DeKalb COUNTY.

$100.00.

Warrant Issued

1891

AND HANDED TO

Geo. W. Harrison, State Printer Atlanta.

DIRECTIONS.

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

Kelley, Sarah M.
De Kalb County

Widows' Pension

PAID TO

Mrs. Sarah M. Kelley

OF

DeKalb COUNTY.

$100.00.

Warrant Issued

1891

AND HANDED TO

No. 30 Act

1891

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 2 th day of May 1857, and that she has resided in Georgia continuously since the ____ day of ____ 1842; 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 20 day of April 1891.

her
Sarah M. X Kelley
mark

W. M. Rogsdale.
Ordinary.

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

Form No. 2.

Affidavit for Three Witnesses.

STATE OF GEORGIA,
County of DeKalb

In person came before me, the undersigned Ordinary in and for said County, witnesses M. Camp, W. Dee, and W. Rogsdale (each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge, Mrs. Sarah M. Kelley, of the County of DeKalb State of Georgia, is the widow of William Kelley, who was a soldier in Company H of the 2d Regiment of Georgia Volunteers. That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the 27th day of April 1862 That while in said service, or by reason of said service in the Army, he lost his life as follows: Said William Kelley was never heard from after he left Chattanooga en route for a hospital & there he died of the disease on the 21st day of Sept 1862.

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

Sworn to and subscribed before me, this the 23d day of May 1891.

W. M. Rogsdale.
Ordinary.

M. Camp
W. Dee
W. G. Rogsdale

Form No. 3.

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

STATE OF GEORGIA,
County of DeKalb

I, W. M. Rogsdale Ordinary in and for said County of DeKalb State of Georgia, hereby certify that I am acquainted with Mrs. Sarah M. Kelley 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 6th day of June 1891.

SEAL

W. M. Rogsdale
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 "*direc tions*" 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.

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.

We further swear that Mrs. Sarah M. Kelley was the wife of said soldier during the service, and that she has not intermarried since his death, and that she resides in De Kalb County of the State of Georgia.

Sworn to and subscribed before me, this the 23rd day of Nov 1891.

M. Kelly's dau.
Ordinary.

M Conyers
W. J. Lee
J. F. Ragsdale

Form No. 2.

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

STATE OF GEORGIA, County of De Kalb

I, W. H. Ragsdale Ordinary in and for said County of De Kalb State of Georgia, hereby certify that I am acquainted with Mrs. Sarah Kelley 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 William Kelley 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 26th day of Jany 1893.

[SEAL] W. H. Ragsdale Ordinary.

Form No. 5.

POWER OF ATTORNEY.

STATE OF GEORGIA, De Kalb County.

KNOW ALL MEN BY THESE PRESENTS, That I, Mrs Sarah Kelley of De Kalb County, in said State, do, hereby appoint D. Strickland of De Kalb 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 26th day of Jany 1893.

Sarah X Kelley [L. S.]
mark

Executed in the presence of us:
H. B. Reagin
W. H. Ragsdale

DIRECTIONS.

Send amount by _____ to me at _____ and oblige

Kelley, Sarah
De Kalb

FOR THOSE OF HEARTSTONE & KID.

No. 1011

1893.

Widows' Pension,

for year ending February 15th, 1893.

PAID TO

Mrs Sarah Kelley

OF

De Kalb COUNTY.

Warrant Issued

By

1893

AND HANDED TO

D. Strickland

Geo. W. Harrison, Stand Printer, Atlanta.

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 26th day of Dec 1892. [L. S.]

Executed in the presence of us:

DIRECTIONS.

Send amount by _____ to me at _____, and oblige

FOR THOSE HERETOFORE PAID.

1893.

No. 1011

Widows' Pension,

for year ending February 15th, 1893.

PAID TO

OF

COUNTY.

Warrant Issued

1893

AND HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

Form No. 1.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, County of _____ 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 _____ 1893. 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 _____ 1863 and served in the Army up to _____ 1864 That he lost his life on the _____ day of _____ 18__ (*State here full particulars of the husband's death, when, where and from what cause.*) (

)

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 1850; 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 26th day of Dec 1893.

_____ Ordinary.

Post-office _____

[illegible] Georgia [illegible] died [illegible] [illegible] 1893.

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 1850; 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 26th day of June 1893. [illegible] Ordinary.

Post-office [illegible]

Form No. 2.

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

STATE OF GEORGIA, County of De Kalb

I, W. M. Rogsdale, Ordinary in and for said County of De Kalb State of Georgia, hereby certify that I am acquainted with Mrs. S. M. Kelley the applicant for a pension in this case, and know, from my own knowledge (or from positive proof presented to me by reputable witnesses), that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of W. M. Kelley 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 26th day of June 1894.

(SEAL) W. M. Rogsdale Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, De Kalb County.

KNOW ALL MEN BY THESE PRESENTS, That I, Mrs S. M. Kelley of De Kalb County in said State, do hereby appoint W. E. Watson, of De Kalb 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 26th day of June 1894.

Mrs S. M. X Kelley mark [L. S.]

Executed in the presence of us:

J. S. Blalock,

W. M. Rogsdale,

Witnesses.

DIRECTIONS.

Send amount by to

me at , and oblige

Kelley, S. M. (Mrs.) De Kalb County

FOR THOSE HERETOFORE PAID.

1894.

No. 1052

WIDOWS' PENSION,

for year ending February 15th, 1894.

—PAID TO—

Mrs. S. M. Kelley.

—OF—

De Kalb County.

WARRANT ISSUED

1894.

AND HANDED TO

W. E. Watson

1894. W. HEMINGWAY, State Printer, ATLANTA.

Form No. 2.

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

STATE OF GEORGIA, County of De Kalb

I, W. M. Rogsdale, Ordinary in and for said County of De Kalb State of Georgia, hereby certify that I am acquainted with Mrs. S. M. Kelly the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to me by reputable witnesses), that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of W. M. Kelly 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 24th day of June, 1895.

(SEAL) W. M. Rogsdale Ordinary.

Form No. 3

POWER OF ATTORNEY.

STATE OF GEORGIA, De Kalb County.

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

In Witness Whereof, I have hereunto set my hand and seal, this 24th day of June 1895. Mrs S. M. X Kelly mark [L. S.]

Executed in the presence of us:

L. S. Duncan

W. M. Rogsdale,

Witnesses.

DIRECTIONS.

Send amount by to

me at , and oblige

Kelley, S. M. (Mrs.) De Kalb Co. Ga.

FOR THOSE HERETOFORE PAID.

1895.

No. 964

WIDOW'S PENSION,

for year ending February 15th, 1895.

—PAID TO—

Mrs. S. M. Kelley.

—OF—

De Kalb County.

widow of [illegible]

WARRANT ISSUED

1895.

AND HANDED TO

1895. W. HEMINGWAY, State Printer, ATLANTA.

of De Kalb 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 26th day of Jan 1894.

her
S M X Kelley
mark

[L. S.]

Executed in the presence of us:

J S Blalock,
W. Ragsdale
Redway

DIRECTIONS.

Send amount by to

me at , and oblige

Kelley, S M (Mrs.)
De Kalb County
FOR THOSE HERETOFORE PAID.

1894.

No. 1052

WIDOWS' PENSION,

for year ending February 15th, 1894.

—PAID TO—

M. S. M. Kelley.

—OF—

De Kalb County.

WARRANT ISSUED

AND HANDED TO

Wm. A. Wilson

1894.

Geo. W. Harrison, State Printer, Atlanta.

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

In Witness Whereof, I have hereunto set my hand and seal, this 24th day of Jan 1895.

her
S M X Kelly
mark

[L. S.]

Executed in the presence of us:

R. S. Duncan
W. M. Ragsdale
Redway

DIRECTIONS.

Send amount by to

me at , and oblige

Kelley, S M (Mrs.)
De Kalb County
FOR THOSE HERETOFORE PAID.

1895.

No. 964

WIDOW'S PENSION,

for year ending February 15th, 1895.

—PAID TO—

M. S. M. Kelley

—OF—

De Kalb County.

WARRANT ISSUED

AND HANDED TO

Wm. A. Wilson

1895.

Geo. W. Harrison, State Printer.

Form No. 1

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of De Kalb

Personally comes Mrs. S M Kelly

who being sworn, says on oath, that she is a bona fide resident of said County of De Kalb State of Georgia, and that she has *resided* in said State continuously ever since 1842 That she is the Widow of Wm T. Kelley who was a Soldier in Company H of the 2d Ga Cavalry Regiment of Volunteers, that he enlisted in said Regiment on or about the month of April 1862 and served in the Army up to Sept 1862 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.*) (

Took fever and died while in service at Chattanooga Tenn. on the 20th day of Sept 1862.

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1850; 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 1894.

her
S M X Kelley
mark

Ordinary.

Post-office Redan Ga.

Form 1.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of De Kalb

Personally Comes Mrs. S M Kelly

who being sworn, says on oath, that she is a bona fide resident of said county of De Kalb State of Georgia, and that she has *resided* in said State continuously ever since 1827 1833 That she is the Widow of William T. Kelly who was a Soldier in Company H of the 2d Regiment of Ga Volunteers, that he enlisted in said Regiment on or about the month of April 1862 and served in the Army up to Sept 1862 That he lost his life on the 21st day of Sept 1862 (*State here full particulars of the husband's death, when, where and from what cause.*) (

He had fever while in service and died of the disease at Chattanooga Tenn on date above given.

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 1850, 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 24th day of Jan 1895.

her
S M X Kelly
mark

W. M. Ragsdale Ordinary.

Post-office Redan Ga.

...and Chattanooga Tenn. on the 20th day of Sept 1862.

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1850; 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 ... 1894. Ordinary. Post-office Dekalb Co Ga.

Sarah E. Kelley, her mark

died of the disease at Chattanooga Tenn on date above given.

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 1850, 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 24th day of Jan 1895. W.M. Ragsdale Ordinary. Post-office Decatur Ga.

her Sarah X Kelley mark

Form No. 2.

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

STATE OF GEORGIA, County of DeKalb

I, Wm. Ragsdale, Ordinary in and for said County of DeKalb State of Georgia, hereby certify that I am acquainted with Mrs. Sarah Kelley 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 Wm G. Kelley 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 25th day of Jan 1896.

(SEAL) W.M. Ragsdale Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, County.

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

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

[L.S.]

Executed in the presence of

Kelley Sarah Dekalb Co

FOR THOSE HERETOFORE PAID.

1896.

No. 3146

WIDOW'S PENSION,

for year ending February 15th, 1896.

PAID TO

Mrs. Sarah E. Kelley

OF

DeKalb County,

widow of Wm G. Kelley,

WARRANT ISSUED 2/1 1896.

AND HANDED TO

Geo. W. Harrison, State Printer.

Form No. 2.

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

STATE OF GEORGIA, County of DeKalb

I, W.M. Ragsdale, Ordinary in and for said County of DeKalb State of Georgia, hereby certify that I am acquainted with Mrs. Sarah Kelley 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 William Kelley deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1896.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the 14th day of Jan 1897.

(SEAL) W.M. Ragsdale Ordinary.

Form No. 2.

POWER OF ATTORNEY.

STATE OF GEORGIA, DeKalb County.

I, Sarah E. Kelley hereby authorize W.M. Ragsdale 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 Jan 1897.

her Sarah X Kelley mark [L.S.]

Executed in the presence of

W.G. Kelly

W.M. Ragsdale Ordinary.

FOR THOSE HERETOFORE PAID.

1897.

No. 2002

WIDOW'S PENSION,

for year ending February 15th, 1897.

PAID TO

Mrs. Sarah E. Kelley

OF

DeKalb County,

widow of William Kelley

RICHARD JOHNSON, Commissioner of Pensions.

WARRANT ISSUED 2/1 1897.

AND HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

STATE OF GEORGIA, County.

I, hereby authorize

of to receive and receipt for the pension paid hereon and request

that he remit same to at

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

day of 1896.

[L.S.]

Executed in the presence of

FOR THOSE HERETOFORE PAID.

1896.

No. 3146

WIDOW'S PENSION,

for year ending February 15th, 1896.

PAID TO

Mrs. Sarah Kelly

OF

DeKalb County.

widow of Wm. Kelly,

WARRANT ISSUED

2/1 1896.

AND HANDED TO

[illegible]

GEO. W. HARRISON, State Printer.

STATE OF GEORGIA, DeKalb County.

I, Sarah Kelly hereby authorize [illegible] to receive and receipt for the pension paid hereon and request

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 Oct 1897.

her
Sarah X Kelly
mark

[L.S.]

Executed in the presence of

S. C. Kelly

[illegible]

FOR THOSE HERETOFORE PAID.

1897.

No. 2002

WIDOW'S PENSION,

for year ending February 15th, 1897.

PAID TO

Mrs. Sarah Kelly

OF

DeKalb County.

widow of William Kelly

WARRANT ISSUED

2/1 1897.

AND HANDED TO

[illegible]

RICHARD JOHNSON,
Commissioner of Pensions.

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

Form 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of DeKalb

Personally Comes Mrs. Sarah Kelly

who being sworn, says on oath, that she is a bona fide resident of said county of DeKalb State of Georgia, and that she has RESIDED in said State continuously ever since [illegible] 18 That she is the Widow of Wm. Kelly who was a Soldier in Company A of the 2d Regiment of Geo C.V. Volunteers, that he enlisted in said regiment on or about the month of March 1861 and served in the Army up to Sept 1862 That he lost his life on the 21st day of Sept 1862 (State here full particulars of the husband's death, when, where and from what cause.)

He had fever and died of the disease in a hospital at Chattanooga Tenn, on above date

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 [illegible], 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 DeKalb 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 24th day of June 1896.

[illegible] Ordinary.

her
Sarah X Kelly
mark

Post-office Decatur Ga.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of DeKalb

Personally Comes Mrs. Sarah Kelly

who being sworn, says on oath, that she is a bona fide resident of said county of DeKalb State of Georgia, and that she has RESIDED in said State continuously ever since [illegible] 1833 That she is the Widow of William Kelly who was a Soldier in Company A of the 2d Regiment of Geo Vol Volunteers, that enlisted in said regiment on or about the month of March 1861 and served in the Army up to Sept 1861 That he lost his life on the 21st day of Sept 1861, (State here full particulars of the husband's death, when, where and from what cause.)

had fever while in service and died in the house at Chattanooga Tenn

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 1852, 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 DeKalb 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 [illegible] day of [illegible] 1897.

[illegible] Ordinary.

her
Sarah X [illegible]
mark

Post-office [illegible]

on above date

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 8 0, 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 DeKalb 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 24th day of Jan 1896. W M Ragsdale, Ordinary.

her
Sarah X Kelly
mark

Post-office Decatur Ga.

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1852, 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 DeKalb 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 [illegible] day of [illegible] 1897. [illegible] Ordinary.

her
Sarah X Kelly
mark

Post-office [illegible]

POWER OF ATTORNEY.

State of Georgia, DeKalb County.

I, Sarah Kelly hereby authorize J. P. Blalock of [illegible] to receive and receipt for the pension paid hereon and request that he remit same to [illegible] at [illegible]

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 12th day of Jan 1898.

her
Sarah X Kelly
mark

[L. S.]

Executed in the presence of

O. A. Rankin
[illegible]
Ordinary.

Kelly, Sarah
DeKalb County
For Those Heretofore Paid

1898.

No. 3679

WIDOW'S PENSION,

For year ending February 15th, 1898.

PAID TO

Mrs. Sarah Kelly

OF

DeKalb County,

Widow of William Kelly

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

2/6 1898.

AND HANDED TO

J. P. Blalock

GEO. W. HARRISON, STATE PRINTER, ATLANTA

POWER OF ATTORNEY.

State of Georgia, DeKalb County.

I, Sarah Kelly hereby authorize J. P. Blalock of DeKalb to receive and receipt for the pension paid hereon and request that he remit same to at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 13 day of Jan 1899.

her
Sarah X Kelly
mark

[L. S.]

Executed in presence of

S. C. Doby
W. M. Ragsdale
Ordinary

Kelly, Sarah
DeKalb County
For Those Heretofore Paid.

1899.

No. 2555

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAID TO

Mrs. Sarah Kelly

OF

DeKalb County

Widow of William Kelly,

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

2/1 1899.

AND HANDED TO

J. P. Blalock

GEO. W. HARRISON, STATE PRINTER, ATLANTA

Kelly, Sarah
DeKalb County

For Those Heretofore Paid

1898.

No. 3649

WIDOW'S PENSION,

For year ending February 15th, 1898.

PAID TO

Mrs. Sarah Kelly

OF

DeKalb County,

Widow of William Kelly

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

2/16 1898.

AND HANDED TO

J. P. Blalock

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

Kelly, Sarah
DeKalb County

For Those Heretofore Paid.

1899.

No. 2555

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAID TO

Mrs. Sarah Kelly

OF

DeKalb County

Widow of William Kelly

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

2/1 1899.

AND HANDED TO

J. P. Blalock

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of DeKalb

Personally Comes Mrs. Sarah Kelly

who, being sworn, says on oath, that she is a bona fide resident of said county of DeKalb State of Georgia, and that she has RESIDED in said State continuously ever since Nov 1833 That she is the Widow of William Kelly who was a Soldier in Company H of the 2d Regiment of Ga Cavalry Volunteers, that he enlisted in said regiment on or about the month of March 1861 and served in the Army up to 1861 That he lost his life on the 21st day of Sept 1861 (State here full particulars of the husband's death, when, where and from what cause.)

Had fever and died of the disease at Chattanooga Tenn.

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 1850.

I have been allowed a pension as a resident of DeKalb 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 12th day of Jan 1898. W. M. Ragsdale, Ordinary.

Sarah her X mark Kelly

Post-Office Redan

State of Georgia, DeKalb County.

I W. M. Ragsdale, Ordinary of said County, certify that I am well acquainted with Mrs. Sarah Kelly 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 13 day of Jan 1898.

W. M. Ragsdale, Ordinary of DeKalb County.

(Official Seal.)

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of DeKalb

Personally Comes Mrs. Sarah Kelly

who, being sworn, says on oath, that she is a bona fide resident of said county of DeKalb State of Georgia, and that she has RESIDED in said State continuously ever since. Nov 1833 That she is the Widow of William Kelly who was a soldier in Company H of the 2d Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of March 1861 and served in the Army up to Sept. 1861 That he lost his life on the 21st day of Sept 1861. (State here full particulars of the husband's death, when, where and from what cause.)

Had fever and died of the disease at Chattanooga Tenn.

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 1850.

I have been allowed a pension as a resident of DeKalb 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 13 day of Jan 1899. W. M. Ragsdale, Ordinary.

Sarah her X mark Kelly

Post-Office

State of Georgia, DeKalb County.

I W. M. Ragsdale, Ordinary of said County, certify that I am well acquainted with Mrs. Sarah Kelly 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 Nov 1833

Given under my official signature and seal this the 13th day of Jan 1899.

W. M. Ragsdale, Ordinary of DeKalb County.

(Official Seal.)

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 1850.

I have been allowed a pension as a resident of DeKalb 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 12th day of Jan 1898. W.M. Ragsdale, Ordinary.

Sarah her X mark Kelly
Post-Office Kedar

State of Georgia, DeKalb County.

I W.M. Ragsdale, Ordinary of said County, certify that I am well acquainted with Mrs. Sarah Kelly 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 13 day of Jan 1898.

W.M. Ragsdale, Ordinary of DeKalb County.

(Official Seal.)

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 1850.

I have been allowed a pension as a resident of DeKalb 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 13 day of Jan 1899. W.M. Ragsdale, Ordinary.

Sarah her X mark Kelly
Post-Office

State of Georgia, DeKalb County.

I W.M. Ragsdale, Ordinary of said County, certify that I am well acquainted with Mrs. Sarah Kelly 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 Nov 1833

Given under my official signature and seal this the 13th day of Jan 1899.

W.M. Ragsdale, Ordinary of DeKalb County.

(Official Seal.)

POWER OF ATTORNEY.

STATE OF GEORGIA, DeKalb County.

I, Sarah Kelly hereby authorize J.P. Blalock of DeKalb 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 Jan 1900.

Sarah her X mark Kelly [L. S.]

Executed in presence of
G. Ragsdale
W.M. Ragsdale
Ordinary.

To Those Heretofore Paid.

1900.

No. 1055

WIDOW'S PENSION,

For year ending February 15th, 1900.

PAID TO Mrs. Sarah Kelly

DeKalb County,

Widow of William Kelly

JNO. W. LINDSEY, Commissioner of Pensions.

WARRANT ISSUED Feby 14 1900,

AND HANDED TO J.P. Blalock

Kelley, Sarah, DeKalb Co. Ga.

POWER OF ATTORNEY.

STATE OF GEORGIA, DeKalb County.

I, Mrs Sarah Kelley hereby authorize J P Blalock of De Kalb 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 9 day of Jan 1901.

her
Mrs Sarah X Kelley [L. S.]
mark

Executed in presence of
Thos Young
W.M. Ragsdale
Ordinary.

To Those Heretofore Paid.

1901.

No. 335

WIDOW'S PENSION,

For year ending February 15th, 1901.

PAID TO Mrs. Sarah Kelley

DeKalb County.

Widow of Wm Kelley

JOHN W. LINDSEY, Commissioner of Pensions.

WARRANT ISSUED Feb 14 1901,

AND HANDED TO J P Blalock

Kelley, Sarah, DeKalb Co. Ga.

Kelley, Sarah
DeKalb County

To Those Heretofore Paid.

1900.

No. 1057

WIDOW'S PENSION,

For year ending February 15th, 1900.

PAID TO

Mrs. Sarah Kelley

P.O. [illegible] County,

Widow of William Kelley

JNO. W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
July 14 1900,
AND HANDED TO
J P Blalock

Geo. W. Harrison, State Printer, Atlanta

Kelley, Sarah
DeKalb Co.

To Those Heretofore Paid,

1901.

No. 325

WIDOW'S PENSION,

For year ending February 15th, 1901.

PAID TO

Mrs. Sarah Kelley

P.O. DeKalb County.

Widow of Wm Kelley

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
Dec 1901,
AND HANDED TO
W Blalock

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

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of [illegible] } Personally Comes Mrs. [illegible]

who, being sworn, says on oath, that she is a bona fide resident of said county of [illegible] State of Georgia, and that she has RESIDED in said State continuously ever since [illegible] 18[illegible]. That she is the Widow of [illegible] who was a soldier in Company [illegible] of the [illegible] Regiment of [illegible] Volunteers, that he enlisted in said regiment on or about the month of [illegible] 186[illegible] and served in the Army up to [illegible] 186[illegible]. That he lost his life on the [illegible] day of [illegible] 18[illegible]. (*State here particulars of the husband's death, when, where and from what cause*) [illegible]

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

I have been allowed a pension as a resident of [illegible] County for the year ending February 15th, 189[illegible], and now apply for the pension provided by law for the year ending February 15th, 1900.

Sworn to and subscribed before me, this [illegible] day of [illegible] 1900. Ordinary.

Sarah X Kelley
Post Office [illegible]

State of Georgia, [illegible] County.

I [illegible] Ordinary of said County, certify that I am well acquainted with Mrs. Sarah Kelley, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the [illegible] day of [illegible] 18[illegible].

Given under my official signature and seal, this the [illegible] day of [illegible] 1900.

Official Seal.

[illegible]
Ordinary of [illegible] County.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of DeKalb } Personally Comes Mrs. Sarah Kelley

who, being sworn, says on oath, that she is a bona fide resident of said County of DeKalb State of Georgia, and that she has RESIDED in said State continuously ever since Nov 1833. That she is the Widow of William Kelley who was a soldier in Company H of the 2d Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of March 186[illegible] and served in the Army up to Sept [illegible] 186[illegible]. That he lost his life on the 2[illegible] day of [illegible] 1861. (*State here particulars of the husband's death, when, where and from what cause*) Had fever and died in Columbia S.C.

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 1850

I have been allowed a pension as a resident of DeKalb 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 9th day of Jan 1901. W M Ragsdale Ordinary.

Sarah X Kelley
Post Office Redan, Ga.

State of Georgia, DeKalb County.

I W M Ragsdale Ordinary of said County, certify that I am well acquainted with Mrs. Sarah Kelley, 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 Nov 1833

Given under my official signature and seal, this the 9th day of Jan 1901.

Official Seal.

W M Ragsdale
Ordinary of DeKalb County.

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

I have been allowed a pension as a resident of [illegible] County for the year ending February 15th, 189[illegible], and now apply for the pension provided by law for the year ending February 15th, 1900.

Sworn to and subscribed before me, this [illegible] day of [illegible] 1900. [illegible] Ordinary.

Sarah X Kelly
her mark
Post Office [illegible]

State of Georgia, [illegible] County.

I [illegible] Ordinary of said County, certify that I am well acquainted with Mrs. Sarah Kelly, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the [illegible] day of [illegible] 18[illegible].

Given under my official signature and seal, this the [illegible] day of [illegible] 1900.

{Official Seal.}

[illegible]
Ordinary of [illegible] County.

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 a pension as a resident of DeKalb 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 9th day of Jan 1901. W M Rogsdale Ordinary.

Sara[illegible] her mark X Kelley
Post Office Redan, Ga.

State of Georgia, DeKalb County.

I W. M. Rogsdale Ordinary of said County, certify that I am well acquainted with Mrs. Sarah Kelley, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the [illegible] day of Nov 1833

Given under my official signature and seal, this the 9th day of Jan 1901.

{Official Seal.}

W M Rogsdale
Ordinary of DeKalb County.

POWER OF ATTORNEY.

STATE OF GEORGIA, DeKalb County.

I, Mrs. Sarah Kelly, hereby authorize J. P. Blalock of DeKalb to receive and receipt for the pension paid hereon, and request that he remit same to [illegible] at [illegible].

In Witness Whereof, I have hereunto set my hand and seal, this 17" day of Jan 1902.

Mrs Sarah X Kelly her mark [L. S.]

Executed in presence of

W M Rogsdale
Ordinary

POWER OF ATTORNEY.

STATE OF GEORGIA, DeKalb County.

I, Sarah Kelly, hereby authorize J. P. Blalock of DeKalb to receive and receipt for the pension paid hereon, and request that he remit same to [illegible] at [illegible].

In Witness Whereof, I have hereunto set my hand and seal, this 9" day of Jan 1903.

Sarah X Kelly her mark [L. S.]

Executed in presence of

W & E Robertson
W M Rogsdale
Ordinary

To Those Heretofore Paid.

1902.

No. 420

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO Mrs. Kelly Sarah

OF DeKalb County,

Widow of William Kelly

Co. H Regiment 2nd

JOHN W. LINDSEY, Commissioner of Pensions.

WARRANT ISSUED 1/20 1902

AND HANDED TO J P Blalock

To Those Heretofore Paid.

1903.

No. 260

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO Mrs. Sarah Kelly

OF DeKalb County,

Widow of William Kelly

Co. H Regiment 2nd

JOHN W. LINDSEY, Commissioner of Pensions.

WARRANT ISSUED 1/23 1903.

AND HANDED TO J P Blalock

To Those Heretofore Paid.

1902.

No. 420

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO Mrs. Nelly Sarah

De Kalb County,

Widow of William Kelly

Co. H Regiment 2nd.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED 1/20 1902

AND HANDED TO Mr Balcom

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

To Those Heretofore Paid.

1903.

No. 260

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO Mrs. Sarah Kelly

De Kalb County,

Widow of William Kelly

Co. H Regiment 2nd

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED 1/23 1903.

AND HANDED TO Mr Balcom

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

2311

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of De Kalb } PERSONALLY COMES MRS. Sarah Kelly

who, being sworn, says on oath, that she is a bona fide resident of said County of De Kalb State of Georgia, and that she has RESIDED in said State continuously ever since Jan 1833. That she is the Widow of William Kelly who was a soldier in Company H of the 2nd Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of May 1861, and served in the Army up to Sept 1861. That he lost his life on the 21st day of Sept 1861 (*State here particulars of the husband's death, when, where and from what cause.*) had fever while in service and died at Chattanooga Tenn

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 1850

I have been paid a pension as a resident of De Kalb 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 15 day of Jan 1902 W.M. Ragsdale Ordinary. } her Sarah × Kelly mark Post Office De Kalb

State of Georgia, De Kalb County. } I, W.M. Ragsdale Ordinary of said County, certify that I am well acquainted with Mrs. Sarah Kelly, 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 1833

Given under my official signature and seal this the 15 day of Jan 1902

{ Official Seal }

W.M. Ragsdale Ordinary of De Kalb County.

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

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of De Kalb } PERSONALLY COMES MRS. Sarah Kelly

who, being sworn says on oath, that she is a bona fide resident of said County of De Kalb State of Georgia, and that she has RESIDED in said State continuously ever since Jan. 1833. That she is the Widow of William Kelly who was a soldier in Company H of the 2nd Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of March 1861, and served in the Army up to Sept 1861. That he lost his life on the 21st day of Sept 1861 (*State here particulars of the husband's death, when, where and from what cause.*) had fever while in service and died at Chattanooga Tenn

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 1850

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

Sworn to and subscribed before me, this 7 day of Jan 1903 W.M. Ragsdale Ordinary. } her Sarah × Kelly mark Post Office Decatur Ga

State of Georgia, De Kalb County. } I, W.M. Ragsdale Ordinary of said County, certify that I am well acquainted with Mrs. Sarah Kelly, 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 1833

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

{ Official Seal }

W.M. Ragsdale Ordinary of De Kalb County.

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

continuously ever since Jan 1833. That she is the Widow of William Kelly who was a soldier in Company H of the 2nd Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of March 1861, and served in the Army up to Sept 1861. That he lost his life on the 21st day of Sept 1861 (State here particulars of the husband's death, when, where and from what cause) had fever while in service and died at Chattanooga while in 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, and that she became his wife in the year 1838

I have been paid a pension as a resident of DeKalb 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 15 day of Jan 1902 WM Rogsdale, Ordinary. Her Sarah X Kelly mark Post Office

State of Georgia, DeKalb County. I, WM. Rogsdale, Ordinary of said County, certify that I am well acquainted with Mrs. Sarah Kelly, 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 1833

Given under my official signature and seal, this the 15 day of Jan 1902

(Official Seal) WM Rogsdale Ordinary of DeKalb County.

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

DeKalb State of Georgia, and that she has RESIDED in said State continuously ever since Jan 1833, That she is the Widow of William Kelly who was a soldier in Company H of the 2nd Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of March 1861, and served in the Army up to Sept 1861. That he lost his life on the 21st day of Sept 1861 (State here particulars of the husband's death, when, where and from what cause) had fever while in service and died at Chattanooga Tenn

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 1838

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

Sworn to and subscribed before me, this 7 day of Jan 1903 WM Rogsdale, Ordinary. Her Sarah X Kelly mark Post Office Decatur Ga

State of Georgia, DeKalb County. I, WM Rogsdale, Ordinary of said County, certify that I am well acquainted with Mrs. Sarah Kelly, 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 1833

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

(Official Seal.) WM Rogsdale Ordinary of DeKalb County.

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

Kelly, W. L.
Co. K, 36th Ga.
No. 21

INDIGENT PENSION,
1901.

Name Kelly W. L.
County DeKalb
Co. K, 36th Ga Reg'm't
Approved 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta.

9/12 1902

POWER OF ATTORNEY.

STATE OF GEORGIA, }
County. }

I, _____ of _____ 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 _____ 1901. [L. S.]

Executed in presence of

_____

Approved 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta.

9/12-1902

TTORNEY.

hereby authorize

est that he remit same t

by

day of 1901.

[L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, hereby authorize

of

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

at by

Witness my hand and seal, this day of 1901.

[L. S.]

Executed in presence of

Questions for Applicant.

STATE OF GEORGIA,

DeKalb County.

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

1. What is your name and where do you reside? (give State, County and post office) W. L. Kelly Tucker DeKalb Co Ga
2. How long and since when have you been a resident of this State? since the year 1832 - 72 years a resident
3. When and where were you born? Gwinnett Co Ga - 1832
4. When and where and in what company and regiment did you enlist in service? - in Cummings Co Ga Co A 36 Ga Regt in year 1862
5. How long did you remain in such company and regiment? - until the surrender - about 3 years -
6. When and where was your company and regiment surrendered and discharged? - Near Greensboro - N C -
7. Were you present with your company and regiment when it was surrendered? No -
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? - was at home in Gwinnett County on sick furlough - was from Hospital in Atlanta Order of Surgeon in year 1862
9. How much can you earn (gross) per annum by your own exertions or labor? Nothing
10. What has been your occupation since 1865? - Milling -
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"?
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 ground, state fully the character and extent of the infirmity and how it was caused. If upon the third, state whether you are totally blind and when and where you lost your sight. I have had the palsy for years - and was afflicted - with sore eyes on both sides - but am clear from that disease - been unable to work
13. What property, real or personal, or income, do you possess, and its gross value? - House and lot and one Cow - & hogs
14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899 and 1900, and what disposition, if any, by sale or gift, have you made of same? - None
15. In what County did you reside during those years, and what property did you then return for taxation? - see Forsyth - Walton & Gwinnett Counties
16. How were you supported during the years 1899 and 1900? - by friends & relations -
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? - about 100.00 - Furnished and made by me myself
18. What was your employment during 1898 and 1899? 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? - Wife - daily - two Grandchildren - other means of support
20. Are you receiving any pension? If so, what amount and for what disability? No -
21. Have you ever made an application for pension before? - No
22. How many applications have you ever made and under what class? None

Every question must be Answered.

Sworn to and subscribed before me this the 28th day of Aug 1902

W. L. Kelly Applicant.

W. M. Cassell C. C. Ordinary.

D. C. Tuck County.

Kelly W. L.
No.
DeKalb Co. Ga.

INDIGENT PENSION, 1901.

Name Kelly W. L.
County DeKalb
Co. K 36 Ga Reg't

Approved 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta.

9/12-1902

Kelly, W. L.
Co. K, 36th Ga. Regt.

No.

INDIGENT PENSION, 1901.

Name Kelly, W. L.

County DeKalb

Co. K, 36th Ga. Regt'm't 1901.

Approved

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Jesse M. Harrison, State Printer, Atlanta.

9/2-1902

Every Question Must Be Answered.

poverty," second, "infirmity 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, state in detail complete history of the infirmity and its cause; if upon the third, state whether you are totally blind and when and where you lost your sight. — My eyes – left the poles for upon – and was on Officials – with cataracts on both eyes – but Chas from chronic diseases – been unable to work

13. What property, real or personal, or income, do you possess, and its gross value? — None – one mule one cow – & buggy

14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899 and 1900, and what disposition, if any, by sale or gift, have you made of same? — None

15. In what County did you reside during those years, and what property did you then return for taxation? — in Fayette – Mother & Guardian Caswell

16. How were you supported during the years 1899 and 1900? — by friends & relatives —

17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? — about 100.00 – farmed and hauled by me & others

18. What was your employment during 1898 and 1899? 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? — Wife – daughter – Mrs Comstock & family – all other means of support

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

21. Have you ever made an application for pension before? — No

22. How many applications have you ever made and under what class? — None

Sworn to and subscribed before me this the 28th day of Aug 1902

W. L. Kelly, Applicant.

W. M. Rosseter, Ordinary.

DeKalb County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
DeKalb COUNTY.

Jno W. Veal of said State and County, having been presented as a witness in support of the application of W. L. Kelly 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? — Jno W. Veal – Atlanta – Ga –
2. Are you acquainted with the applicant; if so, how long have you known him? — W. L. Kelly, Thirty four years
3. Where does he reside, and how long and since when has he been a resident of this State? — DeKalb County – a resident from 1832 to 40 years
4. When, where and in what company and regiment did he enlist, and how do you know? — Co – K, 36 Geo Regt – enlisted May 1862 – in Guinney's Co
5. Were you a member of the same company and regiment? — yes –
6. How long did he perform regular military duty? — from 1862 to Surrender
7. When and where was his command surrendered? — Sumpter – 1865 – Meare Greensboro N C – as Major –
8. Were you present when it surrendered? — No –
9. Was applicant present? — No –
10. If he was not present, where was he? — in Guinney's Co on sick furlow
When did he leave his command? — 1864 For what cause? — on sick furlow
By what authority he left? — Of the Surgeon of Hospital How do you know all of this? — having been member of same Co & Regt & Div & Brigade generally by the officers & Company
11. What property, effects or income has the applicant? (Give your means of knowledge.) — None
12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899 and 1900, and what disposition, if any, did he make of same? — Usually assessed of Personal – personal of not worth more than $500.00
13. Has he transferred 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? — Miller – Run Grist failing rapidly from Arteriosclerosis & decaying – Septic & Rheumatic –
15. Is the applicant unable to support himself by labor of any sort, if so, why? — yes –
16. How was he supported during the years 1898, 1899 and 1900? — friends & relatives
17. What portion of his support for these three years was derived from his own labor or income? — Not a cent – own – Children –
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? — Many years afflicted with ruptured & at times a sufferer from rheumatism – caused a general breaking down of manhood
19. What interest have you in the recovery of a pension by this applicant? — None –

Sworn to and subscribed before me, this the 27th day of Aug 1902

Jno W. Veal, Witness.

John R Wilkinson, Ordinary.

I Certify that Jno W. Veal is a Truthworthy character and entitled to full faith and credit this 27th August 1902 John R Wilkinson Ordinary

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
DeKalb COUNTY.

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

Double Inguinal Hernia (Scrotal) Chronic Cystitis Piles Senile Debility Old Age

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 1st day of Sept 1902

W. J. Houston M. D.
W. S. Manley M. D.

W. M. Rosseter, Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
DeKalb COUNTY.

I, W. M. Rosseter, Ordinary in and for said County, hereby certify that the applicant W. L. Kelly resides in said County, and has been a bona fide resident of this State since the ____ day of ____ 1852 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 hereon prescribed, and that the full text of the affidavits was read to the applicant and witness before same was signed.

I further certify that the tax digests of DeKalb County show that applicant returned for taxation in his name in 1899 None Dollars of property, and in 1900 None Dollars of property.

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

Witness my hand and seal of office, this 1st day of Sept 1902.

W. M. Rosseter, Ordinary,
of DeKalb 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.

By what authority he left? Of the Surgeon of Hospital How do you know all of this? Having been member of Same C. S. Regt Dec Known generally by all of our Company

11. What property, effects or income has the applicant? (Give your means of knowledge.) None

12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899 and 1900, and what disposition, if any, did he make of same? Small amount of Personal - Pension of not more than $5000

13. Has he transferred 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? - Miller - Can Scarcely Walking. respirably from Asthmatic Weakness - Rupture & Rheumatism

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

16. How was he supported during the years 1898, 1899 and 1900? - friends & relatives

17. What portion of his support for these three years was derived from his own labor or income? Not a cent out of his own

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1754, Code? Many years afflicted with rupture & at times a sufferer from rheumatism - Cannot a ground Walking down of Manhood

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

Sworn to and subscribed before me, this } Jno W Veal

the 27th day of Aug 1902 Witness.

John R Wilkinson Ordinary.

I Certify that Jno W Veal is of trustworthy character and entitled to full faith and credit this 27th August 1902 John R Wilkinson Ordinary

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, }
De Kalb COUNTY. }

I, W M Rogdace Ordinary in and for said County, hereby certify that the applicant W L Kelly resides in said County, and has been a bona fide resident of this State since the day of 1852 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 hereon prescribed, and that the full text of the affidavits was read to the applicant and witness before same was signed.

I further certify that the tax digests of De Kalb County show that applicant returned for taxation in his name in 1899 None Dollars of property, and in 1900. - None Dollars of property.

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

Witness my hand and seal of office, this 1st day of Sept 1902,

W M Rogdace Ordinary,
of De Kalb County

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA, }
De Kalb County. }

I, W L Kelly hereby authorize W M Rogdace of De Kalb County

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

at

by

Witness my hand and seal, this 10 day of Jan 1903.

W L Kelly [L. S.]

Executed in presence of

O B Yancey
J H Gordon

CODE SECTION 1754
(FOR THOSE ALREADY ENROLLED.)
No. 8 8 8

INDIGENT
SOLDIER'S PENSION
1903.

Name Kelly W L
County De Kalb
Co. K Regiment 2d

WARRANT ISSUED
1 3 1903

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Ady

Geo. Harrison, State Printer, Atlanta

W L Kelly
De Kalb Co. Ga

POWER OF ATTORNEY.

STATE OF GEORGIA, }
DeKalb County. }

I, W L Kelly hereby authorize A G Chewning of DeKalb County Ga

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

at Tucker Ga

by

Witness my hand and seal, this 15 day of January 1904.

W L Kelly [L. S.]

Executed in presence of

Jno R Wilkinson
Ordinary

CODE SECTION 1754
(FOR THOSE ALREADY ENROLLED.)
No. 640

INDIGENT
SOLDIER'S PENSION
1904.

Name W L Kelly
County De Kalb
Co. K Regiment 2d

WARRANT ISSUED
1 30 1904

JOHN W LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
A G Chewning

Geo. W. Harrison, State Printer, Atlanta

Kelly W L
Co K 2d Ga Regt

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)
No. 88

INDIGENT
SOLDIER'S PENSION
1903.

Name Kelly W.L.
County De Kalb
Co. K Regiment 36

WARRANT ISSUED
1 23 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Agt

Geo. Harrison, State Printer, Atlanta.

W.L. Kelly Co K 36 Ga Vol

Talley, W.L.
Dekalb County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)
No. 620

INDIGENT
SOLDIER'S PENSION
1904.

Name W.L. Kelly
County DeKalb
Co. K Regiment 36

WARRANT ISSUED
1 20 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Col R. Lawson

Geo. W. Harrison, State Printer, Atlanta.

Too Late

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
De Kalb County.

Personally appears W L. Kelly of De Kalb 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 11th day of Nov 1832; that he is 71 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 3 years, in Company K, of 36 th Regiment of Ga Vol; that his physical condition is as follows: Age and Infirmity caused from Chronic Diarrhoea.

that his property consists of the following items: None

of the value of 0 Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of De Kalb county been allowed a pension for the year 1 Prior Reg nor.

Sworn to and subscribed before me, this the 10 day of Jan 1903.
W M Ragsdale Ordinary. W L. Kelly

STATE OF GEORGIA,
De Kalb County.

I, W M Ragsdale Ordinary of said County, do certify that I am well acquainted with W L. Kelly the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1903.
W M Ragsdale
Ordinary De Kalb County.

Affix your seal here.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
DeKalb County.

Personally appears W L Kelly of DeKalb 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 Nov 1832; that he is 71 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 3 years in Company K, of 36 th Regiment of Ga Vols; that his physical condition is as follows: Age and Infirmity Caused from Chronic Dysentery.

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 1904. I have heretofore as a resident of DeKalb County been allowed a pension for the year 1 1903

Sworn to and subscribed before me, this the 15 day of January 1904.
W L Kelly
James R George Ordinary.

STATE OF GEORGIA,
DeKalb County.

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

Given under my official signature and seal, this 15 day of January 1904.
James R George
Ordinary DeKalb County.

Affix your seal here.

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

of the value of 0 0 Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

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

M M Rogsdale Ordinary. W D L Kelly

STATE OF GEORGIA,
DeKalb County.

I, M M Rogsdale Ordinary of said County, do certify that I am well acquainted with W D L Kelly the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1903.

Affix your seal here. M M Rogsdale Ordinary DeKalb County.

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

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of DeKalb County been allowed a pension for the year 1 103

Sworn to and subscribed before me, this the 15 day of January 1904.

W L Kelly
James R George Ordinary.

STATE OF GEORGIA,
DeKalb County.

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

Given under my official signature and seal, this 15 day of January 1904.

Affix your seal here. James R George Ordinary DeKalb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
DeKalb COUNTY.

I, W D Kelly hereby authorize W F Tilkin of Clarkston Ga to receive and receipt for the pension allowed, and request that he remit same to W D Kelly at Clarkston Ga by.....

WITNESS my hand and seal, this 14th day of January 1905.

W D Kelly [L. S.]

Executed in the presence of
James R George
Ordinary

Kelly W. L.
DeKalb County

CODE SECTION 1354.
(FOR THOSE ALREADY ENROLLED.)
No. 6 744

INDIGENT
SOLDIER'S PENSION
1905.

Name W. L. Kelly
County DeKalb
Co. M Regiment 3 Ga Cav

WARRANT ISSUED 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO W F Tilkin

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

no date

Kelly, W. L.
DeKalb County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 6445

INDIGENT SOLDIER'S PENSION 1905.

Name W. L. Kelley
County DeKalb
Co. H Regiment 36 Ga.

WARRANT ISSUED 1/23 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
W. L. Kelley

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

No date

Affidavit
Widow

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
DeKalb County.

Personally appears W. L. Kelley of DeKalb 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 75 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 36 th Regiment of Ga Vol; that his physical condition is as follows: Old & Feeble

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of DeKalb County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the 14th day of January 1905.
James R. George Ordinary.

W. L. Kelley
Affiant

STATE OF GEORGIA,
DeKalb County.

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

Given under my official signature and seal, this 14th day of January 1905.

James R. George
Ordinary DeKalb County.

Affix your Seal here

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

follows: [illegible]

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of DeKalb County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the 14th day of January 1905. W. L. Kelly

James R. George Ordinary.

STATE OF GEORGIA,
DeKalb County.

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

Given under my official signature and seal, this 14th day of January 1905.

James R. George

Affix your seal here

Ordinary DeKalb County.

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

NAME Kelly, W. L. YEAR 1902 COUNTY DeKalb

WHEN AND WHERE BORN? 1832 - Gwinnett County, Georgia

ENLISTED WHEN AND WHERE? 1862 - Gwinnett County, Georgia

RANK.

COMPANY AND REGIMENT? Company K, 36th Georgia Regt.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? Sick in hospital in Atlanta, Georgia, during service in 1864 and furloughed home.

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? 1864 furloughed home from hospital at Atlanta, Georgia on account of being sick, and did not reutrn to service.

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. John J. Veal - same command -- No data.
lw

WHEN AND WHERE BORN? 1832 - Gwinnett County, Georgia

ENLISTED WHEN AND WHERE? 1862 - Gwinnett County, Georgia

RANK.

COMPANY AND REGIMENT? Company K, 36th Georgia Regt.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? Sick in hospital in Atlanta, Georgia, during service in 1864 and furloughned home.

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? 1864 furloughned home from hospital at Atlanta, Georgia on account of being sick, and did not reutrn to service.

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. John M. Veal - same command -- No data.
lw

State Dept. Public Welfare,
Atlanta, Dec. 3, 1937.

Thos. R. Kendall was elected
Jr. 2d Lt., Co. E, 3d Batln.
Ga. Inf. Aug. 8, 1861....
Transferred to Co. C, 37th Regt.
Ga. Inf. and elected 1st Lt.
Transferred to Co. A, 4th Batln.
Ga. Sharpshooters 1863. Elected
Captain 1864. Surrendered, Greens-
boro, N. C., Apr. 26, 1865.

Director Confederate Records Div.

RECORD O. K.

Widow's Application

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

County DeKalb

Name Mrs. T. R. Kendall, Sr.

Widow of T. R. Kendall, Sr.

Date of Marriage June 8, 1886

Date of Husband's Death Oct. 5, 1936

Company & 3rd Batln. Sharpshooters

Regiment 37th Regt.

Approved DEC 27 1937 193

Director.

AUG 11 1937

Ordinary's Certificate

STATE OF GEORGIA,

DeKalb COUNTY.

I, V. S. Morgan, Ordinary of said County, do certify that I know Mrs. T. R. Kendall, Sr. 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 See Yellow Slip 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 10 day of August 193 7.

(SEAL OF ORDINARY) V. S. Morgan, Ordinary.

of DeKalb 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.

...Director.

AUG 11 1937

...Ordinary of said County, do certify

...the applicant for pension; that

been, continuously, a bona fide resident

ge Yellow Slip

iage; that both of them are now residents

foregoing affidavits, and that they are

faith and credit.

August ...193 7.

...Ordinary.

DeKalb ...County.

cate

ich the applicant or witness resides and must be

arriage, by some person, or by general reputation

be State. A short, simple form is easier to handle

ecting a pension.

State Dept. Public Welfare,
Atlanta, Dec. 3, 1937.

Tes. T. R. Kendall was elected
2Lt. 2d Lt., Co. B, 3d Battn.
Ga. Inf. Aug. 8, 1861.....
Transferred to Co. C, 37th Regt.
Ga. Inf. and elected 1st Lt.
Transferred to Co. A, 4th Battn.
Ga. Sharpshooters 1863. Elected
Captain 1864. Surrendered, Greens
boro, N. C., Apr. 26, 1865.

...Director Confederate Records Div.

AUG 11 1937

Widow's Application

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

County DeKalb

Name Mrs. T. R. Kendall, Sr.

Widow of T. R. Kendall, Sr.

Date of Marriage June 8 1886

Date of Husband's Death Oct. 5 1936

Company & Regiment 3rd Ga. Regt.

Approved Dec 6, 1937 ...193...

...Director.

Ordinary's Certificate

STATE OF GEORGIA,

DeKalb COUNTY.

I, V. S. Morgan, Ordinary of said County, do certify that I know Mrs. T. R. Kendall, Sr. 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 Sea Yellow Slip 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 10 day of August 193 7.

(SEAL OF ORDINARY) V. S. Morgan, Ordinary.

of DeKalb County.

INSTRUCTIONS:

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

APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,

DeKalb COUNTY.

Personally appears before me, Mrs. T. R. Kendall, Sr. 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. T. R. Kendall - 544 Church St., Decatur, DeKalb County, Ga.
2. How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? All life
Give date, or year, of your birth. Jan. 26, 1859 Age? 78 years
3. (1)When, (2)where and (3)to whom were you married?
Married June 8, 1886 at Rome, Georgia to T. R. Kendall, Sr.
a. Have you married since the death of first and soldier husband? no
b. When and where did your first husband die? Died Oct. 5, 1936 at Decatur, Ga.
c. Were you residing together when he died? yes
d. If not, how long had you resided apart? x
e. Are you now a widow? yes Husband.
f. Have you or your husband heretofore been paid a pension by the State? Yes-from Fulton County
g. If so, when and for what cause were you or your husband placed on the roll? Service in Confederate Army

SECTION II.

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

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

2. When and where did the Commands of your husband surrender or discharge from the Service?

3. Was your husband personally present with his Command when it was surrendered or discharged?

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

Sworn to and subscribed before me, this the 22 day of July, 193 7.

V. S. Morgan, Ordinary

of DeKalb County.

(SEAL OF ORDINARY)

Mrs T R Kendall Sr.
Applicant.

State D
Atlanta

Los. R
ea. Ed
ea. Ins
Transfer
Transfer
Da. Shar
Da. Shar
Spain
boro, M.

DIRECTOR

Widow's Application

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

County DeKalb
Name Mrs. T. R. Kendall, Sr.
Widow of T. R. Kendall, Sr.
Date of Marriage June 8 1886
Date of Husband's Death Oct. 5 1936
Company E 3rd Regt. Cav.
Regiment 3rd Regt. Cav.
Approved DEC 07 1937 193
Director.

AUG 11 1937

Ordinary's Certificate

STATE OF GEORGIA,

DeKalb COUNTY.

I, V. S. Morgan, Ordinary of said County, do certify that I know Mrs. T. R. Kendall, Sr. 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 See Yellow Slip 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 10 day of August 193 7.

(SEAL OF ORDINARY) V. S. Morgan, Ordinary.

of DeKalb 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.

Personally appears before me, Mrs. T. R. Kendall, Sr. 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. T. R. Kendall - 544 Church St., Decatur, DeKalb County, Ga.
2. How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? All life
Give date, or year, of your birth. Jan. 26, 1859 Age? 78 years
3. (1)When, (2)where and (3)to whom were you married? Married June 8, 1886 at Rome, Georgia to T. R. Kendall, Sr.
a. Have you married since the death of first and soldier husband? no
b. When and where did your first husband die? Died Oct. 5, 1936 at Decatur, Ga.
c. Were you residing together when he died? yes
d. If not, how long had you resided apart? x
e. Are you now a widow? yes
f. Have you or your husband heretofore been paid a pension by the State? Husband. Yes-from Fulton County
g. If so, when and for what cause were you or your husband placed on the roll? Service in Confederate Army

SECTION II.

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

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

2. When and where did the Commands of your husband surrender or discharge from the Service?

3. Was your husband personally present with his Command when it was surrendered or discharged?

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

Sworn to and subscribed before me, this the 22 day of July, 193 7.

V. S. Morgan, Ordinary

of DeKalb County.

(SEAL OF ORDINARY)

Mrs. T R Kendall Sr.
Applicant.

Kenney Jackson
DeKalb Co.
(from Terrell 1896)

ACT OF 15 DEC., 1894.

(For Those Already Enrolled.)

~~From Terrell Co 1896~~
No. 2 ~~Terrell Co 1898~~

INDIGENT

Soldier's Pension.

1897.

Name Jackson Kenney
County DeKalb

July 14 1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
Applet

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

No Date

POWER OF ATTORNEY.

STATE OF GEORGIA, }
County. }

I, _____ of _____ 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 _____ 1897.

[L. S.]

Executed in presence of

July 14 1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
Applet

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

No date

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

)
)
)

INDIGENT
Soldier's Pension.
1897.

(For Those Already Enrolled.)
Act of 1895, 1896.
Act of 1897, Pg 45
No. 4 Harrell Co 1898

Name Richard Lawrence
County DeKalb

July 14 1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
Applet

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

No date

POWER OF ATTORNEY.

STATE OF GEORGIA,
DeKalb County.

I, _____ hereby authorize

_____ of _____

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

_____ at _____

by _____

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

_____ [L. S.]

Executed in presence of

Cross Section 1254.
(FOR THOSE ALREADY ENROLLED)

INDIGENT
SOLDIER'S PENSION
1907.

Name _____
County _____
Co. _____ Regiment

WARRANT ISSUED
_____ 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

ACT OF 1894–1991.

(For Those Already Enrolled)

No. 9 Gwinnett Co 1896
No. 9 Gwinnett Co 1898

INDIGENT

Soldier's Pension.

1897.

Name Jackson Kenney

County DeKalb

Jan 14 1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

Code Section 1254.

(FOR THOSE ALREADY ENROLLED)

INDIGENT

SOLDIER'S PENSION

1907.

Name

County

Co. Regiment

WARRANT ISSUED 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
DeKalb County.

Personally appears Jackson Kenney of DeKalb Co who drew from Capt Terrell's Co in the 1st Ga Regt in the Mexican War, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continously ever since the 27th day of July 1813; that he is 83 years old and by occupation a [illegible]; 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 Nine months in Company D, of 11 th Regiment of Georgia Militia; that his physical condition is as follows: Suffering from a bowel trouble and is so deaf he can not hear and is aged can not work that his property consists of the following items No property except House hold and Kitchen furniture of the value of Thirty 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 Terrell Co county been allowed a pension for the year 1896.

Sworn to and subscribed before me, this the 11th day of June 1897.

Jackson Kenney

W. M. Logsdon Ordinary.

STATE OF GEORGIA,
DeKalb County.

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

Given under my official signature and seal, this 11th day of June 1897.

Affix your seal here

W. M. Logsdon

Ordinary DeKalb County.

NOTE—The blanks space must be filled.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
DeKalb County.

Personally appears Jackson Kinney of DeKalb 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 [blank] day of [blank] 18[blank]; that he is [blank] years old and by occupation a [blank], that he enlisted in the military service of the Confederate States (or of the State of [blank]) during the war between the States, and served for the term of [blank] in Company [blank], of 11 th Regiment of [blank]; that his physical condition is as follows: Infirmity, Poverty and age

that his property consists of the following items:

of the value of [blank] Dollars. I am now earning by my labor, [blank] 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 DeKalb County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 17th day of January 1907.

[blank] Ordinary.

State of Georgia,
DeKalb County.

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

Given under my official signature and seal this 17th day of January 1907.

Affix your seal here

Ordinary DeKalb County.

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

of the value of Twenty 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 Berrells county been allowed a pension for the year 1896.

Sworn to and subscribed before me, this the 11th day of Jan 1897. Jackson Kinney

W. M. Rogers Ordinary.

STATE OF GEORGIA,
DeKalb County.

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

Given under my official signature and seal, this 11th day of Jan 1897.

Affix your seal here

W. M. Rogers

Ordinary DeKalb County.

NOTE—The blanks space must be filled.

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 DeKalb County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 17th day of January 1907.

_____ Ordinary.

State of Georgia,
DeKalb County.

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

Given under my official signature and seal this 17th day of January 1907.

Affix your seal here

Ordinary DeKalb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
DeKalb (COUNTY.)

I, Jackson Kinney hereby authorize F. M. Kinney of DeKalb county

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

at Edenkatton

by

Witness my hand and seal, this 19 day of January 1904.

[illegible]

Executed in presence of

James R. Gurr
Coalition

Kinney Jackson
DeKalb County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED)
No. 67

INDIGENT
SOLDIER'S PENSION
1904.

Name Jackson Kinney
County DeKalb
Co. Regiment

WARRANT ISSUED 1905 1904.

JOHN W. LINDSEY, Commissioner of Pensions

WARRANT HANDED TO F. M. Kinney
Agent to Receive and Receipt for Warrant

Date

Kenney Jackson
DeKalb County

CODE SECTION 1284.
(FOR THOSE ALREADY ENROLLED
ON SPECIAL LIST 1903)
No. 567

INDIGENT
SOLDIER'S PENSION
1904.

Name Jackson Kenney
County DeKalb
Co. Regiment

WARRANT ISSUED 1905 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
F M Kenney

Geo. W. Harrison, State Printer, Atlanta.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
DeKalb County.

Personally appears Jackson Kinney of DeKalb 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 27 day of July 1813; that he is 90 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 9 months in Company D, of 11th Regiment of Georgia Militia; that his physical condition is as follows: Loss of eye Left side old age

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 1904. I have heretofore as a resident of DeKalb County been allowed a pension for the year 1

his X mark

Sworn to and subscribed before me, this the 14 day of Jany 1904.
James R George Ordinary.

STATE OF GEORGIA,
DeKalb County.

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

Given under my official signature and seal, this 14 day of Jany 1904.

Affix your Seal here.

James R George
Ordinary DeKalb County.

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

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 DeKalb County been allowed a pension for the year 1_____

Sworn to and subscribed before me, this the 19 day of Jany 1904.

James R George Ordinary.

STATE OF GEORGIA,
DeKalb County.

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

Given under my official signature and seal, this 19 day of Jany 1904.

Affix Your Seal here.

James R George
Ordinary DeKalb County.

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

POWER OF ATTORNEY.
REVISED, 1899.

No. 88.

Published by J. W. Burke & Co., Stationers, Printers, Stereotypers a[illegible]

STATE OF GEORGIA, Spalding COUNTY.

KNOW ALL MEN BY THESE PRESENTS:

That Jackson Kinney of Spalding Co Georgia have constituted, made and appointed, and by these presents do make, constitute and appoint J. M. Kenney of Decatur County Ga true and lawful Attorney for me and in my name, place and stead, to To [illegible] my name to Pension Paper and Collect the same and receipt in the name and for my use and benefit as though I was personally present [illegible]

giving and granting unto said Attorney full and whole power and authority in and about the premises, and generally to do and perform all and every act and acts, thing and things, device and devices, in the law whatsoever needful and necessary to be done in and about the premises; and for and in my name to do, execute and perform, as largely and amply, to all intents and purposes, as might or could do, if were personally present; and an Attorney or Attorneys under for the purpose aforesaid to make and substitute; hereby ratifying and confirming all that said Attorney or substitute shall lawfully do by virtue hereof.

In Witness Whereof, have hereunto set my hand and seal the 4 day of December in the year of our Lord One Thousand Nine Hundred and 04 (1904)

Sealed and delivered in presence of:

A J [illegible]
Geo B Hendleton
Notary Public
Spalding Co Ga

Jackson X Kenney mark Seal
Seal
Seal

Jackson Kenny

giving and granting unto Them said Attorney full and whole power and authority in and about the premises, and generally to do and perform all and every act and acts, thing and things, device and devices, in the law whatsoever needful and necessary to be done in and about the premises; and for Him, and in My name to do, execute and perform, as largely and amply, to all intents and purposes, as I might or could do, if I were personally present; and an Attorney or Attorneys under Him for the purpose aforesaid to make and substitute; hereby ratifying and confirming all that They said Attorney or substitute shall lawfully do by virtue hereof.

In Witness Whereof, I have hereunto set My hand and seal the 4th day of December in the year of our Lord One Thousand Nine Hundred and four (1904)

Sealed and delivered in presence of:

A J Sears
Geo B Handleton
Notary Public
Spalding Co Ga

Jackson Kenny (Seal)
(Seal)
(Seal)

GEORGIA, Terrell County.

I, the undersigned, do certify that Jackson Kenny now Pensioner of this county, is on the Pension roll and draws a pension of Sixty Dollars for 1907. The bearer is the same man of Co. Company 11th Ga. Regiment, who enlisted on day of May 1864, and was discharged on the Surrender 1865, was granted a pension $60.00 for 1896-1900.

Proven by A. L. Cuttenden and T. L. Thrasher witnesses.

Given under my hand and official seal this the 11th day of Oct. 1906.

H. H. Cheatham
Ordinary's L. S.

(SEAL)

USE ROBINSON'S CIPHER.

F. M. KENNEY.
MERCHANDISE BROKER.
Flour, Grain and Provisions, Specialties.
No 20 E ALABAMA ST.

Clarkston Ga January 5 1907

Mr J W Roberts Ordy
Dawson Ga

Dear Sir

Yours of 1st inst to hand and note what you say about it not being necessary for me to have your certificate I went yesterday to see the Ordinary of this

State of Georgia }
Terrell County } Ordinary's Office

I, J. W. Roberts, Ordinary of said County, do hereby certify that [illegible]

[illegible]

J. W. Roberts
Ordinary

GEORGIA, Terrell County.

I, the undersigned, do certify that Jackson Kenny now Pensioner of this county, is on the Pension roll and draws a pension of Sixty Dollars for 1907. The bearer is the same man of D Company 11th Ga. Regiment, who enlisted on day of May 1864, and was discharged on the Surrender 1865, was granted a pension $ 60.00 for 1896-1900.

Proven by A. L. Cittenden and T. C. Chapman witnesses.

Given under my hand and official seal this the 11th day of Oct. 1906.

J. W. Cheatham
Ordinary's L. S.

(SEAL)

USE ROBINSON'S CIPHER.

F. M. KENNEY,

MERCHANDISE BROKER.

Flour, Grain and Provisions, Specialties.

No 20 E. ALABAMA ST.

Clarkston Atlanta Ga. January 5 1907

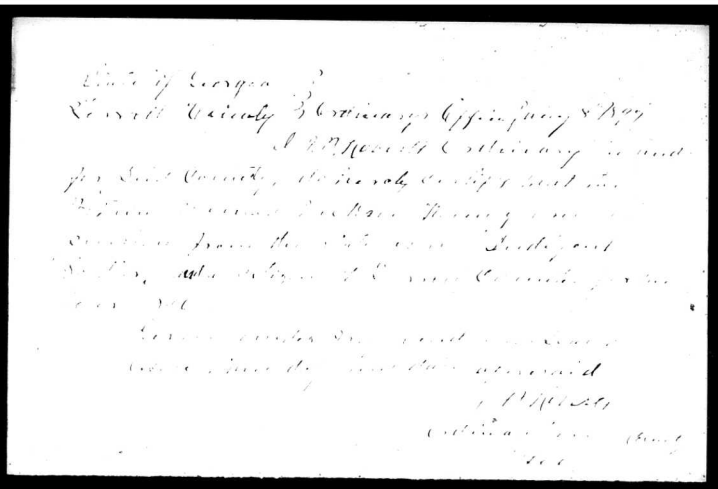
Mr J W Roberts Ordy
Dawson Ga

Dear Sir

Yours favor 1st inst to hand and note what you say about it not being necessary for me to have your certificate I went yesterday to see the Ordinary of this

State of Georgia }
Terrell County } Ordinary's Office

[illegible]



Kennedy, John H.
DeKalb County.

E 763 No. [illegible]

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County ~~[illegible]~~ DeKalb

Name John Kennedy

Company E,

Regiment 63, Ga. Reg.

Approved

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

Ordinary's Certificate

STATE OF GEORGIA,
..... COUNTY.

I, ... Ordinary of said County, certify that I know the applicant ..... for person is the person he represents himself to be and resides in said county. That I also know of [illegible] public witness swearing to the service; that ~~they are~~ residents of said county and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this ..... day of 1920

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

(SEAL.)

NOTES: 1. Before any questions are answered the Ordinary must administer the following oath: "You do solemnly swear that you will true answers make to such 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 desired, but the above must be filled out.
3. All applications must be sworn to before the Ordinary of the county in which the applicant or witness resides and must be certified by such Ordinary.

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

5/20

...y, certify that I know
...emis himself to be and
...witness swearing to the
...or signing the forego-
...titled to full faith and

...y.....19 20

Ordinary's Certificate

STATE OF GEORGIA,
Taylor COUNTY.

I, C. H. Riley 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 L. Wm. Stuetman the witness swearing to the service, that ~~he~~ is a resident of Taylor County and ~~were~~ 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 15 day of May 1920

C. H. Riley Ordinary
of Taylor County.
(SEAL)

I Wish Mercy Into Jim Kennedy
C.H. Riley Ord T.C.

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and 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 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.

Kennedy, John T.
Co. F, 63 Ga. Inf.

No. 63

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1919

County ~~Taylor~~ DeKalb
Name John Kennedy
Company F
Regiment 63 Ga. Inf.
Approved

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

Application for Soldier's Pension Under Act 1910
Amended by Act 1919

Questions For Applicants to Answer

STATE OF GEORGIA,
DeKalb COUNTY.

John Kennedy 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) John Kennedy DeKalb County Kirkwood
2. How long and since when have you been a continuous resident citizen of this State? 65 years
3. Did you enlist in the Army of the Confederate States or in the organized militia of this State from 1861 to 1865? In Confederate States
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) Army 1st 1863 Compy E=63 Ga Regt
5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge) From time I Enlisted Till close of war 1865 N&I
6. When and where was your Company and Regiment surrendered or discharged from the Service? April 1865 Macon Ga
7. Were you actually present with your command when it was surrendered or discharged? I was
8. If you were not actually present, state specifically and clearly where you were. Paroled
   a. Where was your command when you left it? did not leave till war closed
   b. When did you leave the command? Surrender
   c. For what cause did you leave? ~~Surrender~~
   d. By whose authority did you leave? ~~Surrender~~
   e. For how long was your leave granted? In what way? ~~Surrender~~
   f. Why did you not return to your command after leave expired? ~~Surrender~~
   g. In what way were you prevented? did not leave
   h. What effort did you make to return? ~~Surrender~~
   i. Were you captured during the war? was not
   j. If so, when, and where? In what prison were you held and when were you released? ~~Surrender~~
9. Are you drawing a pension of any amount from this State or the United States? I am not
10. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? have not this is my first Application

Sworn to and subscribed before me, this the 31 day of May 1920

James R. George Ordinary
of DeKalb County.
(SEAL)

John his X Kennedy
mark

Kennedy, John T.
E 63

No.

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County ... DeKalb

Name ... John T. Kennedy

Company ... G

Regiment ... U. S. Ga. Regt

Approved ...

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

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

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

a. Where was your command when you left it? did not leave till war closed

b. When did you leave the command? Surrender

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? did not leave

h. What effort did you make to return?

i. Were you captured during the war? was not

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

9. Are you drawing a pension of any amount from this State or the United States? I am not

10. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? have not this is my first application

Sworn to and subscribed before me, this the 31 day of May 1920

James Pleasant Ordinary

of DeKalb County.

(SEAL)

John T. Kennedy
Mark

Questions for Witness as to Service

STATE OF GEORGIA,

Dayton COUNTY.

I, Ira Strickman of said State and County is hereby presented as a witness in support of the application of John Kinsey 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? I Ira Strickman Howard Dayton County Georgia

2. How long and since when have you known John Kinsey the applicant? I only know him who was in Army about 3 yrs

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? Atlanta Ga I dont know know long he has live in the State

4. When, where and in what Company and Regiment did John Kinsey enlist during war from 1861 to 1865? (Give date and place.) Co. B 63 Ga Regt Enlisted Ga Jan 10th 1863

5. How did you obtain your information of this Service? was in same Co. & Reg.

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date) Jan 10th 1863 till April 9th 1865

7. When and where was his command surrendered or discharged (give date and place) Surrender April 9th 1865 Macon Ga

8. Were you personally present at the surrender? Yes

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

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

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

12. When did he leave his command? April 9th 1865 Where was his command when he left it? Macon Ga For what cause did he leave? His Com officer By whose authority did he leave? and how long was he granted leave? His Wor Awan How do you know all that you have stated to be true? If of your own knowledge, tell clearly and specifically. I know was there His Sanction John Kinsey

13. In what way was he prevented from returning to his command? was over How do you know? I was there with Kinsey

14. What effort did he make to return to his command and how do you know? All of us was His Father

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 15th day of May 1920

A. H. Riley Ordinary

of Dayton County.

(SEAL)

Ira Strickman

1. What is your name and where do you reside? I Wm Strickman
Harwood Taylor County Georgia

2. How long and since when have you known John Kinedy the applicant?
I only Knew him while in Army about 2 yrs

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? Atlanta Ga I Learn Mrs Kinedy
Was living the two lives in the State

4. When, where and in what Company and Regiment did John Kinedy enlist during war from 1861 to 1865? (Give date and place.) Co E 63 Ga Inf Lassley Ga June 1st 1863

5. How did you obtain your information of this Service? Was him Some
Co E Reg

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date) June 1st 1863 Till April 9th 1865

7. When and where was his command surrendered or discharged (give date and place) Surrendered
April 9th 1865 Macon Ga

8. Were you personally present at the surrender? Yes

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

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

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

12. When did he leave his command? April 9th 1865 Where was his command when he left it? Macon Ga For what cause did he leave? His
By whose authority did he leave Com officer and how long was he granted leave? His Wor Orlan How do you know all that you have stated to be true? If of your own knowledge, tell clearly and specifically. I
Know I was there His Some Time John Kinedy

13. In what way was he prevented from returning to his command? was com
How do you know? I was There With Kinedy

14. What effort did he make to return to his command and how do you know?
All I was was His Father

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 15th day of May 1922
A H Riley Ordinary
of Taylor County.
(SEAL)

Wm Strickman

Kennedy, John H.
DeKalb Co.

1921

Application for Pension Due Deceased Soldier

(UNDER ACT 1891)

(To be paid his Widow or Dependent Children)

BY

Mrs. M C J Kennedy
Widow of John H Kennedy
of DeKalb County

~~Widow~~ New

Date of Death Nov 5th 1920

Approved and ordered paid.

_____ 1921.

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.

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 the _____ Pension Roll and paid from _____ County for 19__.

Witness my hand this _____ day of _____, 192__.

Attested before me:

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 _____ County, and was paid a Pension from _____ County for 19__, and at the time of his death on the _____ day of _____, 1921, 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 _____, 1921.

(SEAL.)

_____ Ordinary
_____ County.

~~Widow~~ New

Date of Death Nov 5th 1920

Approved and ordered paid.

_____ 1921.

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.

_____ County

_____, Ordinary of said County, do certify

_____, the applicant, and that she

_____, and was on

_____ County, and was paid

_____ County for 19__, and at the time

_____ 1921, there was due to

_____ Dollars from the State

_____, the within

arracter and entitled to full credit.

of _____, 1921.

_____ Ordinary

_____ County.

_____, of said County, my

my name, for the Pension due me for 192__,

_____, who was on

_____ County for 19__

_____, 192__

Application for Pension Due Deceased Soldier

(To Be Paid to His Widow or Dependent Children)

UNDER ACT APPROVED OCTOBER 9, 1891.

STATE OF GEORGIA, DeKalb County.

Personally before me comes Mrs. M. C. Kennedy, of said County, who after being duly sworn, on oath says that she is the widow of John H. Kennedy who was duly enrolled as a New Pensioner from the County of DeKalb and was paid a Pension of $125.00 Dollars from DeKalb County for 1921, and that the said John H. Kennedy died in DeKalb County on the 5 day of Nov, 1920 and at the time of his death a Pension of $125.00 was due him from DeKalb County and unpaid for 1921.

Applicant further swears that she married the said John H. Kennedy on the 9 day of July, 1871, in Fulton 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 that the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 31 day of Jany, 1921

James R. George, Ordinary.
DeKalb County.
(SEAL.)

M. C. Kennedy (L. S.)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, _____ County

Personally before me comes _____, who on oath says that he knew _____ while in life and that he knows Mrs. _____, the above applicant; that he knows that _____ and _____ were in due form of law married in the County of _____ in the State of _____ on the _____ day of _____, 18__, and that they resided together as husband and wife from date of marriage to the day of his death on the _____ day of _____, 19__, and I know that she is his dependent widow.

Marriage Record Not Produced with Pension Papers

Sworn to and subscribed before me this _____ day of _____, 1921.

_____, Ordinary.
_____ County.
(SEAL.)

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 witness.
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 26th, 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.

who was duly enrolled as a [illegible] Pensioner from the County of DeKalb and was paid a Pension of $125.00 Dollars from DeKalb County for 1921, and that the said John H. Kennedy died in DeKalb County on the 5 day of May, 1920 and at the time of his death a Pension of $125.00 was due him from DeKalb County and unpaid for 1921. Applicant further swears that she married the said John H. Kennedy on the 9 day of July, 1871, in Fulton 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 that the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 31 day of January, 1922

James R. Georgo, Ordinary.
DeKalb County.
(SEAL.)

M. E. Kennedy (L. S.)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, [illegible] **County**

Personally before me comes [illegible], who on oath says that he knew [illegible] while in life and that he knows Mrs. [illegible], the above applicant; that he knows that [illegible] and [illegible] were in due form of law married in the County of [illegible] in the State of [illegible] on the [illegible] day of [illegible], 18[illegible], and that they resided together as husband and wife from date of marriage to the day of his death on the [illegible] day of [illegible], 19[illegible], and I know that she is his dependent widow.

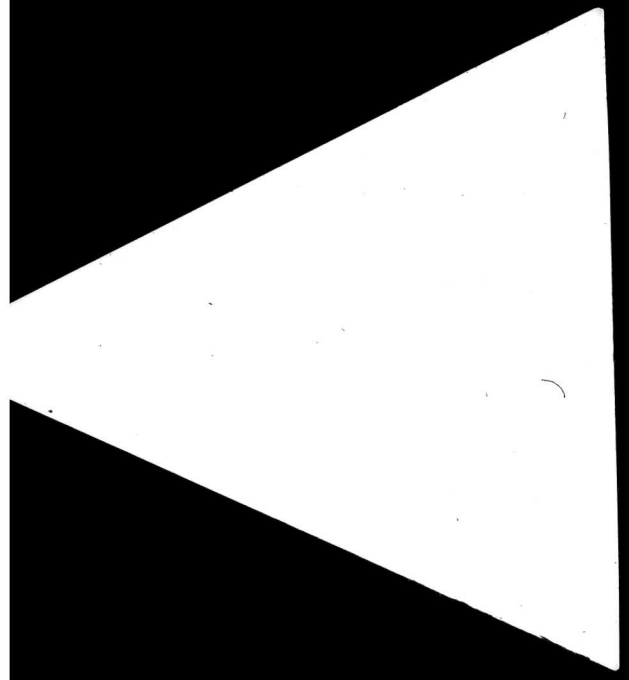
Marriage Record Book [illegible] Page [illegible]
Pension Roll [illegible]

Sworn to and subscribed before me this [illegible] day of [illegible], 1921.

[illegible], Ordinary.
[illegible] County.
(SEAL.)

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 witness.
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 28th, 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.



Ordinary's Certificate

STATE OF GEORGIA,
Paulding COUNTY.

I, C. A. Riley Ordinary of said County, do certify that I know Mrs. Sarah Frances Mrs. Murray the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th November 1908; that I also know C. D. Strickman 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 1921

(SEAL) C. A. Riley Ordinary.
Paulding County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person or by general reputation.

Kennedy, Mary C.
Dekalb County
Apr 1922

No. E-63

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County DeKalb
Name Mary C. Kennedy
Widow of [illegible]
Company
Regiment
Approved

Sent Nov. 1922.
Add'l papers on file here.

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-25-1921

Regiment .....

Approved .....

Died Nov. 1920.
Had pension
papers on file
here.

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-25-1921.

Certificate

.....Ordinary of said County, do certify
.....the applicant for pension. She
a bona fide continuing resident citizen of said County
w..... Strutsman
t both of them are now residents of said County and
affidavits and that they both are truthful, trust-
h and credit.
his 25th day of October 1921
.....Ordinary,
.....County

y shall swear applicant and the witness in the following words:
were make to each of the questions asked you and the evidence
spaces are insufficient.
1881, are entitled.
y of the residence of the person to be sworn and certified by
tainable. If not, prove marriage, by some person, or by general

Ordinary's Certificate

STATE OF GEORGIA,
Dawson COUNTY.

I, C. C. H. Riley Ordinary of said County, do certify that I know Mrs. Mary E. Kennedy 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. W. Strutsman 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 1921

(SEAL) C. C. H. Riley Ordinary,
Dawson 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. Addit onal affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Kennedy, Mary E.
Apr 1922
DeKalb County

No. E-63

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County DeKalb
Name Mary E. Kennedy
Widow of John H. Kennedy
Company F
Regiment 63
Approved .....

died Nov. 1920.
Had pension
papers on file
here.

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-25-1921.

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

Questions for Applicant

STATE OF GEORGIA,
DeKalb COUNTY.

Personally before me comes Mrs. Mary E. Kennedy 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. Mary E. Kennedy
2. How long and since when have you been a continuing resident of the State of Georgia? 71 years all My life
3. When, where and to whom were you married? July 9th 1873 Atlanta Ga to John H. Kennedy
4. Have you married since the death of first and soldier husband? have Not
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.) Confederate Army Jan 1st 1863 Farwell Ga Company E-63 Ga Regiment
6. When and where did the commands of your husband surrender or discharge from the army? Understand Greensboro N.C
7. Was your husband personally present at the time of the surrender or discharge of this command? Understand he was
8. If he was not present state clearly where he was? Present & Married to me
9. Where was his command when he left? did Not Leave
   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? ~~
   c. What was his physical condition when he left his command? did Not Leave
   f. What effort did he make to return to his command? did Not Leave
   g. In what way was he prevented from going back to Command ~~
   h. Was he captured by the enemy at any time? was Not
   i. If so, when and where captured and where held as a prisoner, and when and for what cause released? ~~
   j. When and where did your first husband die? Nov 3rd 1920
   k. Were you residing together when he died? We was
   l. If not, how long had you resided apart? ~~
   m. Are you now a widow? I am
9. Have you or your husband heretofore been paid a pension by the State? have Not

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

Sworn to and subscribed before me this the 22 day of October 1921

James R. Gregory Ordinary
DeKalb County.

(SEAL)

Mrs. Mary E. Kennedy
Mark

reputation.

Kennedy, Mary C.
DeKalb County
Ga. Apr 1922

No. E-63

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County DeKalb

Name Mary C. (Mrs. John W.) Kennedy

Widow of John W. Kennedy

Company

Regiment

Approved

Sent Nov. 1920. Last paper on file here.

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-25-1921

J. Underwood Greenwood N.C.

6. Was your husband personally present at the time of the surrender or discharge of this command? Dismissed and Stand Surrender was present Dismissed and

7. If he was not present state clearly where he was? present Dismissed and

8. Where was his command when he left? did not leave

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? did not leave

f. What effort did he make to return to his command? did not leave

g. In what way was he prevented from going back to Command —

h. Was he captured by the enemy at any time? was not

i If so, when and where captured and where held as a prisoner, and when and for what cause released?

j. When and where did your first husband die? Nov 5th 1920

k. Were you residing together when he died? We was

l If not, how long had you resided apart? —

m. Are you now a widow? I am

9. Have you or your husband heretofore been paid a pension by the State? have not

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

Sworn to and subscribed before me this the 22 day of October 1921

James R. George Ordinary

DeKalb County.

(SEAL)

Mrs Mary C. Kennedy
Widow

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA,

Taylor COUNTY,

Personally before me comes L. M. Streetman 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? L. M. Streetman Taylor County Ga

2. How long and since when have you known Hood Kennedy Dave Kennedy applicant?

3. How long and since when has she continuously resided in this State? (Give date.) I know Dave W. Co. Johnson W. Kennedy married in Alabama

4. When and to whom was she married? Hood Kennedy How do you know?

5. How long and since when did you know John W. Kennedy her husband? Dave Kennedy living Since 1862

6. When and where did John W. Kennedy the husband of applicant, die? I don't know

7. Were the applicant and her husband living together as husband and wife at the date of his death? I do not know

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

Were they divorced? Don't know

9. When, where and in what Company and Regiment did John W. Kennedy enlist? Dassville Ga. January 15th 1862 Co. E. 48th Ga. Regiment

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

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? from 1862 till 1865 April 12th 1865

12. When and where did his Command surrender, and was discharged? Surrendered April 12th 1865 Farmville Va

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

14. Was the husband of applicant personally present at surrender? Yes If not where was he? He was there When, where and for what cause did he leave Command? (Give date) April 12th 1865 By whose authority did he leave his Command? Surrendered Was over And how long was he granted leave? Was Given How do you know all this? I was There He Surrendered I got a Parole and He was on board Train going to Nashville

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

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? Was Given as Stated I know

Sworn to and subscribed before me this the 25th day of October 1921

A. H. Riley Ordinary

of Taylor County.

(SEAL)

L. M. Streetman

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

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? from 1862 till 1865. April 12th 1865

12. When and where did his Command surrender, and was discharged? Surrendered April 12th 1865 Greensboro N C

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

14. Was the husband of applicant personally present at surrender? Yes. If not where was he? We were there. When, where and for what cause did he leave Command? (Give date) April 12th 1865 By whose authority did he leave his Command? Surrendered when over And how long was he granted leave? When over. How do you know all this? I was there the Surrendered together and we was on board train coming to Raleigh

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

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

Sworn to and subscribed before me this the 25th day of October 1921 } J. M. Freeman

A. H. Riley Ordinary }

of Dawson County. }

(SEAL)

MARRIAGE LICENSE

State of Georgia--Fulton County

To any Minister of the Gospel, Judge of the Superior Court, Justice of the Peace, or other Person authorized to Solemnize.

You are hereby authorized and permitted to join in the honorable state of Matrimony J. H. Kennedy

and Mary Kennedy

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.

RETURN THIS LICENSE, WITH YOUR CERTIFICATE THEREON, TO MY OFFICE FOR RECORD

Given under my Hand and Seal this 8th day of July, 1871 ~~187~~

Daniel Pittman Ordinary L.S.

I hereby certify that J. H. Kennedy

and Mary Kennedy

were joined together in the HOLY BANS OF MATRIMONY

on the 9th day of July ~~Nov~~ 1871, by me. Eld. Thomas M. Harris

State of Georgia, Fulton County. S. S. ORDINARY'S OFFICE

ATLANTA, GA., Oct. 27th 1921

I, CLAUDE C. MASON Clerk Court of Ordinary of said County, hereby certify that the foregoing is a true copy of the Marriage License and Certificate of Marriage of

J. H. Kennedy

and Mary Kennedy

as the same appears of record in this office.

Given under my official Signature and Seal of the Court of Ordinary, the day and year aforesaid.

Claude C. Mason

Clerk Court of Ordinary.

STATE OF GEORGIA.
COUNTY OF FULTON.

Personally before the undersigned authority now comes MRS. J. M. BAXTER, who upon oath says:

That she knows Mrs. Mary Kennedy and knew her husband, J. H. Kennedy, deceased; that she knows of her own personal knowledge that the said Mrs. Mary Kennedy and the said J. H. Kennedy lived together as man and wife continuously for more than thirty years before the death of the said J. H. Kennedy, which occurred November 5, 1920; that the said Mrs. Mary Kennedy has not remarried since the death of her husband and is now his lawful widow.

Sworn to and subscribed befor me this Oct. 27, 1921.

Mrs J. M. Baxter

Claude C. Mason

C C Ordinary Fulton County, Ga.

authorized to Solemnize.

You are hereby authorized and permitted to join in the honorable state of Matrimony J. H. Kennedy

and Mary Kennedy

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.

RETURN THIS LICENSE, WITH YOUR CERTIFICATE THEREON, TO MY OFFICE FOR RECORD

Given under my Hand and Seal this 8th *day of* July, 1871

Daniel Pittman *L.S.*
Ordinary

I hereby certify that J. H. Kennedy

and Mary Kennedy

were joined together in the HOLY BANS OF MATRIMONY

on the 9th *day of* July 1871, *by me.* Eld. Thomas M. Harris

State of Georgia,
Fulton County.

ORDINARY'S OFFICE

B. B.

ATLANTA, GA., Oct. 27th *1921*

I, CLAUDE C. MASON *Clerk Court of Ordinary of said County, hereby certify that the foregoing is a true copy of the Marriage License and Certificate of Marriage of*

J. H. Kennedy

and Mary Kennedy

as the same appears of record in this office.

Given under my official Signature and Seal of the Court of Ordinary, the day and year aforesaid.

Claude C. Mason
Clerk Court of Ordinary.

STATE OF GEORGIA.
COUNTY OF FULTON.

Personally before the undersigned authority now comes MRS. J. M. BAXTER, who upon oath says:

That she knows Mrs. Mary Kennedy and knew her husband, J. H. Kennedy, deceased; that she knows of her own personal knowledge that the said Mrs. Mary Kennedy and the said J. H. Kennedy lived together as man and wife continuously for more than thirty years before the death of the said J. H. Kennedy, which occurred November 5, 1920; that the said Mrs. Mary Kennedy has not remarried since the death of her husband and is now his lawful widow.

Sworn to and subscribed befor me this Oct. 27, 1921.

Mrs. J. M. Baxter

Claude C. Mason
C. C. Ordinary Fulton County, Ga.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
_____ County. }

Know all Men by these Presents, That I _____

of _____ County, State of Georgia, do hereby appoint

of _____ my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of 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 _____ 1893.

_____ [L. S.]

Executed in the presence of us:

_____

_____

DIRECTION.

Send money to me as follows, by _____

_____ to _____ P. O.

_____ County, Georgia.

Kent, W. R.

1893.

Application for Allowance

No. 1157

For the Year Ending October 25, 1893.

FOR

Applicant, _____

County, _____

Amount, _____

Date of Warrant, _____

Entered on record, _____ 1893.

_____

Secretary Executive Department.

WARRANT HANDED TO

_____

Geo. W. Harlow, State Printer, Atlanta.

Applicant, [illegible]
County, DeKalb
Amount, 72
Date of Warrant, [illegible]
Entered on record, 3/16 1893.
[illegible]
Secretary Executive Department.

WARRANT HANDED TO
[illegible]

Geo. W. Harrison, State Printer, Atlanta.

P. O.

[illegible]

[illegible] [illegible] [illegible] [

[illegible] from a three inch shell [illegible] distance [illegible] the left [illegible] which [illegible] paralyzed [illegible] his side and also shot in the left arm which caused the loss of the muscles rendering it useless and [illegible] worthless.

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 [illegible] dollars, for [illegible]

Sworn to and subscribed before me, this the [illegible] day of March 1893.

[illegible]

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, }
DeKalb County. }

I, [illegible] Ordinary of said County, do certify that I am well acquainted with [illegible] 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 [illegible] before whom the foregoing affidavits were made and power of attorney was signed, is a [illegible] of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this [illegible] day of March 1893.

[illegible]

Ordinary DeKalb County.

NAME, Kent, W. R. YEAR 1893 COUNTY Dekalb

WHEN AND WHERE BORN? Resident Ga. since Sept. 17, 1841.

ENLISTED WHEN AND WHERE?

RANK. Private.

COMPANY AND REGIMENT? Co. C, 21st Regt. Ga. Vols. Ewells' Brigade.

NAME OF CAPTAIN OR COLONEL?

WOUNDED? Gettysburg, Pa., July 11, 1863. Shell cut limb from tree hit him in left breast which is partially paralized was also shot in left arm, caused loss of muscles.

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE?

IF DIED, WHEN AND WHERE, AND CAUSE?

WHERE BURIED?

PAROLED.

WITNESSES.

ENLISTED WHEN AND WHERE?

RANK. Private.

COMPANY AND REGIMENT? Co. C, 21st Regt. Ga. Vols. Ewells' Brigade.

NAME OF CAPTAIN ... COLONEL?

WOUNDED? Gettysburg, Pa., July 11, 1863. Shell cut limb from tree hit him in left breast which is partially paralized was also shot in left arm, caused loss of muscles.

CAPTURED, ...

RELEASED.

...

IF DIED, ...

BURIED.

WITNESSES.

Ordinary's Certificate

STATE OF GEORGIA,

..... COUNTY.

I, ... Ordinary of said County, do certify that I know ..... the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th November 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 at office this .....day of.....19....

(SEAL) ..... Ordinary.

..... County

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Peer Cafe (Mrs) 1924 C

Dekalb County

Widow's Pension

Under Act 1910 as Amended by Act of 1919.

County .....

Name Mrs. C. E. Kerr

Widow of J. F. C. Kerr

Company .....

Regiment 53rd M. C.

Approved .....

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

Regiment 33 N.C.

Approved

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

Certificate

.....Ordinary of said County, do certify

.....the applicant for pension. She

a bona fide continuing resident citizen of said County

.....

at both of them are now residents of said County and

g affidavits and that they both are truthful, trust-

th and credit.

this .....day of.....19....

.....Ordinary.

.....County.

27 shall point applicant and the witness in the following words:
ners make to each of the questions asked you and the evidence
spaces are insufficient.
1881, are entitled.
ty of the residence of the person to be sworn and certified by

btainable. If not, prove marriage, by some person, or by general

Ordinary's Certificate

STATE OF GEORGIA,

..... COUNTY.

I, ...Ordinary of said County, do certify that I know .....the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th November 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 .....day of.....19....

(SEAL) ..... Ordinary.

..... County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Keep CLEAR (Mrs)

Dekalb No. County

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County Dekalb

Name Mrs. L. C. Kerr

Widow of J. F. C. Kerr

Company H

Regiment 33 N.C.

Approved

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

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

Questions for Applicant

STATE OF GEORGIA,

Dekalb COUNTY.

Personally before me comes Mrs. L. C. Kerr 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. L. C. Kerr Decatur Ga.
2. How long and since when have you been a continuing resident of the State of Georgia? 31 years Since Nov 1887
3. When, where and to whom were you married? Nov 9 1887 Dekalb Co Ga to J. F. C. Kerr
   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.) Pvt Co H 5th Ga Inf
5. When and where did the commands of your husband surrender or discharge from the army? Appomattox Va
6. Was your husband personally present at the time of the surrender or discharge of his command? He was
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?
   f. What effort did he make to return to his command?
   g. In what way was he prevented from going back to Command
   h. Was he captured by the enemy at any time? No
   i. If so, when and where captured and where held as a prisoner, and when and for what cause released?
   j. When and where did your first husband die? June 5 1917 Decatur Ga
   k. Were you residing together when he died? Yes
   l. If not, how long had you resided apart?
   m. Are you now a widow?
9. Have you or your husband heretofore been paid a pension by the State? No

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

Sworn to and subscribed before me this the 6 day of April 1920

James K. Guay Ordinary

Dekalb County.

(SEAL)

Mrs. L. C. Kerr

3. Attach certified copies of marriage license if obtainable. If not, prove marriage by some person or by general reputation.

Keep Office (Mrs.)

Keep No. County

DeKalb

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County DeKalb

Name Mrs. L. C. Kerr

Widow of J. L. C. Kerr

Company K

Regiment 55th N.C.

Approved

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

4-1-1921

Dec 1863.

6. Was your husband personally present at the time of the surrender or discharge of his command? He was.

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 first husband die? April 8 1917 Ga. Decatur

k. Were you residing together when he died? Yes

l If not, how long had you resided apart?

m. Are you now a widow?

9. Have you or your husband heretofore been paid a pension by the State? No

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

Sworn to and subscribed before me this the 6 day of April 1921

James R. George Ordinary

DeKalb County.

(SEAL)

Mrs. L. C. Kerr

J. L. C. Kerr entered service April 1863, as a private - Co. H of the 55th North Carolina Vol. At the time a resident of Thomasville, N. C. - & was honorably discharged at surrender on the 9th day of April, 1865.

Received a Cross of Honor from Agnes Lee Chapter- presented by Mrs. T. E. Holleyman on the 18, of Jan. 1908- Decatur, Ga.

He is a member of Evans Camp - No. 665.

Georgia, DeKalb County.

Personally appeared before me, the undersigned, the Ordinary in and for said county, Mrs. P. H. Jeter, President of Daughters of Confederacy, Agnes Lee Chapter, No. 434 located at Decatur, Georgia, in said county, and being duly sworn, deposes and says on oath: That the above is a true, correct and complete copy as it appears of record in Cross of Honor Book of said Agnes Lee Chapter Daughters of the Confederacy, Page 66.

Sworn to and subscribed before me, this 1st day of April, 1921.

Mrs. P. H. Jeter

James R. George
Ordinary DeKalb County, Ga.

Decatur Ga Mar 9 1921

This is to certify that the late J. L. C. Kerr was a member of Co. H 55th N. C. Regt. Confederate Army and he was a member of Evans Camp No. 665 U. C. V. Atlanta Ga. and his application for pension was approved by said Camp 9 1917. He joined said Camp in 1907 as a Confederate Veteran of Co. H 55th N. C. Reg. Vol. He enlisted in said Co & Reg. in April 1863: At that time a resident of Thomasville N. C. He was discharged at the surrender April 9 1865. He received his Cross of Honor from the Agnes Lee Chapter Jan. 18 1908 from the

over

State of North Carolina,
Davidson County

In Superior Court.

I, SAM J. SMITH, Clerk of the Superior Court, in and for the aforesaid State and County, do hereby certify that there is no member of ### Co. H 55th Regiment Confederate ### Army living in my county, all the members of this Co. in so far as I am informed and believe are dead.

In Testimony Whereof, I have hereunto subscribed my name and affixed the seal of said Court, at office in Lexington this the 14 day of March 1921.

Clerk Superior Court, Davidson County

in and for said county, Mrs. P. H. Jeter, President of Daughters of Confederacy, Agnes Lee Chapter, No. 434 located at Decatur, Georgia, in said county, and being duly sworn, deposes and says on oath: That the above is a true, correct and complete copy as it appears of record in Cross of Honor Book of said Agnes Lee Chapter Daughters of the Confederacy, Page 66.

Mrs. P. H. Jeter

Sworn to and subscribed before me, this 1st day of April, 1921.

James R George
Ordinary DeKalb County, Ga.

I, SAM J. SMITH, Clerk of the Superior Court, in and for the aforesaid State and County, do hereby certify that there is no member of ### Co. H 55th Regiment Confederate ### Army living in my county, all the members of this Co. in so far as I am informed and believe are dead.

In Testimony Whereof, I have hereunto subscribed my name and affixed the seal of said Court, at Office in Lexington this the 14 day of March 1921.

Clerk Superior Court, Davidson County

Decatur Ga the 9th 1921

This is to certify that the late J. M. Kerr was a member of Co. H 55th Regt N. C. Troops and a Confederate Veteran and was honorably discharged at the close of the war. He joined said Camp in 1917. He joined said Camp in 1907 as a Confederate Veteran of Co. H 55 N. C. Reg. Vol. He enlisted in said Co and Reg in April 1863. at that time a resident of Thomasville N.C. He was discharged at the surrender April 9 1865. He received his Cross of Honor Jan. 18. 1908 from the Agnes Lee

over

Admitted 1854 on recommendation of said Evans Camp.

E L Yarnick
Commander

W M Hayes Adjutant.

I certifies that the above is a true copy from the recorder of Clement A Evans Camp at Decatur Ga

James R George
April 9th 1921 Ordinary

OFFICE OF

THE ~~COUNTY BOARD OF ELECTIONS~~

Caswell COUNTY

State of ____ N. C.

This is to Certify that Major J. M. Kerr enlisted in the confederate service in Thomas ville Davidson County North Carolina April 1863. In "Co" "H" 55 Reg't N. C. Troops and was honorable discharged at the surrender on 9th day of April 1865. In Testimony whereof we E. B Barker and John H Kerr do hereunto set these hand and affixed seal

This 9th April 1921.

E B Barker (Seal)
John H Kerr (Seal)

I, D. M Bason Notary Republic have here unto set my hand and affixed my Notarial Seal of office this the 9th April 1921.

D M Bason N. P.

My Commission expires on the ____ day of ____ 19__

from the recorder of
Clement A Evans
Comp at Decatur Ga
James P George
April 9th 1921 Ordinary

C B Barton
John H Kem

I D M Bason Notary Republic
have here unto set my hand
and affix my Notarial Seal
this the 9th April 1921.

D M Bason N P

My Commission expires [illegible]

MARRIAGE LICENSE

State of Georgia--Fulton County.

To any Minister of the Gospel, Judge of the Superior Court, Justice of the Peace, or other Person authorized to Solemnize.

You are hereby authorized and permitted to join in the honorable state of Matrimony J. L. C. Kerr

and C. E. Loftin

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.

RETURN THIS LICENSE WITH YOUR CERTIFICATE THEREON, TO MY OFFICE FOR RECORD

Given under my Hand and Seal this 27 day of Feby. 1878

DANIEL PITTMAN L. S.
Ordinary.

I hereby certify that J.L.C. Kerr

and C.E. Loftin

were joined together in the HOLY BANS OF MATRIMONY on the 28 day of Feby. 1873, by me. Albert T. Spalding, Baptist M.

State of Georgia, Fulton County.

ORDINARY'S OFFICE

L. S.

ATLANTA, GA., July 13th 1920

I, ARTHUR R. MARBUT Clerk Court of Ordinary of said County, hereby certify that the foregoing is a true copy of the Marriage License and Certificate of Marriage of

J. L. C. Kerr

and C. E. Loftin

as the same appears of record in this office.

Given under my official Signature and Seal of the Court of Ordinary, the day and year aforesaid.

Arthur R Marbut
Clerk Court of Ordinary.

authorized to Solemnize.

You are hereby authorized and permitted to join in the honorable state of Matrimony J. L. C. Kerr

and C. E. Loftin

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.

RETURN THIS LICENSE, WITH YOUR CERTIFICATE THEREON, TO MY OFFICE FOR RECORD

Given under my Hand and Seal this 27 day of Feby. 1878

DANIEL PITTMAN L. S.
Ordinary.

I hereby certify that J.L.C. Kerr

and C.E. Loftin

were joined together in the HOLY BANS OF MATRIMONY

on the 28 day of Feby. 1878, by me. Albert T. Spalding, Baptist M.

ORDINARY'S OFFICE

State of Georgia, Fulton County. S. S.

ATLANTA, GA., July 13th 1920

I, ARTHUR R. MARBUT Clerk Court of Ordinary of said County, hereby certify that the foregoing is a true copy of the Marriage License and Certificate of Marriage of

J. L. C. Kerr

and C. E. Loftin

as the same appears of record in this office.

Given under my official Signature and Seal of the Court of Ordinary, the day and year aforesaid.

Arthur R Marbut
Clerk Court of Ordinary.

Kilgore Mary J.
DeKalb Co.

O.K. for 1911

No.

Widow's Pension

UNDER ACT 1910.

c

County DeKalb

Name Mary J. Kilgore

Widow of John Kilgore

H. 2 Fa Cal

J. W. LINDSEY,
Commissioner of Pensions

Chas. P. Byrd, State Printer.

10/25/10

Widow of John Kilgore

H-2 Ga Cav

J. W. LINDSEY,
Commissioner of Pensions.

Chas. P. Byrd, State Printer.

10350

Widow's Pension
UNDER ACT 1910.

County DeKalb

Name Mary J. Kilgore

Widow of John Kilgore

J. W. LINDSEY,
Commissioner of Pensions.

Chas. P. Byrd, State Printer.

Kilgore Mary J.
Ga Cav
Co. H
2nd
No.

Filed in office this 2nd day of Sept 1910

Application for Pension by a Widow Under Act of 1910.--Questions for Applicant.

STATE OF GEORGIA,
DEKALB County.

Personally before me comes Mrs. Mary J. Kilgore 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 J. Kilgore, Clarkston, Ga.
2. How long and since when have you been a continuing resident in the State of Georgia?
All my life. 63 years.
3. When, where and to whom were you married? July 10th 1868, near Stone Mountain, Ga. to John Kilgore.
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.) April 15, 1862, in Griffin, Ga. Company H. 2nd Georgia Cavalry
5. When and where did the Commands of your husband surrender or discharge from the army?
I do not know.
6. Was your husband personally present at the time of the surrender or discharge of this Command?
He was in prison at Rook Island, Illinois.
7. If he was not present state clearly where he was? In prison at Rook Island Ill.
8. Where was his Command when he left? Frankfort, Kentucky.
a. For what cause did he leave his command? Captured by the enemy
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? Held by the enemy
h. Was he captured by the enemy at any time? Yes
i. If so, when and where captured and where held as a prisoner, and when and for what cause released? Frankfort, Ky. 18 months before the surrender, released because of exchange of prisoners
9. When and where did your husband die? Were you residing together when he died? If not, how long had you resided apart? Sept. 6th, 1893, near Tucker, DeKalb County, Ga.
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 at all
Give list and cash value?
12. What are your annual earnings or income and their value? None
13. Have you heretofore been paid a pension by the State? No
If so, when and for what cause were you struck from the Roll?

Sworn to and subscribed before me this the 2nd day of Sept. 1910

Mrs Mary J. Kilgore.

Ordinary.

of County.

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

STATE OF GEORGIA,
DEKALB County.

Personally before me comes Thomas D. Terry who after being duly sworn true answers to make, to the following questions, answers as follows:

g. In what way was he prevented from going back to Command? Held by the enemy

h. Was he captured by the enemy at any time? Yes

i. If so, when and where captured and where held as a prisoner, and when and for what cause released? Frankfort, Ky. 18 months before the surrender, released because of cessation of hostilities

were living together

9. When and where did your husband die? Were you residing together when he died? If not, how long had you resided apart? Sept. 6th, 1892. near Tucker, DeKalb County, Ga.

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 at all
Give list and cash value?

12. What are your annual earnings or income and their value? None

13. Have you heretofore been paid a pension by the State? No
If so, when and for what cause were you struck from the Roll?

Sworn to and subscribed before me this the 2nd day of Sept. 1910 | Mrs Mary J Kilgore
Ordinary.
of County.

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

STATE OF GEORGIA,
DEKALB County.

Personally before me comes Thomas D. Terry 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? Thomas D. Terry. Edgewood, Ga.
2. How long and since when have you known Mrs. Mary J. Kilgore applicant? Never met Mrs. Kilgore until Sept. 2nd, 1910
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 John Kilgore her husband? From enlistment in the army until he was captured
6. When, where and in what Company and Regiment did John Kilgore enlist? April 1862, Griffin, Ga, Company H. 2nd Georgia Cavalry
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? About two years before he was captured
9. When, and where did his Command surrender, and was discharged? Altoona, Ga. About April 15th 1865.
10. Were you personally present when it was surrendered? I was If not where were you and how came you there?
11. Was the husband of applicant personally present at surrender? He was not If not where was he? In prison when, where and for what cause did he leave Command? (Give date.) Was a prisoner By whose authority did he leave his Command? of my own personal knowledge 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?. Was a prisoner and could not return
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 2nd day of Sept. 1910 | Thomas D Terry
Ordinary.
of County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,
DeKalb County.

Personally before me comes J R Johnston & J L Rodgers who on oath says that they are freeholders of said County and that they know Mary J Kilgore 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	$ —
Total	$ —

Schedule (B).
We know the property sold or given away since Nov. 4th 1908, its cash value to be as follows:

Personal property	$ None
Money, Notes and accounts	$ —

Schedule (C).
We also know what property she has now in her possession, use and control to wit:

Acres of land worth	$ None
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 9 day of Sept 1910 | J L Johnston & J L Rodgers
James R Gewin Ordinary.
of DeKalb County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
DeKalb County.

I James R Gewin Ordinary of said County do certify that, I know Mary J Kilgore 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 Thomas D Terry the witness who swears to the service of husband, and J R Johnston & J L Rodgers 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 DeKalb Co Returned for Tax is for 1908 $ None 1909 for 1910 $ —

Sworn under my hand and official seal of office this 9th day of Sept 1910

SEAL.

James R Gewin Ordinary.
DeKalb County.

(SEAL.)

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

11. Was the husband of applicant personally present at surrender? He was not If not where was he? In prison when, where and for what cause did he leave Command? (Give date.) Was a prisoner By whose authority did he leave his Command? of my own personal knowledge 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? Was a prisoner and could not return

13. 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 2nd day of Sept. 1910 | Thomas D. Lacy

Ordinary.

of County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

DeKalb County.

Personally before me comes J R Johnston & J L Rodgers who on oath says that they are freeholders of said County and that they know Mary J Kilgore 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	$ —
Total	$ —

Schedule (B).

We know the property sold or given away since Nov. 4th 1908, its cash value to be as follows:

Personal property	$ None
Money, Notes and accounts	$ —

Schedule (C).

We also know what property she has now in her possession, use and control to wit:

Acres of land worth	$ None
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 9 day of Sept. 1910 | J R Johnston & J L Rodgers

James R George Ordinary

of DeKalb County.

DeKalb County

(SEAL.)

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."

2 Additional affidavits may be attached if blank spaces are insufficient.

4 All affidavits must be made before the Ordinary.

3 Only widows who married prior to first January 1870, are entitled.

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

State of Georgia, DeKalb County.

To any minister of the Gospel, Judge of Superior Court, Justice of Inferior Court or Justice of the Peace to celebrate:

You are hereby authorized and permitted to join in the honorable State of matrimony Mr. John Kilgore and Miss Mary J. Elam 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 24th day of January, 1868.

J. B. Wilson, Ordinary (Seal)

I hereby certify that Mr. John Kilgore and Miss Mary J. Elam were joined together in the holy bans of matrimony on the 30th day of January, 1868, by me.

John T. Alford, J.P.

Georgia, DeKalb County.

I, James R. George, Ordinary in and for said county, do hereby certify that the above and foregoing copies of the marriage license and the certificate of marriage of John Kilgore and Miss Mary J. Elam, are both true, correct and complete copies of said license and certificate as they appear of record in my office in Book B. of the Record of Marriages, Page 324.

In Testimony Whereof, I have hereto set my hand and affixed the Seal of said Court of Ordinary, this the 2nd day of September, 1910.

James R George

Ordinary, DeKalb County, Georgia.

To any minister of the Gospel, Judge of Superior Court, Justice of Inferior Court or Justice of the Peace to celebrate:

You are hereby authorized and permitted to join in the honorable State of matrimony Mr. John Kilgore and Miss Mary J. Elam 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 24th day of January, 1868.

J. B. Wilson, Ordinary (Seal)

I hereby certify that Mr. John Kilgore and Miss Mary J. Elam were joined together in the holy bans of matrimony on the 30th day of January, 1868, by me.

John T. Alford, J.P.

Georgia, DeKalb County.

I, James R. George, Ordinary in and for said county, do hereby certify that the above and foregoing copies of the marriage license and the certificate of marriage of John Kilgore and Miss Mary J. Elam, are both true, correct and complete copies of said license and certificate as they appear of record in my office in Book B. of the Record of Marriages, Page 324.

In Testimony Whereof, I have hereto set my hand and affixed the Seal of said Court of Ordinary, this the 2nd day of September, 1910.

James R George
Ordinary, DeKalb County, Georgia.

Killian Lucy A.
DeKalb County

No.

WIDOW'S INDIGENT PENSION.

Name Lucy A Killian
County DeKalb
Widow of Miles Killian

Approved

JOHN W LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

C. P. BYRD, STATE PRINTER, ATLANTA, GA.

7/29/08

POWER OF ATTORNEY.

STATE OF GEORGIA,
County.

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

Witness my hand this ..... day of ..... 190.....

Executed in presence of

..... Ordinary. .....

..... County. L. S.

[SEAL.]

Approved .....

JOHN W LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

.....

.....

C. P. BYRD, STATE PRINTER, ATLANTA, GA.

9/12 9108

.....L. S.

.....190.....

...by his check or registered mail.

...ive and receipt for the pension allowed

...RNEY.

POWER OF ATTORNEY.

STATE OF GEORGIA,
.....County.

I, ...hereby authorize .....

of ..... County to receive and receipt for the pension allowed

and that he remit the same to me at ..... by his check or registered mail.

Witness my hand this ..... day of ..... 190.....

Executed in presence of

.....

Ordinary, ...L. S.

.....County.

[SEAL]

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,
DeKalb County.

Lucy Ann Killian 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 December 19, 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 Postoffice.) Lucy Ann Killian
2. How long and since when have you been a resident of this State? 73 July 27th 1855
3. When and where were you born? July 27th 1838 Walton Co Ga
4. When and where was your husband born—state his full name, and when were you and he married? (Attach copy marriage license in every case.) Feby 11th 1828 N.C. Married May 11th 1854 Mills Andrew Killian
5. When and where and in what Company and Regiment did your husband enlist or serve during the war between the States? July 1864 Atlanta Ga 1st Georgia Regiment about 7 Months J. Conahay A. Wright
6. How long did your husband serve in said Company and Regiment? about 5 Months
7. When and where did your husband's Company and Regiment surrender and was discharged? 1865 Decatur Ga
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 command, for what cause, and by what authority? Parole
10. When and where did your husband die? august 16th 1906
11. Which of the following grounds do you base your application for pension, viz: First—Age and Poverty? Second—Infirmity and Poverty, or Third—Blindness and Poverty? age 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? 73 Years old 6 years My Physical Condition is Very Feable. I Rheumatism & Heart Trouble & Consumption
13. What has been your occupation since your husband's death? Had no
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? have no Property
16. What property, real or personal, did you possess at death of husband or he left you, and of the years 1905, 1906, 1907 and 1908, and what disposition, if any, by sale or gift have you made of the same? None
17. In what counties did you reside in 1905, 1906, 1907 and 1908, and what property did you return for taxation? DeKalb Co
18. How have you been supported since death of husband, and especially for 1905, 1906, 1907 and 1908? 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? $125.00 nothing
20. What was your employment during 1905, 1906, 1907 and 1908—how much did you receive for each year? had 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? have one Son all others Married
22. Have you ever made application for pension before? have not
23. How many applications have you made for a pension, and under what class? none

Sworn to and subscribed before me, this the 24 day of Sept 1908

James R Geer Ordinary,

of DeKalb County.

Lucy Ann Killian Her mark

WIDOW'S INDIGENT PENSION.

No. .....

Name Lucy A Killian
County DeKalb
Widow of Mills Killian

Approved .....

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

.....

C. P. BYRD, STATE PRINTER, ATLANTA, GA.

9/12 9108

Killian Lucy A
DeKalb County
Widow of Mills Killian

No. 112108

WIDOW'S INDIGENT PENSION.

Name Lucy A. Killian
County DeKalb
Widow of Miles A. Killian

Approved

JOHN W. LINDSEY, Commissioner of Pensions.

WARRANT HANDED TO

C. P. BYRD, STATE PRINTER, ATLANTA, GA.

Killian Lucy A.
DeKalb County

11. Which of the following grounds do you base your application for pension, viz: First—Age and Poverty, Second—Infirmity and Poverty, or Third—Blindness and Poverty? Age and Poverty

12. If upon the first ground, state how long you have been in such a condition that you cannot earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind, and when and where you lost your sight? I am 73 years old My Physical Condition is very feable I Rheumatism I have been so for 2 years

13. What has been your occupation since your husband's death? had no occupation

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? have 210 Property

16. What property, real or personal, did you possess at death of husband or he left you, and of the years 1905, 1906, 1907 and 1908, and what disposition, if any, by sale or gift have you made of the same? None

17. In what counties did you reside in 1905, 1906, 1907 and 1908, and what property did you return for taxation? DeKalb Co

18. How have you been supported since death of husband, and especially for 1905, 1906, 1907 and 1908? 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? $125.00 nothing

20. What was your employment during 1905, 1906, 1907 and 1908—how much did you receive for each year? had 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? have one Son all others Married

22. Have you ever made application for pension before? have not

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

Sworn to and subscribed before me, this the 29 day of Sept 1908

James R George Ordinary.
DeKalb County.

Lucy Ann Killian her mark

QUESTIONS FOR WITNESSES.

STATE OF GEORGIA, DeKalb County.

W. F. Hardman & James M. Arnold of said State and County, having been present as a witness in support of the application of Mrs. Lucy Ann Killian for a Pension under the Act of 1900, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? W. F. Hardman
2. Are you acquainted with the applicant, Mrs. Lucy Ann Killian If so, how long have you known her?
3. Where does she reside, and how long since when has she been a resident of this State? Stone Mountain Ga since July 27th 1835
4. When and where was she born? July 27th 1835
5. Were you ever acquainted with her husband? we was
6. Where did she reside in 1861? Atlanta Ga
7. When and to whom was he married? 1857 Lucy Ann Annistid
8. When and where was he born? 1829 NC
9. How long have you known him? 45 years
10. When and where did Miles A. Killian enlist in the war between the States, and in what Company and Regiment did he enlist, and how do you know this? July 1864 Atlanta Ga Thompson Wright Legion
11. Were you a member of the same Company and Regiment we was
12. How long did he perform regular military duty about 9 Months
13. ~~About 1865 Decatur Ga~~ April 1865 at Decatur Ga we were both with Company
14. Were you with the Command when it surrendered?
15. Miles A. Killian the husband of applicant present? He was
16. If not present, where was he? Present ~~April 1865 Decatur Ga~~
17. When and where did he leave his Command? For what cause? War Closed By whose authority he left? war was over How do you know all this? (State fully and clearly.) we both was present and know it of our own knowledge
18. When and where did Miles A. Killian die? 1908 Stone Mountain
19. Where did he reside at his death and how long had he been a resident of Georgia at his death? Stone Mountain 57 years
20. Do you of your own knowledge know that applicant is the lawful widow of Miles A Killian we do
21. Has she remained unmarried since her soldier husband's death, and is now his widow? 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 nor income we live in same town now for 3 years
23. What property, effects or income did applicant possess in 1905, 1906, 1907 and 1908, and what disposition did she make of it? none no income had none to dispose of
24. Has applicant conveyed any property in last two years or given any away, if so, what was it, and to whom? has but had none to convey
25. What is applicant's physical condition and her chances and ability to earn a support? Physical Condition very feable not able to do any kind of work
26. Is applicant able to earn a support at labor of any sort, if not why? She is not on account of her Age & Physical Condition
27. How was she supported for 1905, 1906, 1907 and 1908? By her children
28. How much did applicant contribute to her support for last four years? nothing
29. Give a full and complete statement of applicant's physical condition? She is 73 years of age has Rheumatism heart trouble & Physical Condition very poor
30. What interest have you in the recovery of this pension by the applicant? none

Sworn to and subscribed before me this 29 day of Sept 1908
James R George Ordinary.
DeKalb County.

W. F. Hardman
Jas M. Arnold
Witnesses

AFFIDAVITS OF PHYSICIANS.

STATE OF GEORGIA, County.

Personally before me came J. H. Ross M D and L. A. Ross Jr 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 L. A. Killian applicant for a pension under Act of 1900, and after such personal examination say that her physical condition is that she is (a cripple) (an invalid) (suffers from chronic trouble) with dropsy & Heart trouble & from age & rheumatism and is unable to earn a support by labor or business and we have no interest in said pension if allowed.

Sworn to and subscribed before me this 29 day of Sept 1908
James R George Ordinary.
DeKalb County

J. H. Ross M D
J. H. Ross Jr M D

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, DeKalb County.

I, James R George Ordinary in and for said County, hereby certify that the applicant, Mrs Lucy Ann Killian resides in said County, and has been a bona fide resident of this State for all her life, and that the witnesses, Mr W. F. Hardman are of trustworthy character and that their statements are entitled to full faith and credit.

I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses before the same was signed and subscribed

I further certify that the tax digest of County shows that applicant returned for taxation in her own name in 1905 dollars worth of property, and in 1906 dollars worth of property, in 1907 dollars worth of property and in 1908 dollars worth of property

Witness my hand and official seal this 29 day of Sept 1908

[SEAL.] James R George Ordinary DeKalb 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 widows. Those married since the 9th of April, 1865, not certified.
5. ——— Witnesses and two Physicians are necessary to make out claims.
6. Attach certified copy of marriage license in every case, or show why it cannot be obtained.

the following questions, deposes and answers as follows:

1. What is your name and where do you reside? W. H. Hardman

2. Are you acquainted with the applicant, Mrs. Lucy Ann Killian

If so, how long have you known her?

3. Where does she reside, and how long since when has she been a resident of this State? Stone Mountain, Ga. since July 27th 1835

4. When and where was she born? July 27th 1835

5. Were you ever acquainted with her husband? We was

6. Where did she reside in 1861? Atlanta Ga

7. When and to whom was he married? 1857 Lucy Ann Annadia

8. When and where was he born? 1829 NC

9. How long have you known him? 45 years

10. When and where did Miles A. Killian enlist in the war between the States, and in what Company and Regiment did he enlist, and how do you know this? July 1864 Atlanta Ga Company Fwright Legion We was

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

12. How long did he perform regular military duty? About 9 Months

~~April 1865 Decatur Ga~~

13. Where and when was his Company and Regiment surrendered and discharged from service? April 1865 at Decatur Ga we were both with Company

14. Were you with the Command when surrendered?

15. Was Miles A. Killian the husband of applicant present? He was

16. If not present, where was he? Present

17. When and where did he leave his Command? ~~April 1865 Decatur Ga~~

For what cause? War Closed

By whose authority he left? war was over

How do you know all this? (State fully and clearly.) We both was present and know it of our own knowledge

18. When and where did Miles A. Killian die? 1900 Stone Mountain

19. Where did he reside at his death and how long had he been a resident of Georgia at his death? Stone Mountain. 67 years

20. Do you of your own knowledge know that applicant is the lawful widow of Miles A Killian, we do

21. Has she remained unmarried since her soldier husband's death, and is now his widow? 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 nor income we live in same Town now for two

23. What property, effects or income did applicant possess in 1905, 1906, 1907 and 1908, and what disposition did she make of it? none no income had none to dispose of

24. Has applicant conveyed any property in last two years or given any away, if so, what was it, and to whom? has not had none to convey

25. What is applicant's physical condition and her chances and ability to earn a support? Physical Condition very feable not fable to do any kind of work

none

Sworn to and subscribed before me this 29 day of Sept 1908.

James R. George Ordinary, Dekalb County.

W. H. Hardman
Jos. M. Harrison
Witnesses.

AFFIDAVITS OF PHYSICIANS.

STATE OF GEORGIA,

County.

Personally before me come J. H. Goss M. D. and J. H. Goss Jr. 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. L. A. Killian applicant for a pension under Act of 1900, and after such personal examination say that her physical condition is this: Lucy Ann (a widow) is old & infirm age rendering her incapable to raise a living at any labor or business.

and we have no interest in said pension if allowed.

Sworn to and subscribed before me this 29 day of Sept 1908.

James R. George Ordinary, Dekalb County.

J. H. Goss M. D.
J. H. Goss Jr M. D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Dekalb County.

I, James R. George Ordinary of and for said County, hereby certify that the applicant, Mrs. Lucy Ann Killian resides in said County, and has been a bona fide resident of this State since the All her life

is and that the witnesses, Mr W. H. Hardman are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digest of County shows that applicant returned for taxation in her own name in 1905 Neither things dollars worth of property, and in 1906 dollars worth of property, in 1907 dollars worth of property, and in 1908 dollars worth of property.

Witness my hand and official seal this 29 day of Sept 1908.

[SEAL.] James R. George Ordinary, Dekalb 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 truly answers make to each of the questions submitted to 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 a widow. Those married since the 9th of April, 1865, not entitled.

5. ——— Witnesses and two Physicians are necessary to make out claims.

6. Attach certified copy of marriage license in every case, or show why it cannot be obtained.

Form No. 2.

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

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 1892.

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

[SEAL] Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, County.

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

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

[L.S.]

Executed in the presence of us:

DIRECTIONS.

Send amount by to me at , and oblige

Widows' Pension,

for year ending February 15th, 1893.

PAID TO—

Ga.

OF

County.

Warrant Issued 1893

AND HANDED TO

1893

FOR THOSE HERETOFORE PAID.

No. 1737

1893.

Certificate of Ordinary of the County

STATE OF GEORGIA, County of

I, [illegible] Ordinary in and for said County of [illegible] State of Georgia, hereby certify that I am acquainted with Mrs. [illegible] 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 [illegible] 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 [illegible] day of [illegible] 1893.

[illegible] Ordinary.

POWER OF AT

STATE OF GEORGIA,

KNOW ALL MEN BY THESE PRESENTS, That I, [illegible] of [illegible] County, in said State, do hereby appoint [illegible] of [illegible] 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 [illegible] day of [illegible] 189 [illegible] [L. S.]

Executed in the presence of us:

[illegible]

DIRECTIONS

Send amount by [illegible] to me at [illegible]

—PAID TO—

Mrs. [illegible]

OF

DeKalb County.

(Present Post Office)

Warrant Issued

2/3 1893

AND HANDED TO

[illegible]

Geo. W. Harrison, State Printer, Atlanta.

Form No. 2.

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

STATE OF GEORGIA, County of DeKalb

I, [illegible] Ordinary in and for said County of [illegible] State of Georgia, hereby certify that I am acquainted with Mrs. [illegible] 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 [illegible] 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 20 day of [illegible] 1893.

[illegible] Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, [illegible] County.

KNOW ALL MEN BY THESE PRESENTS, That I, [illegible] of [illegible] County, in said State, do hereby appoint [illegible] of [illegible] 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 [illegible] 189 [illegible] [L. S.]

Executed in the presence of us:

[illegible]

DIRECTIONS.

Send amount by [illegible] to me at [illegible], and oblige

Form No. 2.

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

STATE OF GEORGIA, County of DeKalb

I, Wm Ragsdale Ordinary in and for said County of DeKalb State of Georgia, hereby certify that I am acquainted with Mrs. E. J. King 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 Charles King deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1854.

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

Wm Ragsdale Ordinary.

Form No 3

POWER OF ATTORNEY.

STATE OF GEORGIA, DeKalb County.

KNOW ALL MEN BY THESE PRESENTS, That I, E. J. King of DeKalb

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 16th day of Jan 1895. E. J. King [L. S.]

Executed in the presence of us:

Leslie King

Wm Ragsdale

Edmonds

DIRECTIONS.

Send amount by [illegible] to me at [illegible], and oblige

FOR THOSE HERETOFORE PAID.

1893.

No. 11737

WIDOW'S PENSION,

for year ending February 15th, 1893.

—PAID TO—

Mrs. [illegible]

—OF—

DeKalb County.

(Present Post Office) Stone Mountain Ga

Warrant Issued

2/3 1893

AND HANDED TO

[illegible]

Geo. W. Harrison, State Printer, Atlanta.

FOR THOSE HERETOFORE PAID.

1895.

No. 1965

WIDOW'S PENSION,

for year ending February 15th, 1895.

—PAID TO—

Mrs. E. J. King

—OF—

DeKalb County.

widow of Charles King

WARRANT ISSUED

Jan 28 1895.

AND HANDED TO

[illegible]

Geo. W. Harrison, State Printer.

King E. J. (Mrs)
DeKalb Co Ga

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

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

day of _____ 189_ [L. S.]

Executed in the presence of us:

DIRECTIONS.

Send amount by _____ to

me at _____ and oblige

FOR THOSE HERETOFORE PAID.

1893.

Widows' Pension,

No. 1737

for year ending February 15th, 1893.

—PAID TO—

Mrs. _____

—OF—

_____ County.

Warrant Issued

23

1893

AND HANDED TO

_____

Geo. W. Harrison, State Printer, Atlanta.

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

In Witness Whereof, I have hereunto set my hand and seal, this 16th

day of Jan 1895. E. L. King [L. S.]

Executed in the presence of us:

Leslie King

W. M. Cassedy

Ord inary

DIRECTIONS.

Send amount by _____ to

me at _____ and oblige

FOR THOSE HERETOFORE PAID.

1895.

WIDOW'S PENSION.

No. 965

for year ending February 15th, 1895.

—PAID TO—

Mrs. E. L. King

—OF—

DeKalb County.

widow of Charles King

WARRANT ISSUED

Jan 28 1895.

AND HANDED TO

E. L. King

Geo. W. Harrison, State Printer.

Form No. 1.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, County of _____

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 _____ 18__. 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__ and served in the Army up to _____ 186__. 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.*) (

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, 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 _____ 1893.

_____ Ordinary. Post-office _____

Form 1.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, County of DeKalb

Personally Comes Mrs. E. L. King

who being sworn, says on oath, that she is a bona fide resident of said county of DeKalb State of Georgia, and that she has *resided* in said State continuously ever since 1825 That she is the Widow of Charles King who was a Soldier in Company B of the 42d Regiment of Georgia Volunteers, that he enlisted in said Regiment on or about the month of March 1862 and served in the Army up to April 1863 That he lost his life on the 7th day of April 1863. (*State here full particulars of the husband's death, when, where and from what cause.*) (

Had chronic Dysentery while in the siege of Vicksburg and died of the disease 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 1848, 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 16th day of Jan 1895.

W. M. Cassedy Ordinary. Post-office E. L. King Stone Mountain Ga

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 18[illegible]; 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 [illegible] day of [illegible] 1893. Ordinary. Post-office [illegible]

[illegible] the divorce 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 1848, 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 10th day of Jan 1895. Wm Rossler Ordinary. Post-office E. L. King Fort Mountain Ga

Form No. 2.

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

STATE OF GEORGIA, County of De Kalb

I, Wm Ragsdale Ordinary in and for said County of De Kalb State of Georgia, hereby certify that I am acquainted with Mrs. E. L. King 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 [illegible] 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 22d day of January 1894.

(SEAL) Wm Ragsdale Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, De Kalb County.

KNOW ALL MEN BY THESE PRESENTS, That I, [illegible] E. L. King of De Kalb County in said State, do hereby appoint Wm P. King of De Kalb 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 22d day of January 1894.

E. L. King [L. S.]

Executed in the presence of us:

Wm P. King

Wm Ragsdale

[illegible]

DIRECTIONS.

Send amount by to me at , and oblige

King, E. L. (Mrs.) Dekalb County

FOR THOSE HERETOFORE PAID.

1894.

No. [illegible]

WIDOWS' PENSION,

for year ending February 15th, 1894.

—PAID TO—

Mrs. E. L. King

—OF—

De Kalb COUNTY.

WARRANT ISSUED

1894.

AND HANDED TO

Wm P. King

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

of De Kalb 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 22d day of Nov 1894.

E. J. King [L. S.]

Executed in the presence of us:

J. H. King

[illegible]

DIRECTIONS.

Send amount by to me at , and oblige

King, E. J. (Mrs.) De Kalb County FOR THOSE HERETOFORE PAID.

1894.

No. [illegible]

WIDOWS' PENSION,

for year ending February 15th, 1894.

—PAID TO—

Mrs. E. J. King

—OF—

De Kalb County.

WARRANT ISSUED

1894.

AND HANDED TO

J. H. King

Form No. 1

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of De Kalb

Personally comes Mrs. E. J. King,

who being sworn, says on oath, that she is a bona fide resident of said County of De Kalb State of Georgia, and that she has *resided* in said State continuously ever since 1829 That she is the Widow of Charles King who was a Soldier in Company B of the 4th Regiment of Georgia Volunteers, that he enlisted in said Regiment on or about the month of March 1862 and served in the Army up to April 1863 That he lost his life on the 9th day of April 1863 (*State here full particulars of the husband's death, when, where and from what cause.*) (died of chronic diarrhoea while in the camp at Lookout Valley where he died of the disease on the 9th day of April 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 1848; 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 22 day of Nov 1894.

[illegible] Ordinary.

E. J. King

Post-office [illegible]

the Siege of Vicksburg Miss
where he died of the disease
on the 7th day of April 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 1848; 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 [illegible] day of [illegible] 1894. [illegible], Ordinary.

E. A. King

Post-office [illegible]

Form No. 2.

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

STATE OF GEORGIA, County of De Kalb

I, W. M. Ragsdale Ordinary in and for said County of De Kalb State of Georgia, hereby certify that I am acquainted with Mrs. E. A. King 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 Elisha King deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1895.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the 24th day of March 1896.

(SEAL) [illegible] Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, De Kalb County.

I, E. A. King hereby authorize E. A. King of De Kalb 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 24th day of March 1896.

E. A. King [L.S.]

Executed in the presence of

[illegible]

[illegible]

Mrs. E. A. King

FOR THOSE HERETOFORE PAID.

1896.

No. 1700

WIDOW'S PENSION,

for year ending February 15th, 1896.

PAID TO

Mrs. E. A. King

OF

De Kalb County.

widow of Elisha King

WARRANT ISSUED

24 1896.

AND HANDED TO

[illegible]

GEO. W. HARRIS, State Printer.

STATE OF GEORGIA, [illegible] County.

I, [illegible] hereby authorize [illegible]

of [illegible] 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 [illegible]

day of [illegible] 1896.

[illegible] [L.S.]

Executed in the presence of

[illegible]

[illegible]

Rec'd, Co. Treas.
for Dallas County
FOR THOSE HERETOFORE PAID.

1896.

No. 1920

WIDOW'S PENSION,

for year ending February 15th, 1896.

PAID TO

[illegible]

OF

[illegible] County.

widow of [illegible]

WARRANT ISSUED

2[illegible]

1896.

AND HANDED TO

[illegible]

GEO. W. TEASLEY, State Printer.

Form 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of [illegible]

Personally Comes Mrs. [illegible]

who being sworn, says on oath, that she is a bona fide resident of said county of [illegible] State of Georgia, and that she has RESIDED in said State continuously ever since [illegible] 18 That she is the Widow of [illegible] who was a Soldier in Company [illegible] of the [illegible] Regiment of [illegible] Volunteers, that he enlisted in said regiment on or about the month of March 186[illegible] and served in the Army up to [illegible] 186[illegible] That he lost his life on the [illegible] day of [illegible] 186[illegible] (*State here full particulars of the husband's death, when, where and from what cause.*)

died [illegible] and left [illegible] [illegible]

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 18[illegible], 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 [illegible] 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 [illegible] day of [illegible] 1896.

[illegible] Ordinary.

[illegible]

Post-office [illegible]

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

De Kalb State of Georgia, and that she has RESIDED in said State

continuously ever since Dec 23rd 1886 18 That she is the Widow of

Charles Lentz who was a Soldier in Company

D of the 42d Regiment of Georgia

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

1862 and served in the Army up to [illegible] 1863 That he lost his

life on the 9th day of [illegible] 1863 (*State here full particulars of the husband's death, when, where and from what cause.*)

Died of chronic Diarrhea and laid in the

Hospital at Chattanooga Tenn.

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 1848, 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

De Kalb 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 24th day of Dec 1896.

[illegible] Ordinary.

[illegible]

Post-office [illegible]

King, L. D.
Co. E
1st
DeKalb Co.

No. [illegible]
M. Dec. 1924

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County DeKalb

Name L. D. King

Company C

Regiment 1st Wheeler's Cavalry

Approved

[illegible]

[illegible]

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta

9/25/1923

Ordinary's Certificate

STATE OF GEORGIA,
COUNTY.

I, [illegible], Ordinary of said County, certify that I know the applicant [illegible] in the person he represents himself to be and resides in said county. That I also know [illegible] 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 26 day of Sept. 1923

[illegible] Ordinary
at [illegible] County

(SEAL)

NOTES:—1. Before any questions are answered the Ordinary shall swear applicant and witnesses in the following words: "You and each of you do solemnly swear that the answers you shall 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 sworn to before the Ordinary of the county in which the applicant or witness resides and must be certified by such Ordinary.

Regiment 26 Whitehall Cobb

Approved

Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

9/28/1923

s Certificate

...Ordinary of said County, certify that I know

...is the person he represents himself to be and

...the witness swearing to the

...and were duly sworn by me before signing the forego-

...orthy and their statements are entitled to full faith and

...this 26 day of Sept 19 23

...ers shall swear applicant and witnesses in the following words:
...swers make to each of the questions asked you and the evidence
...given are insufficient.
...y of the county in which the applicant or witness resides and

Ordinary's Certificate

STATE OF GEORGIA, DeKalb COUNTY.

I, James R. George Ordinary of said County, certify that I know the applicant J. W. King for pension in the person he represents himself to be and resides in said county. That I also know R H Bice 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 26 day of Sept 1923

James R George Ordinary
of DeKalb County.

(SEAL)

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

No. 11134

Confederate Soldier's Application

Under Act 1910 As Amended by Act of 1919.

County DeKalb

Name J. W. King

Company C

Regiment 26 Whitehall Cobb

Approved

Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

9/28/1923

King, J. W.
Co. C, 26 Ga. Cav.

Application for Soldier's Pension Under Act 1910
Amended by Act 1919

Questions For Applicants to Answer

STATE OF GEORGIA, DeKalb COUNTY.

I, J. W. King of said State and County, hereby applies for the pension provided by Act of 1910, as amended by Act of 1919, to Confederate Soldiers, and submits his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? (Give County and Post-office) J. W. King Route #10 DeKalb County Ga

2. How long and since when have you been a continuous resident citizen of this State? 74

3. Did you enlist in the Army of the Confederate States or in 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) July 1863 Cumming, Ga Company C Whitlow Calvary 26 Regt

5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge) from Enlistment to Surrender

6. When and where was your Company and Regiment surrendered or discharged from the Service? April 1865 near Marietta Ga

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

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

a. Where was your command when you left it? did not leave

b. When did you leave the command? did not leave

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? did not leave

g. In what way were you prevented?

h. What effort did you make to return? was not

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. 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? have not

Sworn to and subscribed before me, this the 26 day of May 1923

James R George Ordinary
of DeKalb County.

(SEAL)

King, L. D.
Dekalb, Co.

No. 11174

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County Dekalb

Name R. R. King

Company C

Regiment 26 Mulligan's

Approved

Recorded

J. W. Mullally
Clerk

J. W. Mullally,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

4/28/1923

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

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

a. Where was your command when you left it? did not leave

b. When did you leave the command? did not leave

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? did not leave

g. In what way were you prevented?

h. What effort did you make to return?

i. Were you captured during the war? Was not

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

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

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

Sworn to and subscribed before me, this the 26 day of May 1923

James R George Ordinary of DeKalb County

(SEAL)

U. S. A.

Questions for Witness as to Service

STATE OF GEORGIA, DeKalb COUNTY

R. R. Rice of said State and County is hereby presented as a witness in support of the application of L. D. King 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? R A Rice DeKalb County

2. How long and since when have you known R R Rice the applicant? Since Early 1863

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

4. When, where and in what Company and Regiment did L D King enlist during war from 1861 to 1865? (Give date and place) July 1863 Company C Wheeler's Cav Div Ga Vol

5. How did you obtain your information of the service I was a Member of Same Command + Company

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date) Until the Surrender April 65

7. When and where was his command surrendered or discharged (give date and place) Near Manchester Ga

8. Were you personally present at the surrender? Yes Present

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

10. Was the applicant personally present with his command at surrender? He was

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

12. When did he leave his command? did Not leave Where was his command when he left it? For what cause did he leave? Surrender By whose authority did he leave Surrender and how long was he granted leave? How do you know all that you have stated to be true? If from your own knowledge, tell clearly and specifically By My own Personal Knowledge Same Command

13. In what way was he prevented from returning to his command? did not leave How do you know? I was Present My own Knowledge

14. What effort did he make to return to his command and how do you know? did Not Leave Surrender

15. Was applicant captured as a prisoner Was Not If so, when and where? In what prison was he held? and when released

Sworn to and subscribed before me, this the 26 day of Sept 1923

James R George Ordinary of DeKalb County

(SEAL)

his
R A X Rice
Mark

DeKalb County

2. How long and since when have you known R R Bice the applicant?
Since July 1863

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

4. When, where and in what Company and Regiment did R. R. Bice enlist during war from 1861 to 1865? (Give date and place.) July 1863 Company C.
Wheelers Cavy 26 Regt I was a Member
of Same Command + Company

5. How did you obtain your information of the service?

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date) until the Surrender April 65

7. When and where was his command surrendered or discharged (give date and place)
Near Marietta Atlanta Ga

8. Were you personally present at the surrender? Yes

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

10. Was the applicant personally present with his command at surrender? He was

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

12. When did he leave his command? did Not leave Where was his command when he left it? For what cause did he leave? Surrender
By whose authority did he leave Surrender 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
By My own Personal Knowledge Same Command

13. In what way was he prevented from returning to his command? did not leave How do you know? I was Present My own Knowledge

14. What effort did he make to return to his command and how do you know?
did Not Leave Surrender

15. Was applicant captured as a prisoner was Not If so, when and where?
In what prison was he held? and when released

Sworn to and subscribed before me, this the 26 day of Sept 1928

R X Bice
his
Mark

James R George Ordinary
of Ordinary County

(SEAL)

King, Lee D.
DeKalb Co.

For DeKalb County

1926

Application for Pension Due Deceased Pensioner

(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

W. D. Morgan Ordinary
For L. D. King
Date of Death Nov 26, 1926
Amount $100.00 OK

Approved and ordered paid
Nov 16 Dec. 26
John W. Clark
JOHN W. CLARK
Commissioner of Pensions

Receive of W. D. Morgan Ord. check for 100.00 Funeral Expense
L. D. King S. R. Greenberg

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.

E. F. BOND, Pres. S. R. GREENBERG, Sec. & Treas.

GREENBERG & BOND CO.

AMBULANCE FUNERAL DIRECTORS CHAPEL

TELEPHONE { WALNUT 8286 / WALNUT 8287 } 135 IVY STREET

ATLANTA, GA.

TO

100.00

County of Fulton
State of Georgia

Personally appeared before me S. R. Greenberg of Greenberg Bond Co. who on oath says as the above account is due just and unpaid S. R. Greenberg

Sworn and subscribed to before me this 1st day of Dec 1926
W. J. Blumfield, Notary Public

John W. Clark
16th Dec. 26 JOHN W. CLARK.
Commissioner of Pensions

Receive of D. D. Morgan, Ord.
Check for 100.00 Funeral Expenses
L. D. King S. R. Greenberg

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.

100.00

County of Fulton
State of Georgia

Personally appeared before me S. R. Greenberg of Greenberg & Bond Co. who on oath says that the above account is due just and unpaid. S. R. Greenberg

Sworn to and subscribed to before me This 1st day of Jan 1926
W. J. Blumenfeld, Notary Public

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, DeKalb County.

Personally before me, the Ordinary of said County, comes S. R. Greenberg of said County, who, after being sworn, on oath says that he knew Lee D. King of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in DeKalb County, in this State, on the 20 day of November 1926, and that a Pension of One hundred ($100.00) 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 $100.00, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me
D. D. Morgan Ordinary
DeKalb County

(Seal of Ordinary)

S. R. Greenberg

CERTIFICATE OF ORDINARY

GEORGIA, DeKalb County.

I, D. D. Morgan, Ordinary of said County, do certify that I personally know S. R. Greenberg, 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 L. D. King while in life and that this was the same person whose name appears on the Pension Roll of DeKalb County, and was paid a Pension of Two Hundred ($200.00) 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 4th day of Dec 1926.

(Seal or Ordinary)

D. D. Morgan, Ordinary
DeKalb 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 filled out.

Georgia, DeKalb County.

In person appeared before the undersigned, the Ordinary of said County, L. D. King, who being first duly sworn according to law, says on oath, that he is the L. D. King who made application to be placed on the Pension Rolls of the State of Georgia, said application being filed May 26th, 1925, in the office of the Pension Commissioner; Says that he has been a resident of the State of Georgia, and a citizen of said State all his life, having been born in said State of Georgia and never living anywhere else.

L. D. King

Sworn to and subscribed before me,
this 24th day of March, 1924.

D. D. Morgan
Ordinary, DeKalb County, Georgia.

says that he knew L. D. King of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in DeKalb County, in this State, on the 20 day of November 1926, and that a Pension of One hundred ($100.00) 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 $100.00, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me
V. D. Morgan Ordinary
DeKalb County

(Seal of Ordinary)

L. D. King.

CERTIFICATE OF ORDINARY

GEORGIA, DeKalb County.

I, V. D. Morgan, Ordinary of said County, do certify that I personally know L. D. King, 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 L. D. King while in life and that this was the same person whose name appears on the Pension Roll of DeKalb County, and was paid a Pension of Two Hundred ($200.00) 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 4th day of Dec, 1926.

(Seal or Ordinary) V. D. Morgan, Ordinary
DeKalb 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 filled out.

Georgia, DeKalb County.

In person appeared before the undersigned, the Ordinary of said County, L. D. King, who being first duly sworn according to law, says on oath, that he is the L. D. King who made application to be placed on the Pension Rolls of the State of Georgia, said application being filed May 26th, 1923, in the office of the Pension Commissioner; Says that he has been a resident of the State of Georgia, and a citizen of said State all his life, having been born in said State of Georgia and never living anywhere else.

L. D. King

Sworn to and subscribed before me,
this 24th day of March, 1924.

V. D. Morgan
Ordinary, DeKalb County, Georgia.

Ordinary's Certificate

STATE OF GEORGIA,
DeKalb COUNTY.

I, James R George Ordinary of said County, do certify that I know Mrs R.E.W. King 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. A. Boyd 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 4 day of Sept 1917

(SEAL) James R George Ordinary,
DeKalb County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

KING, Mrs. R. E. W.
DeKalb County

No.

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

County DeKalb
Name Mrs R.E.W. King
Widow of J.T. King
Company C. 42 Ga
Regiment 42 Ga
Approved

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

Regiment 42 Ga

Approved

E 1157

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

Certificate

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

Sworn under my hand and official seal of office this 4 day of Sept 1915

(SEAL) ..... Ordinary.
..... County.

r shall swear applicant and the witness in the following words:
ers make to each of the questions asked you and the evidence
here are insufficient.
1881, are entitled.
f of the residence of the person to be sworn and certified by
inable. If not, prove marriage, by some person, or by general

Ordinary's Certificate

STATE OF GEORGIA,
DeKalb COUNTY.

I, James R George Ordinary of said County, do certify that I know Mrs R A W King 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 T Boyd 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 4 day of Sept 1915

(SEAL) James R George Ordinary.
DeKalb County.

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

No.

Widow's Pension

Under Act 1910—as Amended by Act of 1919

County DeKalb

Name Mrs R.A.W. King

Widow of J.F. King

Company E. 42 Ga.

Regiment 42 Ga

Approved

E 1157

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

KING
Mrs. R. A. W.
Widow
Co. E, 42nd Ga. Inf.
Confed.

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

Questions for Applicant

STATE OF GEORGIA,
DeKalb COUNTY.

Personally before me comes Mrs R.A.W. King 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 R.A.W. King DeKalb County
2. How long and since when have you been a continuing resident of the State of Georgia? 58 years all My Life
3. When, where and to whom were you married? 19 day of Dec 1872 Newton County J.F. King
   a. Have you married since the death of first and soldier husband? I have not
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) March 4th 1862 Covington Ga Company E 42 Ga Regiment
5. When and where did the commands of your husband surrender or discharge from the army? 1865
6. Was your husband personally present at the time of the surrender or discharge of this command? was wounded not present
7. If he was not present state clearly where he was? At Home Wounded
8. Where was his command when he left? Resaca Ga left on account of wounds
   a. For what cause did he leave his command? wounded
   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? No Effort = Wounded
   g. In what way was he prevented from going back to Command Wounded
   h. Was he captured by the enemy at any time? was not
   i. If so, when and where captured and where held as a prisoner, and when and for what cause released?
   j. When and where did your first husband die? 12 day of June 1909 Rockdale Co Ga
   k. Were you residing together when he died? we I was
   l. If not, how long had you resided apart?
   m. Are you now a widow? Yes I am
9. Have you or your husband heretofore been paid a pension by the State? Husband was Paid
If so, when and for what cause were you or your husband placed on the roll? Wounded

Sworn to and subscribed before me this the 16 day of August 1915

James R George Ordinary
of DeKalb County.

(SEAL)

Mrs R.A.W. King

KING J.A. 38 yrs Co. E 42 Ga. Inf. C.S.A.

No.

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County DeKalb

Name Mrs R.A.W. King

Widow of J.A. King

Company E. 42 Ga

Regiment 42 Ga

Approved

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

6. Was your husband personally present at the time of the surrender or discharge of this command? Was wounded Not Present

7. If he was not present state clearly where he was? At Home Wounded

8. Where was his command when he left? Resaca Ga left on account of wounds

a. For what cause did he leave his command? Wounded

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? No Effort - Wounded

g. In what way was he prevented from going back to Command Wounded

h. Was he captured by the enemy at any time? was not

i. If so, when and where captured and where held as a prisoner, and when and for what cause released?

j. When and where did your first husband die? 12 day of June 1907 Rockdale Co Ga

k. Were you residing together when he died? we was

l. If not, how long had you resided apart?

m. Are you now a widow? I am

9. Have you or your husband heretofore been paid a pension by the State? Husband was Paid

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

Sworn to and subscribed before me this the 16 day of August 1919. Mrs R.A.W. King

James L. George Ordinary

of DeKalb County.

(SEAL)

Questions for [illegible]ses as to Service of Husband and Marriage

STATE OF GEORGIA,

Newton COUNTY.

Personally before me comes T.A.Boyd 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? T.A.Boyd

R/ Covington Newton Co.ga. Route No 8

2. How long and since when have you known Mrs J.A.King applicant?

60 years or more

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

All her life about 70 years

4. When and to whom was she married? J.A.King How do you know? living toget-her as husband and wife, and general reputation

5. How long and since when did you know J.A.King her husband? for 60 years or more before his death

6. When and where did J.A.King the husband of applicant, die? Rockdale Co Ga near Conyers

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? xxxxx

Were they divorced? No

9. When, where and in what Company and Regiment did J.A.King enlist?

March 4.1862. Covington Newton Co.ga. Co "E" 42 Ga.vols 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 March 4.1862 to some time in ----1864

12. When and where did his Command surrender, and was discharged? about April 26.1865 near Greensboro N.C.

13. Were you personally present when it was surrendered? No If not, where were you Danville Va and how came you there? on detailed service Guarding a bridge

14. Was the husband of applicant personally present at surrender? No If not where was he? at home When, where and for what cause did he leave Command? (Give date) wounded in 1864 By whose authority did he leave his Command? officer in charge And how long was he granted leave? unable on account of wound to report How do you know all this? I was present when he was wounded and when he received his furlough to come home.

15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command? wounded in leg, Rt. & returned Discharged at Gulahoochee Ga

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? none that I know of unable to perform military duty.

Sworn to and subscribed before me this the 16 day of August 1919. T.A. Boyd

A. D. Mason Ordinary

of Newton County.

(SEAL)

March 4, 1862. Co. "G" 3rd Ga. Cav. Co. A 42 Ga. Vols. 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 March 4, 1862 to some time in ----1864

12. When and where did his Command surrender, and was discharged? about April 26, 1865 near Greensboro N.C.

13. Were you personally present when it was surrendered? No If not, where were you Danville Va and how came you there? on detailed service Guarding a bridge

14. Was the husband of applicant personally present at surrender? No If not where was he? at home When, where and for what cause did he leave Command? (Give date.) wounded in 1864 By whose authority did he leave his Command? officer in charge And how long was he granted leave? unable on account of wound to report How do you know all this? I was present when he was wounded and when he received his furlough to come home.

15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command? wounded in leg, 1864 & Intermittent Disorder

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? none that I know of unable to perform military duty.

Sworn to and subscribed before me this the 16 day of August 1919

T. A. Boyd

A. D. Meador Ordinary

of Newton County.

(SEAL)

Ordinary's Certificate

STATE OF GEORGIA,

Newton COUNTY.

I, A. D. Meador Ordinary of said County, do certify that I know XXXXXXXX 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 T. A. Boyd 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 16 day of August 1919.

(SEAL) A. D. Meador Ordinary,

Newton County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

No.

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.

Byrd Printing Co., State Printers, Atlanta.

No.

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.

Byrd Printing Co., State Printers, Atlanta.

State of Alabama,
Marshall county.

Before me, P. C. Bynum' N.P.& Ex.Off.Justice of the Peace in and for said State and county, personally appeared Joe E. Lowry who after being by me first duly sworn deposes and says on oath as follows:

That he is 77 years of age and served in the Civil War as a Musician in Company "E" 42nd Georgia Regiment; That he was personally acquainted with J. A. King who served in said war as a Private in said Company "E" 42nd Georgia Regiment until he was wounded and given an Honerable Discharge from the service.

Affiant further states that he is the brother of Annie W. King, widow of the said J. A. King; that he was present at the marriage of Annie W. King to the said J. A. King.

Joe E. Lowry

Sworn to and subscribed before me this the 14th day of August 1919.

P. C. Bynum
N.P.& Ex.Off.Justice of the Peace

My Commission expires Mch. 12, 1921.

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 authorised and permitted to jion ih the honorable state of matrimony, S.J.King and R.A.W.Lowery, accoding 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 16 day of Dec, 1872.

J.W.B.Summers Seal .Ordinary.

I hereby certify that S.A.King, and R.A.W.Lowery were joined together in the Holy bans of matrimony on the 19, day of Dec, 1872. by me.

S.J.Chesnut J.P.

Georgia Newton County; I. A.D.Meador Ordinary in and for said state and county, do certify the within and foregoing to be a true and correct copy of the marriage license and certificate of the above named parties as appears of record in this office, Recorded in marriage record 1869- to 1875. page 126.

Given under my hand and official seal of office this August 12,1919.

A D Meador
Ordinary Newton County Ga.

State of Alabama,

Marshall county.

Before me, P. C. Bynum' N.P.& Ex.Off.Justice of the Peace in and for said State and county, personally appeared Joe E. Lowry who after being by me first duly sworn deposes and says on oath as follows:

That he is 77 years of age and served in the Civil War as a Musician in Company "E" 42nd Georgia Regiment; That he was personally acquainted with J. A. King who served in said war as a Private in said Company "E" 42nd Georgia Regiment until he was wounded and given an Honerable Discharge from the service.

Affiant further states that he is the brother of Annie W. King, widow of the said J. A. King; that he was present at the marriage of Annie W. King to the said J. A. King.

Joe E. Lowry

Sworn to and subscribed before me this the 14th day of August 1919.

P. C. Bynum
N.P.& Ex.Off.Justice of the Peace

My Commission expires Mch. 12, 1921.

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 jion ih the honorable state of matrimony, A.J.King and R.A.W.Lowery, accoding 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 16 day of Dec, 1872.

J.W.B.Summers Seal, Ordinary.

I hereby certify that A.J.King, and R.A.W.Lowery were joined together in the Holy bans of matrimony on the 19, day of Dec, 1872. by me.

S.J.Chesnut J.P.

Georgia Newton County; I. A.D.Meador Ordinary in and for said state and county, do certify the within and foregoing to be a true and correct copy of the marriage license and certificate of the above named parties as appears of record in this office, Recorded in marriage record 1869- to 1875. page 126.

Given under my hand and official seal of office this August 12,1919.

A D Meador
Ordinary Newton County Ga.

King Mrs. L. D.
Widow of C.
Approved for 1927
DeKalb County

WIDOW'S APPLICATION

To Be Put on Roll in Her Own Right When Husband Was on the Pension Roll of Georgia.

County DeKalb
Name Mrs L.D. King
Widow of C.
Company
Regiment 26 Georgia Cav
Date of Husband's Death Nov 20 1926
Date of Marriage Dec 3 1876
Approved John W. Elam
22 Jany 27

Commissioner of Pensions.

12-20-26 E

Ordinary's Certificate

STATE OF GEORGIA,
DeKalb COUNTY.

I, V. A. Morgan Ordinary of said County, do certify that I know Mrs. L. D. King, the applicant for pension; that she is the person she represents herself to be, and that she is continuously a bona fide resident of said County since January 1st, 1920; that I also know Tom Jolly, the witness as to marriage, and that both the foregoing were duly sworn by me before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and official seal of office this 18 day of Dec. 1926.

(SEAL OF ORDINARY) V. A. Morgan Ordinary,
DeKalb County

Instructions.

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the County of residence.
4. Only widows who are married prior to first January, 1881, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because Disabled Pensioners made no proof of service and were not required to do so.

rtificate

Approved John W. Clark
22 Jany 27
OK

Commissioner of Pensions.

12-20-26 E

...Ordinary of said County, do certify that I
applicant for pension; that she is the person
isly a bona fide resident of said County since
Tom Jacey, the witness as to
rn by me before signing the respective affi
and their statements are entitled to full faith

his 18 day of Dec. 1926.
V. D. Morgan Ordinary.
DeKalb County

...ns.
..., applicant and the witness in the following words:
... each of the questions asked you and the evidence
...sufficient.
...County of residence.
...d), are entitled.
... If not, prove marriage, by some person, or by gen-
...ication Blank and state and prove full term of hus-
...proof of service and were not required to do so.

King Mrs. L. D. E
DeKalb County
Approved for 1927

WIDOW'S APPLICATION

To Be Put on Roll in Her Own Right When Husband Was on the Pension Roll of Georgia.

County DeKalb
Name Mrs L. D. King
Widow of L. D. King
Company C.
Regiment 26 Ga Vol Inf
Date of Husband's Death Nov 20 1876
Date of Marriage Dec 3 1877
Approved John W. Clark
22 Jany 27
OK

Commissioner of Pensions.

12-20-26 E

Ordinary's Certificate

STATE OF GEORGIA,
DeKalb COUNTY.

I, V. D. Morgan Ordinary of said County, do certify that I know Mrs. L. D. King, the applicant for pension; that she is the person she represents herself to be, and that she is continuously a bona fide resident of said County since January 1st, 1920; that I also know Tom Jacey, the witness as to marriage, and that both the foregoing were duly sworn by me before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and official seal of office this 18 day of Dec. 1926.

(SEAL OF ORDINARY) V. D. Morgan Ordinary,
DeKalb County

Instructions.

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the County of residence.
4. Only widows who are married prior to first January, 1881, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because Disabled Pensioners made no proof of service and were not required to do so.

Kin
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County
Name
Widow
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Regime
Date of
Date of
Approv

Ordinary's Certificate

STATE OF GEORGIA,
DeKalb COUNTY.

I, V. A. Morgan Ordinary of said County, do certify that I know Mrs. L. D. King, the applicant for pension; that she is the person she represents herself to be, and that she is continuously a bona fide resident of said County since January 1st, 1920; that I also know Tom Yancey, the witness as to marriage, and that both the foregoing were duly sworn by me before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and official seal of office this 18 day of Dec., 1926.

(SEAL OF ORDINARY) V. A. Morgan Ordinary,
DeKalb County

Instructions.

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the County of residence.
4. Only widows who are married prior to first January, 1881, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because Disabled Pensioners made no proof of service and were not required to do so.

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,
DeKalb COUNTY.

Personally before me comes Mrs. L. D. King of said County, who, after having been duly sworn, says that she is the widow of L. D. King to whom, in the County of Gwinnett State of Georgia she was married on the 3rd day of October 1877, and that she remained his wife, and resided with him to the date of his death in November 1926 and that she has not since his death remarried; at the time of his death he was a resident of DeKalb County, in said State of Georgia, and he was on the Indigent Pension Roll of the State and paid a pension of $50.00 in DeKalb County for 1926 (per annum), on account of being a soldier in Company Husband on Roll Regiment (Volunteers or State Militia).

That she is now a bona fide resident citizen of said State of Georgia and she has, continuously, resided there since the day of her birth 19.

Sworn to and subscribed before me, this the

18th day of December, 1926.
V. A. Morgan, Ordinary
of DeKalb County.

Mrs L D King
(Applicant)

(SEAL OF THE ORDINARY.)

Affidavit of Witness to Prove Marriage and Date of Death of Husband.

STATE OF GEORGIA,
DeKalb COUNTY.

Personally before me comes Tom Yancey, who is 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. L. D. King, who made the foregoing affidavit, is the lawful widow of L. D. King who died in DeKalb County in said State of Georgia on the 20th day of November, 1926, and that she has not since remarried; that she became the wife of L. D. King on the 3rd day of October, 1877; that she and he had resided together as husband and wife, continuously, since 3rd day of Octoberm 1877, and that L. D. King was the same man who was on the pension roll of said State from DeKalb County Georgia when he died.

Sworn to and subscribed before me, this the

15 day of Jan., 1927.
V. A. Morgan, Ordinary
of DeKalb County.

Tom Yancey

(SEAL OF ORDINARY)

to whom, in the County of Gwinnett State of Georgia she was married on the 3rd day of October 1877, and that she remained his wife, and resided with him to the date of his death in November 19 26 and that she has not since his death remarried; at the time of his death he was a resident of DeKalb County, in said State of Georgia, and he was on the Indigent Pension Roll of the State and paid a pension of $50.00 in DeKalb County for 19 26 (per annum), on account of being a soldier in Company Husband on Roll Regiment (Volunteers or State Militia).

That she is now a bona fide resident citizen of said State of Georgia and she has, continuously, resided there since the day of her birth 19 .

Sworn to and subscribed before me, this the

18th day of December, 192 6.

V. D. Morgan, Ordinary
of DeKalb County.

Mrs L D King
(Applicant)

(SEAL OF THE ORDINARY.)

Affidavit of Witness to Prove Marriage and Date of Death of Husband.

STATE OF GEORGIA.

DeKalb COUNTY.

Personally before me comes Tom Jolly who is 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. L. D. King, who made the foregoing affidavit, is the lawful widow of L. D. King who died in DeKalb County in said State of Georgia on the 20th day of November, 19 26, and that she has not since remarried; that she became the wife of L. D. King on the 3rd day of October, 1877; that she and he had resided together as husband and wife, continuously, since 3rd day of Octoberm 1877, and that L. D. King was the same man who was on the pension roll of said State from DeKalb County Georgia when he died.

Sworn to and subscribed before me, this the

1st day of Jan., 1927.

V. D. Morgan, Ordinary
of DeKalb. County.

Tom Jolly

(SEAL OF ORDINARY)

STATE OF GEORGIA

MARRIAGE CERTIFICATE

GWINNETT COUNTY

This Certifies that Lero. D. King,

and Miss. W.E. Matheus,

WERE UNITED IN THE HOLY BONDS OF MATRIMONY

By T.E. Henderl[illegible], M.G.

On the 3rd, day of October, in the year of our Lord 192 1877

as appears of record in my office in Marriage Record, book #4.

page 406. This 6th, day of December, 1926.

A.G. Robinson
Ordinary.

STATE OF GEORGIA

MARRIAGE CERTIFICATE

GWINNETT COUNTY

This Certifies that Leroy D. King,

and Miss. W.H. Mathews,

WERE UNITED IN THE HOLY BONDS OF MATRIMONY

By T.E. Kennerly, M.G.

On the 3rd, day of October, . in the year of our Lord ~~192~~ 1677

as appears of record in my office in Marriage Record. book #4.

page 406 . This 6th, day of December, 1926.

B.G. Robinson
Ordinary.

Kirkpatrick, J. K.

De Kalb Co. Ga.
Code, Section 1254. # 15

(FOR THOSE ALREADY ENROLLED.)

S. F. No. 7607 Ft. 1906

INDIGENT

SOLDIER'S PENSION

1906.

Name J. K. Kirkpatrick

County De Kalb

Co. L Regiment 15th Ga

WARRANT ISSUED

1/12 1906.

JOHN W. LINDSEY.
Commissioner of Pensions.

WARRANT HANDED TO

Affa

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

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 the presence of

_____

_____

County De Kalb

Co. L Regiment 15th Ga

WARRANT ISSUED

1/12 1906.

JOHN W. LINDSEY.
Commissioner of Pensions.

WARRANT HANDED TO

[illegible]

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

[illegible]

day of 1906.

[L. S.]

allowed, and request that he remit same to

at

of hereby authorize

ATTORNEY.

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 1906.

_____ [L. S.]

Executed in the presence of

_____

INDIGENT
SOLDIER'S PENSION
1906.

Name [illegible]

County De Kalb

Co. L Regiment 15th Ga

WARRANT ISSUED

1/12 1906.

JOHN W. LINDSEY.
Commissioner of Pensions.

WARRANT HANDED TO

[illegible]

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

Code Section 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 7647

POWER OF ATTORNEY.

STATE OF GEORGIA,

_____ COUNTY.

I, _____ hereby authorize

of _____

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

at _____

by _____

WITNESS my hand and seal, this _____ day of 1907

_____ [L. S.]

Executed in presence of

_____

INDIGENT
SOLDIER'S PENSION
1907.

Name [illegible]

County [illegible]

Co. [illegible] Regiment

WARRANT ISSUED

_____ 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

[illegible]

THE W. HARRISON COMPANY, ATLANTA.

Code Section 1254.
(FOR THOSE ALREADY ENROLLED)

No.

Code Section 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 767

INDIGENT
SOLDIER'S PENSION
1906.

Name J. J. Kirkpatrick

County Pike

Co. I Regiment 15th Ga

WARRANT ISSUED 1/12 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Code Section 1254.
(FOR THOSE ALREADY ENROLLED.)

No.

INDIGENT
SOLDIER'S PENSION
1907.

Name J. J. Kirkpatrick

County Pike

Co. I Regiment 15th Ga

WARRANT ISSUED 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Pike County.

Personally appears J. J. Kirkpatrick of Pike 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 27 day of April 1837; that he is 68 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 I, of 15th Regiment of Georgia; that his physical condition is as follows: Infirmity

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 Pike County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the 15th day of January 1906. J. J. Kirkpatrick
James R. George Ordinary.

State of Georgia,
Pike County.

I, James R. George, Ordinary of said County, do certify that I am well acquainted with J. J. Kirkpatrick the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1906.

James R. George
Ordinary Pike County.

Affix your seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
Pike County.

Personally appears J. J. Kirkpatrick of Pike 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 24 day of April 1837; that he is 69 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 I, of 15th Regiment of Georgia; that his physical condition is as follows: Infirmity

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 Pike County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 8 day of January 1907. J. J. Kirkpatrick
James R. George Ordinary.

State of Georgia,
Pike County.

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

James R. George
Ordinary Pike County.

Affix your seal here

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

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 DeKalb County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the 5th day of January 1906. J. K. Kirkpatrick

James R. George Ordinary.

State of Georgia,
DeKalb **County.**

I, James R. George, Ordinary of said County, do certify that I am well acquainted with J. K. Kirkpatrick the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1906.

James R. George
Ordinary DeKalb County.

Affix your seal here

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

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 8 day of January 1907. J. K. Kirkpatrick

James R. George Ordinary.

State of Georgia,
_____ **County.**

I, James R. George Ordinary of said County, do certify that I am well acquainted with J. K. Kirkpatrick the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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.

James R. George
Ordinary _____ County.

Affix your seal here

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

GEORGIA, DeKalb County.

I, James R. George, Ordinary of said county, do certify that I personally know Mrs. Emma Rebecca Kirkpatrick, the applicant, and that she is the lawful widow of J. K. Kirkpatrick, and was on the Indigent Pension Roll of said DeKalb county, and was paid a Pension from DeKalb county for 1914, and at the time of his death on the 25th day of Feb. 1915, there was due to him and unpaid his Pension of Sixty ($60.00) Dollars from the State of Georgia, and I know Mr. C. C. Taylor, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 3 day of May 1915.

_____ Ordinary.
_____ County.

Kirkpatrick J. K.
DeKalb Co.

No. _____ 1915

Application for Pension Due Deceased Soldier
UNDER ACT 1891
To be paid his Widow or Dependent Children
BY

Mrs. Emma Rebecca Kirkpatrick
Widow of J. K. Kirkpatrick
of _____ County
Co. _____ Regt. Vols

Approved and paid _____ 1915.

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

Chas. P. Byrd, State Printer, Atlanta.

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 191..., through my deceased husband, _____ who was on _____ Pension Roll and paid from _____ for 19....

Witness my hand this _____ day of _____ 19....

Attested before me.
_____ _____

Kirkpatrick J. K.
Co. Vol. Inf.

No. _____ 1915

Application for Pension Due Deceased Soldier
UNDER ACT 1891
To be paid his Widow or Dependent Children
BY

Mrs. Emma Rebecca Kirkpatrick
Widow of J. K. Kirkpatrick
of _____ County.
Co. _____ Regt. _____ Vols.

Approved and paid _____ 1915.

J. W. LINDSEY,
Commissioner of Pensions.

Chas. P. Byrd, State Printer, Atlanta.

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 191..., through my deceased 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, DeKalb **County.**

Personally before me comes Mrs. Emma Rebecca Kirkpatrick, of said county, after being duly sworn, on oath says that she is the widow of J. K. Kirkpatrick who was duly enrolled as a Bridgeman Pensioner from the county of DeKalb and was paid a Pension of Sixty (60 00) Dollars from DeKalb county for 1914, and that the said J. K. Kirkpatrick died in DeKalb county on the 23 day of Oct. 1914, and at the time of his death a Pension of 60 00 was due him from DeKalb county and unpaid for 1915.

Applicant further swears that she married the said J. K. Kirkpatrick on the 11th day of Dec. 1870, in Jasper 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 3 day of May 1915.

James R. George Ordinary. Mrs. Emma R. Kirkpatrick.
DeKalb County.

AFFIDAVIT OF WITNESS.

GEORGIA, DeKalb **County.**

Personally before me comes Mrs. A. A. Taylor, who on oath says that he knew J. K. Kirkpatrick while in life and that he knows Emma Rebecca Belk Mrs. Emma Rebecca Kirkpatrick the above applicant; that he knows that the said J. K. Kirkpatrick and Emma Rebecca Belk were in due form of law married in the county of Jasper in the State of Georgia on the 11th day of December, 1870, and that they resided together as husband and wife from date of marriage to the day of his death on the 23rd day of Oct. 1914, and I now know that she is his dependent widow.

Sworn to and subscribed before me this 3 day of May, 1915.

James R. George Ordinary. Mrs. A. A. Taylor
DeKalb County.

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

Personally before me comes Mrs. Emma Rebecca Kirkpatrick, of said county, after being duly sworn, on oath says that she is the widow of J. K. Kirkpatrick who was duly enrolled as a Indigent Pensioner from the county of DeKalb and was paid a Pension of Sixty (60.00) Dollars from DeKalb county for 1914, and that the said J K Kirkpatrick died in DeKalb county on the 25 day of April, 1915, and at the time of his death a Pension of 60.00 was due him from DeKalb county and unpaid for 1915.

Applicant further swears that she married the said J K Kirkpatrick on the 11th day of Dec, 1870, in Taliaferro 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 3 day of May, 1915.

James R George, Ordinary. Mrs Emma R Kirkpatrick

DeKalb County.

AFFIDAVIT OF WITNESS.

GEORGIA, DeKalb County.

Personally before me comes Mr. A. A. Taylor, who on oath says that he knew J K Kirkpatrick while in life and that he knows Emma R Kirkpatrick Mrs. Emma Rebecca Kirkpatrick the above applicant; that he knows that the said J K. Kirkpatrick and Emma Rebecca Belk were in due form of law married in the county of Taliaferro in the State of Georgia on the 11th day of December, 1870, and that they resided together as husband and wife from date of marriage to the day of his death on the 25th day of April, 1915, and I now know that she is his dependent widow.

Sworn to and subscribed before me this 3 day of May, 1915.

James R George, Ordinary. | Mr A A Taylor

DeKalb County.

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

---

Georgia, Fulton County.

I the undersigned do certify that J. R. Kirkpatrick now of the County Fulton is the same person who as Indigent pensioner was on the pension rolls of this county, and drew a pension of $60.00 dollars for 1900, and the bearer is same man.

Given under my hand and official seal of office Nov 18th 1902

John R Wilkinson, D.S.
Ordinary

SEAL

State of Georgia, Taliaferre County.

To any minister of the Gospel, Judge, J. P. or any person authorised to celebrate:

These are to authorise & permit you to Join in the Honourable State of Matrimony John K. Kirkpatrick of the one part and Miss Emma R. Belk of the other part according to the Rites of your Church provided there be no lawful cause to obstruct the same, and this shall be your authority for so doing.

Given under my hand as Ordinary for the County aforesaid, this Tenth day of December 1870.

Charles A. Beazley, Ordinary.

I hereBy certify that John K. Kirkpatrick and Miss Emma R. Belk were joined together in the Holy Bans of MatriMony, by me on the Eleventh day of December 1870.

L. R. L. Jennings M. G.

Georgia, Taliaferre County.

I, M. Z. Andrews, Ordinary of said County, hereby certify that the above and foregoing is a true and correct copy of the marriage license and marriage certificate of John K. Kirkpatrick and Miss Emma R. Belk as appears of record in my office.

Witness my hand and seal of office, this 6th, day of May, 1915.

M. Z. Andrews.
Ordinary of Taliaferre County_ Ga.

Georgia, Fulton County.

I the undersigned do certify that J. R. Kirkpatrick now of the County Fulton is the same person who as Widow pensioner was on the pension rolls of this county, and drew a pension of $60.00 dollars for 1900, and the bearer is same man.

Given under my hand and official seal of office Nov 18th 1908

John R Wilkinson [L. S.]
Ordinary

SEAL

the other part according to the Rites of your Church provided [illegible] no lawful cause to obstruct the same, and this shall be your authority for so doing.
Given under my hand as Ordinary for the County aforesaid, this Tenth day of December 1870.

Charles A. Beazley, Ordinary.

I hereBy certify that Jehn K. Kirkpatrick and Miss Emma R. Belk were joined together in the Holy Bans of MatriMony, by me on the Eleventh day of December 1870.

L. R. L. Jennings M. G.

Georgia, Taliaferro County.
I, M. Z. Andrews, Ordinary of said County, hereby certify that the above and foregoing is a true and correct copy of the marriage license and marriage certificate of Jehn K. Kirkpatrick and Miss Emma R. Belk as appears of record in my office.

Witness my hand and seal of office, this 6th, day of May, 1915.

M. Z. Andrews.
Ordinary of Taliaferro County_ Ga.

STATE DEPT. PUBLIC WELFARE,
Atlanta, Oct. 1, 1937.

The name Thos. S. Kirkpatrick has not been found on rolls of any C. S. A. organization from the State of Georgia.

There are two rolls on file of Co. A. 10th Regt. Ga. Cavalry, State Guards, namely one dated Aug. 4, 1863 and muster-out roll dated Feb. 2, 1864. (Washington record.)

*Muster-in roll.

Not a pensioner.

Director Confederate Records Div.

Asked for this in 10th Battn. Ga. State Guards Cavalry. Washington replied:

"The name Thos. S. Kirkpatrick has not been found on rolls of any C. S. A. organization from the State of Georgia."

Widow's Application

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

County DeKalb

Name Mrs. M. L. Kirkpatrick

Widow of Thomas S. Kirkpatrick

Date of Marriage Jan. 24 1885

Date of Husband's Death June 16 1898

Company A

Regiment Floyd's

Approved Jan 29 1938

Director.

Ordinary's Certificate

STATE OF GEORGIA,

DeKalb COUNTY.

I, V. S. Morgan, Ordinary of said County, do certify that I know Mrs. M. L. Kirkpatrick 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 See Marriage Certificate 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 12 day of August 193 7.

(SEAL OF ORDINARY) V. S. Morgan, Ordinary.

of DeKalb 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.

...tificate

...Ordinary of said County, do certify

...the applicant for pension; that

...e has been, continuously, a bona fide resident

...ow. ...See Marriage Certificate.

...g the foregoing affidavits, and that they are

...e marriage; that both of them are now residents

to full faith and credit.

...day of ...August ...193 7.

...Morgan, Ordinary.

...DeKalb ...County.

...IS:

...applicant and the witness in the following words: "You ...questions asked you and the evidence you shall give will be ...ready receiving a pension.

...y in which the applicant or witness resides and must be ...prove marriage, by some person, or by general reputation. ...ubject the State. A short simple form is easier to handle.

Approved June 29 ...193 7.

L. Thos. Gibbons
Director.

Director Confederate Records Div.

Asked for this in 10th Battn. Ga. State Guards Cavalry. Washington replied:

"The name Thos. S. Kirkpatrick has not been found on rolls of any C. S. A. organization from the State of Georgia."

L. Henderson.

AUG 1937

STATE DEPT. PUBLIC WELFARE, Atlanta, Oct. 1, 1937.

The name Thos. S. Kirkpatrick has not been found on rolls of any C. S. A. organization from the State of Georgia.

There are two rolls on file of Co. A, 10th Regt. Ga. Cavalry State Guards, namely one dated Aug. 4, 1863 and muster-out roll dated Feb. 2, 1864. (Washington record.)

*Muster-in roll.

Not a pensioner.

Director Confederate Records Div.

Asked for this in 10th Battn. Ga. State Guards Cavalry. Washington replied:

"The name Thos. S. Kirkpatrick has not been found on rolls of any C. S. A. organization from the State of Georgia."

L. Henderson.

Widow's Application

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

County DeKalb

Name Mrs. M. L. Kirkpatrick

Widow of Thomas S. Kirkpatrick

Date of Marriage Jan. 24 1885

Date of Husband's Death June 16 1898

Company A

Regiment Floyd's

Approved Jan 29 1938

L. Thos. Gibbons
Director.

Ordinary's Certificate

STATE OF GEORGIA,

DeKalb COUNTY.

I, V. S. Morgan, Ordinary of said County, do certify that I know Mrs. M. L. Kirkpatrick 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 See Marriage Certificate 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 12 day of August 193 7.

(SEAL OF ORDINARY) V. S. Morgan, Ordinary.

of DeKalb County.

INSTRUCTIONS:

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

APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,

DeKalb COUNTY.

Personally appears before me, Mrs. M. L. Kirkpatrick 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. M. L. Kirkpatrick - 135 East Hill St., Decatur, DeKalb Co., Ga.
2. How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? All life
Give date, or year, of your birth. June 22, 1858 Age? 79 years
3. (1)When, (2)where and (3)to whom were you married?
Married January 24, 1885 in Conyers, Georgia to Thomas S. Kirkpatrick
a. Have you married since the death of first and soldier husband? no
b. When and where did your first husband die? Died June 16, 1898 in Decatur, Georgia
c. Were you residing together when he died? yes
d. If not, how long had you resided apart? x
e. Are you now a widow? yes
f. Have you or your husband heretofore been paid a pension by the State? no
g. If so, when and for what cause were you or your husband placed on the roll?

SECTION II.

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

1. **When, where** and **in what Company and Regiment** did your husband enlist as a soldier in Confederate Army or Georgia Militia. (**Give name of Colonel and Captain.**) State whether Infantry, Cavalry, Artillery, Reserves, State Guards, State Militia or State Troops.
Entered on the 15th day of Oct. 1863 as a private in Company A of the Floyd's Regiment of Cavalry, Georgia Volunteers, 10th Battalion C.S.A.
2. When and where did the Commands of your husband surrender or discharge from the Service?
Discharged on the 15 day of February, 1864 by John M. Millen.
3. Was your husband personally present with his Command when it was surrendered or discharged?
x
4. If he was not present, state specifically and clearly where he was?
5. When did he leave the Command? Discharged Feb. 15, 1864
a. For what cause did he leave? Discharged
b. By whose authority did he leave? Col. John M. Millen
c. For how long was his leave of absence granted? x d. In what way?
e. What was his physical condition when he left his Command? Don't know
f. What effort did he make to return to his Command? x
g. In what way was he prevented from going back to his Command? x
h. Was he captured by the enemy at any time? no
i. If so, when and where? In what prison was he held and when was he released?

Sworn to and subscribed before me, this the 12 day of August, 193 7.

V. S. Morgan, Ordinary

of DeKalb County.

(SEAL OF ORDINARY)

Mrs. M. L. Kirkpatrick
Applicant.

Under 1919,

County
Name
Widow
Date o
Compa
Regime
Approv

Ordinary's Certificate

STATE OF GEORGIA,

DeKalb COUNTY.

I, V. S. Morgan, Ordinary of said County, do certify that I know Mrs. M. L. Kirkpatrick 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 See Marriage Certificate 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 12 day of August 193 7.

(SEAL OF ORDINARY) V. S. Morgan, Ordinary.

of DeKalb 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.

f. Have you or your husband heretofore been paid a pension by the State? no

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

SECTION II.

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

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

Entered on the 15th day of Oct. 1863 as a private in Company A of the Floyd's Regiment of Cavalry, Georgia Volunteers, 10th Battalion C.S.A.

2. When and where did the Commands of your husband surrender or discharge from the Service?

Discharged on the 15 day of February, 1864 by John M. Millen

3. Was your husband personally present with his Command when it was surrendered or discharged?

x

4. If he was not present, state specifically and clearly where he was?

5. When did he leave the Command? Discharged Feb. 15, 1864

a. For what cause did he leave? Discharged

b. By whose authority did he leave? Col. John M. Millen

c. For how long was his leave of absence granted? x d. In what way?

e. What was his physical condition when he left his Command? Don't know

f. What effort did he make to return to his Command? x

g. In what way was he prevented from going back to his Command? x

h. Was he captured by the enemy at any time? no

i. If so, when and where? In what prison was he held and when was he released?

Sworn to and subscribed before me, this the 12 day of August 193 7.

V. S. Morgan, Ordinary

of DeKalb County.

(SEAL OF ORDINARY)

Mrs. M. L. Kirkpatrick
Applicant.

An Affidavit

(Read carefully before making this affidavit.)

State of Georgia,

County of DeKalb

Before me, the Ordinary of said County, comes Mrs. M. L. Kirkpatrick, who, after being duly sworn, deposes and says:

1. That she is an applicant for the Georgia pension allowed to widows of Confederate soldiers;

2. That her deceased husband **was not** a pensioner of the State of Georgia at the time of his death, and, therefore, his Confederate military service has not heretofore been proven in connection with an application for pension;

3. That she is unable to obtain from any person or source evidence as to the Confederate military service of her deceased soldier husband;

4. That this affidavit is being made to authorize the use, as evidence, of any official record of said Confederate military service as may be preserved either at the Capitol in Atlanta, or in the office of the Adjutant-General, Washington, D. C.

Mrs. M. L. Kirkpatrick

Sworn to and subscribed before me, this the

12 day of August, 1937

, Ordinary,

DeKalb County.

Questions for Witness as to Marriage and Service of Husband.

STATE OF GEORGIA,

COUNTY.

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

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

2. How long and since when have you known applicant

3. **Where does she now reside, and since when has she been,** continuously, a bona fide, resident citizen of this State?

4. When and to whom was she married? How do you know?

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

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

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

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

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

9. When, where and in what Company and regiment did enlist?
(Give date and place)

10. How did you obtain your information of this service?

11. How long within your personal knowledge did he perform actual military service with this Company and Regiment? (Give dates.)

12. When and where was his Command surrendered or discharged? (Give date and place.)

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

14. Was the husband of applicant personally present with his Command at its surrender?
If not where was he? and how came him there?
When, where and for what cause did he leave his Command? (Give date.)
By whose authority did he leave his Command?
and how long was he granted leave?
How do you know all that you have stated to be true? (If of your own knowledge, state clearly and specifically)

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

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

17. Was he captured as a prisoner? If so, when and where?
In what prison was he held? amd when released?

Sworn to and subscribed before me, this the

day of , 193 . (Witness)

, Ordinary

of , County.

(SEAL OF ORDINARY)

Mrs. M. L. Kirkpatrick

Sworn to and subscribed before me, this the

12 day of August, 1937.

, Ordinary,

DeKalb County.

the husband of applicant, die?

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

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

Were they divorced?

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

9. When, where and in what Company and regiment did enlist?

(Give date and place)

10. How did you obtain your information of this service?

11. How long within your personal knowledge did he perform actual military service with this Company and Regiment? (Give dates.)

12. When and where was his Command surrendered or discharged? (Give date and place.)

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

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

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

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

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

By whose authority did he leave his Command?

and how long was he granted leave?

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

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

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

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

In what prison was he held? amd when released?

Sworn to and subscribed before me, this the

day of , 193 (Witness)

, Ordinary

of , County.

(SEAL OF ORDINARY)

ORDINARY'S OFFICE
ROCKDALE COUNTY GEORGIA
LUTHER MORRIS
ORDINARY
CONYERS, GEORGIA

GEORGIA, ROCKDALE COUNTY

I, Luther Morris, Ordinary of said county, hereby certify that the marriage records of Rockdale County, in Book "B" page 212 shows that Thomas S. Kirkpatrick and Mattie L. Flowers were married in said county on Jan. 24 1885.

Given under my hand and seal, this Aug., 3 1937

Luther Morris
Ordinary, Rockdale County.

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLANTA

July 5, 1938.

Hon. V. S. Morgan,
Ordinary, DeKalb County,
Decatur, Georgia.

WHEREAS:

MRS. M. L. KIRKPATRICK, WIDOW OF THOMAS S. KIRKPATRICK,

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 said service; and that applicant was married to said soldier prior to January 1st, 1900, and that she was not remarried; it is, therefore,

ORDERED:

That said applicant be admitted to the pension roll of the State of Georgia for the month of July, 19 38, and thereafter; and that a copy of this order be sent to the Ordinary of said County.

This, the 5th day of July 19 38.

L. Thos. (Rat) Gellen

Director, Confederate Division
State Department of Public Welfare

GEORGIA, ROCKDALE COUNTY

I, Luther Morris, Ordinary of said county, hereby certify that the marriage records of Rockdale County, in Book "B" page 212 shows that Thomas S. Kirkpatrick and Mattie L. Flowers were married in said county on Jan. 24 1885.

Given under my hand and seal, this Aug., 3 1937

Luther Morris
Ordinary, Rockdale County.

WHEREAS:

MRS. M. L. KIRKPATRICK, WIDOW OF THOMAS S. KIRKPATRICK,

has filed in this office an application for the Georgia pension allowed to widows of Confederate veterans; and it appearing that the late husband of this applicant performed actual military service as a Confederate soldier and was honorably separated from such service; and that applicant was married to said soldier prior to January 1st, 1900, and that she was not remarried; it is, therefore,

ORDERED:

That said applicant be admitted to the pension roll of the State of Georgia for the month of July, 19 38, and thereafter; and that a copy of this order be sent to the Ordinary of said County.

This, the 5th day of July 19 38.

L. Thos (Pat) Gilleu
Director, Confederate Division
State Department of Public Welfare

July 30, 1937

The following data is copied from a certificate of eligibility for admission to Roll of Honor dated March 26 1914:

THOMAS S. KIRKPATRICK entered the service of the Confederate States on the 15th day of October, 1863 as a private in Company A of the Floyd's Regiment of Cavalry, Georgia Volunteers; 10th Battalion C.S.A., and was at that time a resident of Decatur, Ga. He was honorably discharged from said service by Col. John [illegible], being only fourteen years old, on the 15th (?) day of February, 1864, at which time he held the rank of private.

We endorse the above certificate of eligibility.
[illegible] March Avary, Member Co. -- Gibbs' Legion Cav. Ga. [illegible] C.S.A.

F.O. Smith, Member Co. I Regt. 42 Ga. Vols., C.S.A.

J.L.C. Kerr, Adj. Camp Evan Co. Gas.

I hereby certify that Thomas S. Kirkpatrick served with me in Captain Hilton A. Candler's Company, Floyd's Regiment, Cav. State Troops, and as I remember, we were mustered out of service at Rome, Georgia early in 1864.

March Avary.

I witnessed the copying of the above from the original document bearing original signatures, headed "For Widows of Confederate Soldiers". This document is from the files of the U.D.C. of which Mrs. [illegible] Cole Jones, [illegible] Howard Ave., Decatur, Georgia is the present custodian.

Lois Alverson

July 30, 1937

The following data is copied from a certificate of eligibility for a Southern Cross of Honor dated March 26 1914:

THOMAS J. KIRKPATRICK entered the service of the Confederate States on the 15th day of October, 1863 as a private in Company A of the Floyd's Regiment of Cavalry, Georgia Volunteers; 10th Battalion C.S.A., and was at that time a resident of Decatur, Ga. He was honorably discharged from said service by Col. John [illegible] Millen, being only fourteen years old, on the 15th (?) day of February, 1864, at which time he held the rank of private.

We endorse the above certificate of eligibility,
[illegible]rch Avary, Member No. [illegible] Cobb's Legion Cav. Old [illegible] .A

F.O. Smith, Member Co. I Reg't. 42 Ga. Vols., C.S.A.

J.L.C.Kerr, Adj. Camp Avary No. 606.

I hereby certify that Thomas J. Kirkpatrick served with me in Captain Milton A. Candler's Company, Floyd's Regiment, Cav. State Troops, and as I remember, we were mustered out of service at Rome, Georgia early in 1864.

Arch Avary.

I witnessed the copying of the above from the original document bearing original signatures, headed "For Widows of Confederate Soldiers". This document is from the files of the U.D.C. of which Mrs. [illegible] Cole Jones, 111 [illegible] Howard Ave., Decatur, Georgia is the present custodian.

Lois Alverson

[illegible]

Ordinary's Certificate

STATE OF GEORGIA,
DeKalb COUNTY.

I, James O Quinn Ordinary of said County, do certify that I know Mrs Eliza Kittredge 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 Same ordinary's certificate the witness who swears to the service of husband; that both of them are now residents of said County and [illegible] worthy, and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 25 day of October 1919

(SEAL) James O Quinn Ordinary.
DeKalb 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. Addit onal affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

KITTRIDGE, Eliza
DeKalb County
No.

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County DeKalb
Name of Widow Mrs. Eliza Kittredge
Widow of [illegible] E. M. Kittredge.
Company F.
Regiment 10th Georgia
Approved

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-30-1919

Approved .....

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-30-1919

...certificate

...Ordinary of said County, do certify ...the applicant for pension. She ...a bona fide continuing resident citizen of said County ...th of them are now residents of said County and ...

...d credit.

...day of ..... 19..

..... Ordinary.

..... County.

...ll swear applicant and the witness in the following words: ...make to each of the questions asked you and the evidence ...are insufficient. ...the residence of the person to be sworn and certified by ...he. If not, prove marriage, by some person, or by general

Ordinary's Certificate

STATE OF GEORGIA,
DeKalb COUNTY.

I, James P. George Ordinary of said County, do certify that I know Mrs. Eliza Kittredge 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 Lee Ordinary Certificate 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 1919

(SEAL)

James P. George Ordinary,
DeKalb County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

KITTRIDGE, Eliza
DeKalb County
No.

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County DeKalb.
Name Mrs. Eliza Kittredge
Widow of E. M. Kittredge.
Company ... Regiment 66th Georgia
Approved ...

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, 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,
DeKalb COUNTY.

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

1. What is your name, and where do you reside? Mrs. Eliza Kittredge, residing 1 mile Northeast of Decatur
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? Married to E. M. Kittredge, at Palmetto, Ga., April 21, 1864
   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.) Enlisted at Decatur Ga. in Infantry, 1862, Co. F. 36 Ga Reg.
5. When and where did the commands of your husband surrender or discharge from the army? He left Camp near Smithfield N.C. After being wounded at Decatur Ga. May 15, 1864
6. Was your husband personally present at the time of the surrender or discharge of this command? No
7. If he was not present state clearly where he was? At his home on furlough suffering from gunshot wound
8. Where was his command when he left? Near Smithfield N.C.
   a. For what cause did he leave his command? Fracture Tibia (both bones)
   b. By whose authority did he leave his command? Application for appointment before Medical board and for retirement before Maj. K. Point Hospital Raleigh N.C.
   c. For how long was he granted leave of absence? Left after 90 days to return
   e. What was his physical condition when he left his command? Tibia not united
   f. What effort did he make to return to his command? Was unable
   g. In what way was he prevented from going back to Command Could not walk
   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? Sent to Camp Chase a prisoner; Released
   j. When and where did your first husband die? At his home, near Decatur, Ga. 1916
   k. Were you residing together when he died? Yes
   l. If not, how long had you resided apart? ...
   m. Are you now a widow? ...
9. Have you or your husband heretofore been paid a pension by the State? ...

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

Sworn to and subscribed before me this 25 day of October 1919

James P. George Ordinary
of DeKalb County.

(SEAL)

KITTRIDGE, Eliza
DeKalb County

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County DeKalb

Name Mrs. Eliza Kittredge

Widow of E. W. Kittredge

Company —, P.

Regiment 36th Georgia

Approved

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-30-1919

6. Was your husband personally present at the time of the surrender or discharge of this command? No

7. If he was not present state clearly where he was? At his home on furlough

8. Where was his command when he left? Near Smith Field N. C.

a. For what cause did he leave his command? Fracture Tibia (both bones)

b. By whose authority did he leave his command? Medical board off for return to duty after 3 months in Hospital

c. For how long was he granted leave of absence? Indefinite

d. What was his physical condition when he left his command? Fracture Tibia both bones

f. What effort did he make to return to his command? Was never able

g. In what way was he prevented from going back to Command Could not walk

h. Was he captured by the enemy at any time? No

i. If so, when and where captured and where held as a prisoner, and when and for what cause released?

j. When and where did your first husband die? At his home, near Decatur, Ga.

k. Were you residing together when he died? Yes

l. If not, how long had you resided apart?

m. Are you now a widow? Yes

9. Have you or your husband heretofore been paid a pension by the State? No

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

Sworn to and subscribed before me this the 10 day of October 1919

James R. George Ordinary

of DeKalb County.

(SEAL)

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA,

Gwinnett COUNTY.

Personally before me comes S. T. McElroy 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? S. T. McElroy Gwinnett Co Norcross Ga

2. How long and since when have you known Mrs. Eliza Kittredge applicant? Ever since 1864

3. How long and since when has she continuously resided in this State? (Give date.) 1864

4. When and to whom was she married? E. W. Kittredge How do you know? General reputation

5. How long and since when did you know E. W. Kittredge her husband? 60 years

6. When and where did E. W. Kittredge the husband of applicant, die? Aug. 1, 1911

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

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

Were they divorced? No

9. When, where and in what Company and Regiment did E. W. Kittredge enlist? 1862 at Decatur Ga Co. F. 36 Ga

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

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? till May 1863

12. When and where did his Command surrender, and was discharged? Don't Know

13. Were you personally present when it was surrendered? No If not, where were you? Home in DeKalb Co and how came you there? By loss of leg at Bakers Creek battle 1863

14. Was the husband of applicant personally present at surrender? Don't Know If not where was he? Don't Know When, where and for what cause did he leave Command? (Give date.) Don't Know By whose authority did he leave his Command? Don't Know And how long was he granted leave? Don't Know 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? Don't Know

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? Don't Know

Sworn to and subscribed before me this the 23 day of October 1919

S. T. McElroy

G. G. Robinson Ordinary

of Gwinnett County.

(SEAL)

Georgia--Gwinnett County:-

I G. G. Robinson, Ordinary of said county, do hereby certify that S.T. McElroy is a bona-fide citizen of said county, and his statement is entitled to full faith and credit.

Given under my hand and seal, this 23rd day of October, 1919.

G. G. Robinson Ordinary.

9. When, where and in what Company and Regiment did he enlist?
1862 at Decatur Ga. Co. F 36 Ga

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

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? till May 1863

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

13. Were you personally present when it was surrendered? No If not, where were you? Home on Detail and how came you there? by loss of leg at Bakers Creek Sept. 1863

14. Was the husband of applicant personally present at surrender? dont Know If not where was he? dont Know When, where and for what cause did he leave Command? (Give date.) dont Know By whose authority did he leave his Command? dont Know And how long was he granted leave? dont Know 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? dont Know

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

Sworn to and subscribed before me this the 23 day of October 1919
G G Robinson Ordinary
of Gwinnett County.
(SEAL)

S T McElroy

Georgia--Gwinnett County:-
I, G. G. Robinson, Ordinary of said county, do hereby certify that S.T. McElroy is a bona-fide citizen of said county, and his statement is entitled to full faith and credit.
Given under my hand and seal, this 23rd day of October, 1919.
G G Robinson Ordinary.

66

J W Rodgers

James R George

James R George

66

J. W. Rodgers

James R. George

James R. George

Ordinary's Certificate

STATE OF GEORGIA.

DeKalb COUNTY.

I, James R. George Ordinary of said County, certify that I know the applicant B. F. Knight or pension is the person he represents himself to be and resides in said county. That I also know J. C. Chisolm 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 1 day of Oct 1918

James R. George Ordinary

of DeKalb 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.

Knight, B. F.
DeKalb Co

No. W. Jan 1922

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County DeKalb

Name B. F. Knight

Company B

Regiment Graham's Cavalry

Approved

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

11-1-1918

Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

11-1-1919

...Ordinary of said County, certify that I know
...jon is the person he represents himself to be and
...I were duly sworn by me before signing the forego-
...y and their statements are entitled to full faith and

...1 day of Oct 1919

...shall swear applicant and witnesses in the following words:
...s make to each of the questions asked you and the evidence
...on are insufficient.
...the county in which the applicant or witness resides and

Ordinary's Certificate

STATE OF GEORGIA,
DeKalb COUNTY.

I, James R George Ordinary of said County, certify that I know the applicant B F Knight for pension is the person he represents himself to be and resides in said county. That I also know J C Chastain 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 1 day of Oct 1919

James R George Ordinary
of DeKalb 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. Addit onal 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 w tness resides and must be certified by such Ordinary.

No. W.N. Jan 1920

Knight, B.F.
DeKalb Co.

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County DeKalb
Name B F Knight
Company B
Regiment Graham's Battalion
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

11-1-1919

Co. B 12th Ga Inf. Militia

Application for Soldier's Pension Under Act 1910

Amended by Act 1919

Questions For Applicants to Answer

STATE OF GEORGIA,
DeKalb COUNTY.

B F Knight 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) B. F. Knight
2. How long and since when have you been a continuous resident citizen of this State? 72 years all My Life
3. Did you enlist in the Army of the Confederate States or in the organized militia of this State from 1861 to 1865? State Troops
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) Sept 1864 Marietta Ga Company B Grahams Battalion Georgia Militia
5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge) from Sept 1864 to April 1865
6. When and where was your Company and Regiment surrendered or discharged from the Service? April 1865 near Atlanta Ga
7. Were you actually present with your command when it was surrendered or discharged? I was present
8. If you were not actually present, state specifically and clearly where you were.
   a. Where was your command when you left it? did not leave till Surrender
   b. When did you leave the command? Surrender
   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? was not
   j If so, when, and where? In what prison were you held and when were you released? _____
9. Are you drawing a pension of any amount from this State or the United States? No
10. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? have not

Sworn to and subscribed before me, this the 28 day of Oct 1919

James R George Ordinary
of DeKalb County.

(SEAL)

his
B. F. X Knight
mark

Comrades by Edwards

Knight, B.F.
DeKalb Co

No. [illegible] Jan 1920

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County DeKalb

Name B. F. Knight

Company B

Regiment Jordan's Cavalry

Approved

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

11-1-1919

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

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

a. Where was your command when you left it? did not leave till Surrender

b. When did you leave the command? Surrender

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? was not

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

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

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

Sworn to and subscribed before me, this the 28 day of Oct 1919

James R George Ordinary
of DeKalb County.

(SEAL)

his
B. F. X Knight
Mark

Questions for Witness as to Service

STATE OF GEORGIA,
DeKalb COUNTY.

J. C. Chrisp of said State and County is hereby presented as a witness in support of the application of B. F. Knight 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? J. C. Chrisp
DeKalb Co

2. How long and since when have you known B. F. Knight the applicant?
Since 1864 in in the Army

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? DeKalb County from My own
Knowledge

4. When, where and in what Company and Regiment did B. F. Knight enlist during war from 1861 to 1865? (Give date and place) Sept 1864 Marietta Ga Company B Jordans Command Cavalry

5. How did you obtain your information of this Service? I was member of
Same Company & Regt I was in this
Command when he enlisted

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date) from 1864 to 1865 April

7. When and where was his command surrendered or discharged (give date and place) Near
Atlanta

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

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

10. Was the applicant personally present with his command at surrender? He was

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

12. When did he leave his command? Surrender Where was his command when he left it? did not leave For what cause did he leave?
By whose authority did he leave did not 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 from My own Knowledge

13. In what way was he prevented from returning to his command? Surrender
How do you know? of My own Knowledge

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

15. Was applicant captured as a prisoner Was not If so, when and where?
In what prison was he held? and when released

Sworn to and subscribed before me, this the 28 day of October 1919

James R George Ordinary
of DeKalb County.

J. C. Chrisp

miania

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

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

10. Was the applicant personally present with his command at surrender? He was

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

12. When did he leave his command? Surrender Where was his command when he left it? did not leave For what cause did he leave? ——— By whose authority did he leave did not 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 from My own knowledge

13. In what way was he prevented from returning to his command? Surrender How do you know? of My own knowledge

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

15. Was applicant captured as a prisoner was not If so, when and where? ——— ——— In what prison was he held? ——— and when released ———

Sworn to and subscribed before me, this the 28 day of October 1914 } J. C. Cohutt J.P.

James R George Ordinary of DeKalb County. }

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, DeKalb County.

I, V. L. Morgan, Ordinary of said County, do certify that I personally know Mrs Martha E. Knight, the applicant, and that she is the lawful widow of R. F. Knight, who was on the Pension Roll of said DeKalb County, and was paid a Pension from DeKalb County for 1924, and at the time of his death on the 26 day of December 1924, there was due to him and unpaid his Pension of One Hundred Dollars from the State of Georgia, and I know Mrs. E. Knight, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 30 of April, 1925.

(Seal of Ordinary)

V. L. Morgan, Ordinary
DeKalb, County

Knight, R. F.
DeKalb Co

DeKalb, County

1925

Application for Pension Due Deceased Soldier

(UNDER ACT 1891)

(To be paid to his Widow or Dependent Children)

BY

Mrs. Martha E. Knight

Widow of R. F. Knight

Date of Marriage Dec. 21, 1900

Date of Death Dec. 26, 1924

Approved and ordered paid May 6, 1925

N. E. Harris
Commissioner of Pensions.

Ordinary: Fill out above in full and send this blank to Pension Department for approval before you pay out the money, and have return, with your receipt for payment filing in the Pension Department.

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 the Pension Roll and paid from ——— County for 19...

Witness my hand this ... day of ———, 192...

Attested before me:

———

Knight, B. F.
Widow's

DeKalb County

1925

Application for Pension Due Deceased Soldier
(UNDER ACT 1891)
(To be paid to his Widow or Dependent Children)

BY

Mrs. Martha E. Knight
Widow of B. F. Knight

Date of Marriage Dec. 21, 1866
Date of Death Dec. 26, 1924

Approved and ordered paid Jan 6 1925
N. E. Harris
Commissioner of Pensions.

Ordinary: Fill out above in full and send this blank to Pension Department for approval before you pay out the money, and then return it with your pay-rolls for permanent filing in the Pension Department.

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 the 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, 1891)

STATE OF GEORGIA, DeKalb County.

Personally before me, the Ordinary of said County, comes Mrs. Martha E. Knight of said County, who after being duly sworn, on oath says that she is the widow of B. F. Knight and that said Pensioner was on the Pension Roll of DeKalb County and was paid a Pension of One Hundred ($100.00) Dollars from said County for 1924 and that the said Pensioner died in DeKalb County on the 26 day of Dec, 1924 and at the time of his death a Pension of $100.00 was due him from DeKalb County and unpaid for 1925. Applicant further swears that she married the said B F Knight on the 21 day of Dec, 1866 in Gwinnett 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 29 day of April, 1925.

V. L. Morgan, Ordinary
DeKalb, County
(Seal of Ordinary)

Mrs. Martha E. Knight (L. S.)
her mark

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, DeKalb County.

Personally before me comes J. F. Knight, who on oath says that he knew B. F. Knight while in life and that he knows Mrs. Martha E. Knight, the above applicant, and knows that the said B. F. Knight and Martha E. Rawlins were in due form of law married in the County of Gwinnett in the State of Georgia on the 21 day of Dec, 1866, and that they were residing together as husband and wife at the time of his death on the 26th day of December, 1924, and that she is his dependent widow.

Sworn to and subscribed before me this 29 day of April, 1925.

V. L. Morgan, Ordinary
DeKalb, County
(Seal of Ordinary)

J. F. Knight
his mark

INSTRUCTIONS:

1st. This form is for widows of Service and Disabled Soldier pensioners, who died after November 1st. If pensioner died after January 1st, leaving dependent children but no widow, their guardian may use this form in their behalf.
2nd. Proof of marriage must be made.
3rd. Do not use the enormously large form of marriage certificate in common vogue throughout the State, suitable only for framing. Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage license is the proper thing.
4th. 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.
5th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the payment.
6th. Return this application with your final settlement to the Pension Department.
7th. The widow or person holding her proper power-of-attorney receipts for this pension by signing name, as widow, opposite the name of husband on the soldier pay roll.
8th. Only the one pension is covered by this application. Take another application, on the white blank, to admit widow to rolls in her own right. November 1st is the last filing date for the next year's rolls.

and at the time of his death a Pension of $ [illegible] was due him from [illegible] County and unpaid for 1925. Applicant further swears that she married the said B. F. Knight on the 21 day of Dec, 1866 in Gwinnett 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 29 day of April, 1925.

V. A. Morgan, Ordinary
DeKalb, County
(Seal of Ordinary)

Mrs Martha E. Knight (L. S.)
Mary
mark

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, DeKalb County.

Personally before me comes J. C. Knight, who on oath says that he knew B. F. Knight while in life and that he knows Mrs. Martha E. Knight, the above applicant; and knows that the said B. F. Knight and Martha E. Rawlins were in due form of law married in the County of Gwinnett in the State of Georgia on the 21 day of Dec, 1866, and that they were residing together as husband and wife at the time of his death on the 26th day of December, 1924, and that she is his dependent widow.

Sworn to and subscribed before me this 29 day of April, 1925.

V. A. Morgan, Ordinary
DeKalb, County
(Seal of Ordinary)

J. C. Knight
mark

INSTRUCTIONS:

1st. This form is for widows of Service and Disabled Soldier pensioners, who died after November 1st. If pensioner died after January 1st, leaving dependent children but no widow, their guardian may use this form in their behalf.
2nd. Proof of marriage must be made.
3rd. Do not use the enormously large form of marriage certificate in common vogue throughout the State, suitable only for framing. Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage license is the proper thing.
4th. 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.
5th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the payment.
6th. Return this application with your final settlement to the Pension Department.
7th. The widow or person holding her proper power-of-attorney receipts for this pension by signing name, as widow, opposite the name of husband on the soldier pay roll.
8th. Only the one pension is covered by this application. Take another application, on the white blank, to admit widow to rolls in her own right. November 1st is the last filing date for the next year's rolls.

NAME ~~Knight~~, B. F. YEAR 1920 COUNTY Dekalb

WHEN AND WHERE BORN? A resident of Georgia since birth, 1847.

ENLISTED WHEN AND WHERE? Sept. 1864, Marietta, Ga.

RANK:

COMPANY AND REGIMENT? Co. B. 12th Regt. Ga. Militia Cavalry
(Graham command of cavalry.)

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED:

WHEN AND WHERE SURRENDERED? April 1865, Atlanta, Ga.

IF NOT PRESENT AT SURRENDER, WHERE WAS?

DIED, WHEN AND WHERE?

BURIED:

WITNESSES: J. C. Chupp - Same command No data.

1h

WHEN AND WHERE BORN? A resident of Georgia since birth, 1847.

ENLISTED WHEN AND WHERE? Sept. 1864, Marietta, Ga.

RANK:

COMPANY AND REGIMENT? Co. B. 12th Regt. Ga. Militia Cavalry
(Graham command of cavalry.)

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED:

WHEN AND WHERE SURRENDERED? April 1865, Atlanta, Ga.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED:

WITNESSES: J. C. Chupp - Same command No data.

ih

Ordinary's Certificate

STATE OF GEORGIA }
DeKalb COUNTY }

I, James D. George Ordinary of said County, certify that I know the applicant J. T. Knight for pension is the person he represents himself to be and resides in said county. That I also know See ordinary's certificate of 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 4 day of Sept 19 1

James D. George Ordinary
of DeKalb 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.

Knight J. T.
DeKalb Co

No. 111 Feb 1922

Confederate Soldier's Application

Under Act 1910. As Amended by Act of 1919.

County DeKalb
Name J. T. Knight
Company F
Regiment 35 Ga
Approved

ENTERED

STATE OF GEORGIA

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

...ertificate

...Ordinary of said County, certify that I know ...n is the person he represents himself to be and ...were duly sworn by me before signing the forego... and their statements are entitled to full faith and

...day of Sept ...19...

all sworn applicant and witnesses in the following words: make to each of the questions asked you and the evidence a are insufficient. the county in which the applicant or witness resides and

Approved .....

ENTERED POSTED OF

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

Ordinary's Certificate

STATE OF GEORGIA,
DeKalb COUNTY.

I, James R George Ordinary of said County, certify that I know the applicant J P Knight for pension is the person he represents himself to be and resides in said county. That I also know the ordinary's official witness bearing 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 4 day of Sept 19...

James R George Ordinary
of DeKalb County

(SEAL)

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

No. .....

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County DeKalb
Name J. P. Knight
Company F
Regiment 35 Ga
Approved .....

ENTERED POSTED OF

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

Application for Soldier's Pension Under Act 1910
Amended by Act 1919

Questions For Applicants to Answer

STATE OF GEORGIA,
DeKalb COUNTY.

J. P. Knight of said State and County, hereby applies for the pension provided by Act of 1910, as amended by Act of 1919, to Confederate Soldiers, and submits his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? (Give County and Post-office) J. P. Knight DeKalb Co Decatur Ga
2. How long and since when have you been a continuous resident citizen of this State? 77 years to day all My life
3. Did you enlist in the Army of the Confederate States or in the organized militia of this State from 1861 to 1865? Confederate States
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) Army C.S.A. 1862 Lawrenceville Ga Company F. 35 Ga Regt
5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge) from Aug 5 1862 to April 9 1865 Surrender
6. When and where was your Company and Regiment surrendered or discharged from the Service? April 9 1865 Appomattox C.H. Va
7. Were you actually present with your command when it was surrendered or discharged? I was
8. If you were not actually present, state specifically and clearly where you were. Present
   a. Where was your command when you left it? did not leave
   b. When did you leave the command? Surrender
   c. For what cause did you leave? War Closed
   d. By whose authority did you leave? .....
   e. For how long was your leave granted? In what way? I never left my command during the war but ten days furlough
   f. Why did you not return to your command after leave expired? did not leave
   g. In what way were you prevented? .....
   h. What effort did you make to return? .....
   i. Were you captured during the war? was not
   j. If so, when, and where? In what prison were you held and when were you released? .....
9. Are you drawing a pension of any amount from this State or the United States? am not
10. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? have not

Sworn to and subscribed before me, this the 26 day of August 19...

James R George Ordinary
of DeKalb County

(SEAL)

his
J. P. X Knight
mark

No.

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County DeKalb

Name J. T. Knight

Company G

Regiment 35 Ga

Approved

ENTERED

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

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

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

a. Where was your command when you left it? did not leave

b. When did you leave the command? Surrender

c. For what cause did you leave? war closed

d. By whose authority did you leave?

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

I never left my command during the war but ten days which was allowed

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

g. In what way were you prevented?

h. What effort did you make to return?

i. Were you captured during the war? was not

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

9. Are you drawing a pension of any amount from this State or the United States? am not

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

Sworn to and subscribed before me, this the 26 day of August 1919

J. T. X Knight
his
Mark

James R. George Ordinary
of DeKalb County.

(SEAL)

Questions for Witness as to Service

STATE OF GEORGIA,
Gwinnett, COUNTY

W. J. Rawlins, of said State and County is hereby presented as a witness in support of the application of J.T.Knight, for the pension provided by the Act of 1910, as amended by the Act of 1919 in said State, and, after being sworn true answers to make to the questions propounded, answers as follows:

1. What is your name and where do you reside? W.J.Rawlins, Gwinnett County,Ga Post office, Loganville, R.F.D.# 5

2. How long and since when have you known J.T.Knight the applicant? since 1850

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? Dekalb,co, and has resided in this state every since my acquaintence with to-wit;- 1850.

4. When, where and in what Company and Regiment did J.T.Knight, enlist during war from 1861 to 1865? (Give date and place.) Jan.1862 Lawrenceville,Company"F"35 Ga of Inft.

5. How did you obtain your information of this Service? Was with him, and 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) From Jan.1862 until April 1865.

7. When and where was his command surrendered or discharged (give date and place). April.9th 1865, Appomattox,Court house, Va.

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

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

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

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

12. When did he leave his command? Surender Where was his command when he left it? Appomattox Va For what cause did he leave? Surender By whose authority did he leave and how long was he granted leave? How do you know all that you have stated to be true? If of your own knowledge, tell clearly and specifically

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

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

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

Sworn to and subscribed before me, this the 1st day of September 1919.

W. J. Rawlins

G. G. Robinson Ordinary
of Gwinnett County.

(SEAL)

Georgia--Gwinnett County:-
I hereby certify that W. J. Rawlins is a citizen of said state and county and his statement is entitled to full faith and credit.
Given under my hand and seal, 1st day of September, 1919.

G. G. Robinson Ordinary.

and now do you know? ...

my acquaintence with to-wit;- 1850.

4. When, where and in what Company and Regiment did J.T.Kinght, enlist during war from 1861 to 1865? (Give date and place.) Jan.1862 Lawrenceville,Company"F"35 Ga of Inft.

5. How did you obtain your information of this Service? Was with him, and 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) From Jan.1862 until April 1865.

7. When and where was his command surrendered or discharged (give date and place) April.9th 1865, Appomattox,Court house, Va,

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

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

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

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

12. When did he leave his command? Surender Where was his command when he left it? Appomattox Va For what cause did he leave? Surender By whose authority did he leave ... and how long was he granted leave? ... How do you know all that you have stated to be true? If of your own knowledge, tell clearly and specifically ...

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

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

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

Sworn to and subscribed before me, this the 1st day of September 1919.

G.L. Robinson Ordinary

of Gwinnett County.

(SEAL)

W. J. Rawlins

Georgia--Gwinnett County:-

I hereby certify that W. J. Rawlins is a citizen of said state and county and his statement is entitled to full faith and credit.

Given under my hand and seal, 1st day of September, 1919.

G.L. Robinson Ordinary.

NAME Knight, J. T. YEAR 1920 COUNTY Dekalb

WHEN AND WHERE BORN? A resident of Georgia since birth, 1842.

ENLISTED WHEN AND WHERE? Jan'y 5, 1862 , Lawrenceville, Ga.

RANK:

COMPANY AND REGIMENT? Co. F. 35th Ga. Regt.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? R Ten days with measles while in the service.

CAPTURED, WHEN AND WHERE?

RELEASED:

WHEN AND WHERE SURRENDERED? April 9, 1865, Appomattox, Va.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED:

WITNESSES: W. J. Rawlins - Same command - No date.

ih

ENLISTED WHEN AND WHERE? Jan'y 5, 1862 , Lawrenceville, Ga.

RANK:

COMPANY AND REGIMENT? Co. F. 35th Ga. Regt.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? R Ten days with measles while in the service.

CAPTURED, WHEN AND WHERE?

RELEASED:

WHEN AND WHERE SURRENDERED? April 9, 1865, Appomattox, Va.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED:

WITNESSES: W. J. Rawlins - Same command - No date.

ih

Knight, Martha E.
O.R. 1926 DeKalb

WIDOW'S APPLICATION

To Be Put on Roll in Her Own Right When Husband Was on the Pension Roll of Georgia.

County DeKalb.
Name Mrs Martha E Knight
Widow of J T Knight
Company B
Regiment Cavalry Command
Date of Husband's Death 12/26/1924
Date of Marriage 12/21/1866
Approved Wm M McLaurin
8/27/25

Commissioner of Pensions.

5/6/1925

Ordinary's Certificate

STATE OF GEORGIA,
DeKalb COUNTY.

I, V. J. Morgan Ordinary of said County, do **certify that** I know Mrs. Martha E. Knight, the applicant for pension; **that she is the person** she represents herself to be, and that she is continuously a bona fide resident of said **County since** January 1st, 1920; that I also know J. T. Knight, **the witness as to** marriage, and that both the foregoing were duly sworn by me before signing the **respective affi**davits, 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 30 day of April 1925.

(SEAL OF ORDINARY) V. J. Morgan **Ordinary,**
DeKalb **County**

Instructions.

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the County of residence.
4. Only widows who are married prior to first January, 1880, 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.

Date of Marriage 12/21/ 1866

Approved John W. Clark
8/27/25

Commissioner of Pensions.

6/6/1925

Certificate

Ordinary of said County, do certify that I

the applicant for pension; that she is the person

ituously a bona fide resident of said County since

J. T. Knight the witness as to

y sworn by me before signing the respective affi

rthy and their statements are entitled to full faith

Tice this 30 day of April 192 5

W. D. Morgan Ordinary,

DeKalb County

tructions.

shall swear applicant and the witness in the following words:
make to each of the questions asked you and the evidence
aces are insufficient.
of the County of residence.
ranted.
ble. If not, prove marriage, by some person, or by gen-
e Application Blank and state and prove full term of hus-
de no proof of service and were not required to do so.

Knight Martha E.
O.F. 1926 DeKalb Ga

WIDOW'S APPLICATION

To Be Put on Roll in Her Own Right When Husband Was on the Pension Roll of Georgia.

County DeKalb.
Name Mrs. Martha E. Knight
Widow of J. T. Knight
Company B
Regiment Infantry Command
Date of Husband's Death 12/26/ 1924
Date of Marriage 12/21/ 1866
Approved John W. Clark
8/27/25

Commissioner of Pensions.

6/6/1925

Ordinary's Certificate

STATE OF GEORGIA,
DeKalb COUNTY.

I, W. D. Morgan Ordinary of said County, do certify that I know Mrs. Martha E. Knight, the applicant for pension; that she is the person she represents herself to be, and that she is continuously a bona fide resident of said County since January 1st, 1920; that I also know J. T. Knight, the witness as to marriage, and that both the foregoing were duly sworn by me before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and official seal of office this 30 day of April, 192 5.

(SEAL OF ORDINARY) W. D. Morgan Ordinary,
DeKalb County

Instructions.

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the County of residence.
4. Only widows who are married prior to first January, 1881, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because Disabled Pensioners made no proof of service and were not required to do so.

FILED
JUN 16 1934
VETERAN SERVICE OFFICE
A. L. HENSON, Director

FILED
JUN 16 1934
VETERAN SERVICE OFFICE
A. L. HENSON, Director

TO PAY-
1930, $
Cig. & C. Tax. $
TOTAL.

Received of W. D. Morgan Ordy
check for $75.00 funeral expenses
of Mrs. Martha E. Knight 3/1/35.

E. KNIGHT MARTHA E. (Mrs.)
DeKALB CO
165

For DeKalb County

Application for Expenses of Last Illness and Funeral

(UNDER ACT OF 1919)

W. D. Morgan, Ordinary

For: Mrs. Martha E. Knight
(Name of Pensioner)

Date of Death: June 26th, 1924

Amount: $ 75.00

PAID TO ORDINARY ON THIS CLAIM:

DATE 1934	FUND FROM WHICH PAID	$
9/10	CRC	90.00
3/25/35	1930	75.00
	TOTAL	165.00

Approved, and ordered paid,

Aug 7, 1934

A. L. HENSON,
Director, Veterans Service Office.

Received of W. D. Morgan Ordy
check for $90.00 on funeral expense
of Mrs. Martha E. Knight 9/12/34.
Ck Issued by R Johnston

Ordinary's Certificate

STATE OF GEORGIA,
DeKalb COUNTY.

I, V. A. Morgan Ordinary of said County, do certify that I know Mrs. Martha E. Knight, the applicant for pension; that she is the person she represents herself to be, and that she is continuously a bona fide resident of said County since January 1st, 1920; that I also know J. T. Knight, the witness as to marriage, and that both the foregoing were duly sworn by me before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and official seal of office this 30 day of April, 1925.

(SEAL OF ORDINARY) V. A. Morgan Ordinary,
DeKalb County

Instructions.

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the County of residence.
4. Only widows who are married prior to first January, 1881, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because Disabled Pensioners made no proof of service and were not required to do so.

FILED
JUL 1 1930
VETERANS SERVICE OFFICE
HENSON, Director

TO PAY-
1930, $ 75
Cig. & C. Tax. $
TOTAL.

Received of V. A. Morgan Ordy check for $75.00 funeral expenses of Mrs. Martha E. Knight 3/1/35
J. T. Knight

Date of Death: June 15th, 193 5
Amount: $ 165.00

PAID TO ORDINARY ON THIS CLAIM:

DATE	FUND FROM WHICH PAID	
1935		
3/10	C&C	90 00
3/25/35	1930	75 00
	TOTAL	165.00

Approved, and ordered paid,
Aug 3, 1934
A. L. HENSON,
Director, Veterans Service Office.

Received of V. A. Morgan Ordy check for $75.00 on funeral expenses of Mrs. Martha E. Knight 9/1/34.
Chas Nunn by R Johnston

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,
DeKalb COUNTY.

Personally before me comes Mrs Martha E Knight of said County, who, after having been duly sworn, says that she is the widow of J. T. Knight to whom, in the County of Gwinnett State of Georgia she was married on the 21 day of Dec 1866 and that she remained his wife, and resided with him to the date of his death in December 1924 and that she has not since his death remarried: at the time of his death he was a resident of DeKalb County, in said State of Georgia, and he was on the Georgia Pension Roll of the State and paid a pension of $100.00 in DeKalb County for 1934 (per annum), on account of being a soldier in Company B. Regiment Grahams Command Volunteers or State Militia).

That she is now a bona fide resident citizen of said State of Georgia and she has, continuously, resided there since 21 day of December 1866

Sworn to and subscribed before me, this the
30 day of April, 1925
V. A. Morgan, Ordinary
of DeKalb County.

Mrs Martha E. Knight
(Applicant) her mark

(SEAL OF THE ORDINARY.)

Affidavit of Witness to Prove Marriage and Date of Death of Husband.

STATE OF GEORGIA,
DeKalb COUNTY.

Personally before me comes J. T. Knight 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. Martha E Knight who made the foregoing affidavit, is the lawful widow of J. T. Knight who died in DeKalb, County in said State of Georgia on the 26 day of December, 1924 and that she has not since remarried; that she became the wife of J. T. Knight on the 21 day of December, 1866; that she and he had resided together as husband and wife, continuously, since 21 day of Dec 1866, and that he was the same man who was on the pension roll of said State Georgia from County DeKalb when he died.

Sworn to and subscribed before me, this the
29 day of April, 1925
V. A. Morgan, Ordinary
of DeKalb County.

J. T. Knight
his mark

(SEAL OF ORDINARY)

Application for Payment of Expenses of Last Illness and Funeral

(Under Act of 1919)
(To be disbursed by the Ordinary)

GEORGIA, DeKalb County:

Before me, the Ordinary of said County, comes A. S. Turner, of said County, who, after being duly sworn, on oath says that he knew Mrs. Martha Eliza Anne Knight late of said County, a Confederate pensioner, and that said person is the identical person named and described in the attached certified copy of burial certificate; and that said pensioner 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 $165.00, as shown by sworn statements FULLY and COMPLETELY ITEMIZED, hereto attached.

Sworn to and subscribed before me,
this the 15th day of June, 1934.
V. A. Morgan Ordinary.

A. S. Turner

CERTIFICATE OF THE ORDINARY

GEORGIA, DeKalb County.

I certify that A. S. Turner 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. Martha Eliza Anne Knight the deceased pensioner referred to in the foregoing affidavit and that said deceased was at the time of death regularly enrolled as a pensioner on the records of file in my office. I further certify that said deceased pensioner is the identical person named and described in the attached certified copy of burial certificate, was not survived by a widow and left no estate of any kind sufficient to pay the expenses of last illness and burial for which claim is made.

Given under my hand and seal of office, this the 15th day of June, 1934.
(Seal of Ordinary) V. A. Morgan, Ordinary.

INSTRUCTIONS:

1st. Certified copy of Burial Certificate must accompany this application.

2nd. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.

3rd. Each account must be sworn to before the Ordinary, and in the following form:

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

4th. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed and signed as indicated.

5th. The completed voucher—this blank and the bills—must be sent to the Veterans Service Office for approval and no money must be paid out until it is returned to you as your authority to make the payment.

6th. Return this application, and attached bills, properly receipted, to the Veterans Service Office.

7th. Ordinary should see that the back of this blank, when folded, is filled out.

8th. This voucher, if approved, will be sent back to you with the funds with which to pay the approved bills. When you have paid the bills and obtained a receipt for each payment, return the voucher, with bills and receipts, to be permanently filed in the Veterans Service Office.

9th. The State does not authorize the payment of these expenses in the event a soldier pensioner is survived by a widow, nor if the pensioner left any estate of any kind or value sufficient to pay them, nor if the pensioner had been outside of the State of Georgia for more than twelve (12) months immediately preceding date of death.

U. A. Morgan, Ordinary (Applicant's Mark)

of DeKalb County.

(SEAL OF THE ORDINARY.)

Affidavit of Witness to Prove Marriage and Date of Death of Husband.

STATE OF GEORGIA,

DeKalb COUNTY.

Personally before me comes J. T. Knight 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. Martha E. Knight who made the foregoing affidavit, is the lawful widow of J. T. Knight who died in DeKalb County in said State of Georgia on the 26 day of December, 1934 and that she has not since remarried; that she became the wife of R. F. Knight on the 21 day of December, 1866; that she and he had resided together as husband and wife, continuously, since 21 day of Dec 1866, and that he was the same man who was on the pension roll of said State Georgia from County DeKalb when he died.

Sworn to and subscribed before me, this the

29 day of April, 1934

U. A. Morgan Ordinary

of DeKalb County.

J. T. His Knight Mark

(SEAL OF ORDINARY)

CERTIFICATE OF THE ORDINARY

GEORGIA, DeKalb County.

I certify that A. S. Turner 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. Martha Eliza Anne Knight the deceased pensioner referred to in the foregoing affidavit and that said deceased was at the time of death regularly enrolled as a pensioner on the records of file in my office. I further certify that said deceased pensioner is the identical person named and described in the attached certified copy of burial certificate, was not survived by a widow and left no estate of any kind sufficient to pay the expenses of last illness and burial for which claim is made.

Given under my hand and seal of office, this the 15th day of June, 1934.

(Seal of Ordinary) U. A. Morgan, Ordinary.

INSTRUCTIONS:

1st. Certified copy of Burial Certificate must accompany this application.

2nd. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.

3rd. Each account must be sworn to before the Ordinary, and in the following form:

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

4th. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed and signed as indicated.

5th. The completed voucher—this blank and the bills—must be sent to the Veterans Service Office for approval and no money must be paid out until it is returned to you as your authority to make the payment.

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7th. Ordinary should see that the back of this blank, when folded, is filled out.

8th. This voucher, if approved, will be sent back to you with the funds with which to pay the approved bills. When you have paid the bills and obtained a receipt for each payment, return the voucher, with bills and receipts, to be permanently filed in the Veterans Service Office.

9th. The State does not authorize the payment of these expenses in the event a soldier pensioner is survived by a widow, nor if the pensioner left any estate of any kind or value sufficient to pay them, nor if the pensioner had been outside of the State of Georgia for more than twelve (12) months immediately preceding date of death.

A. S. Turner

Funeral Director and Embalmer

Prompt Ambulance Service

Decatur, Georgia

NIGHT AND SUNDAY PHONE DE. 0088
528-27 N. McDONOUGH ST.
PHONE DE. 0088

June 15, 1934.

Funeral Expenses of Mrs Martha Eliza Anne Knight,
R F D #2, Decatur, Georgia.

June 9, 1934.

To Casket and Burial Box
Embalming
Funeral Notices
Hearse Service and Service Rendered $165 00

Georgia, DeKalb County,

I do hereby certify that the above account is rendered for the funeral expenses of Mrs Martha Eliza Anne Knight, who died without owning sufficient property to pay this bill.

Sworn to and subscribed before me,
This June 15, 1934.
Mary Johnston

A. S. Turner

Notary Public, State at Large, Dekalb Co.
My Commission Expires Nov. 1, 1935.

A. L. HENSON, DIRECTOR
C. ARTHUR CHEATHAM, ASST DIRECTOR
MISS LILLIAN HENDERSON, ASST DIRECTOR

THE VETERANS SERVICE OFFICE

STATE CAPITOL

ATLANTA

July 13, 1934

To the Ordinary:

I am having to return the voucher for the expenses of last illness and funeral of Mrs. Martha E. Knight, late a pensioner of your County, for the reason that a death, or burial, certificate was not attached to the claim.

Please include the certificate and return the voucher to me for approval.

With kindest regards,

Yours very truly,

Director.

LH:LT

Dear Mr. Henson:

We have no fund at our disposal for charges of certificate of death or burial, the fee for same being 50¢.

Yours truly,

U. A. Morgan

Ordinary

A. S. Turner
Funeral Director and Embalmer
Prompt Ambulance Service
Decatur, Georgia

NIGHT AND SUNDAY PHONE DE. 0088
528-27 N. MCDONOUGH ST
PHONE DE. 0088

June 15, 1934.

Funeral Expenses of Mrs Martha Eliza Anne Knight,
R F D #2, Decatur, Georgia.

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To Casket and Burial Box
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Funeral Notices
Hearse Service and Service Rendered $165 00

Georgia, DeKalb County,

I do hereby certify that the above account is rendered for the funeral expenses of Mrs Martha Eliza Anne Knight, who died without owning sufficient property to pay this bill.

Sworn to and subscribed before me,
This June 15, 1934.
Mary Knight
Notary Public, State at Large, Decatur, Ga.
My Commission Expires Nov. 1, 1937.

A. S. Turner

THE VETERANS SERVICE OFFICE
STATE CAPITOL
ATLANTA

July 13, 1934

To the Ordinary:

I am having to return the voucher for the expenses of last illness and funeral of **Mrs. Martha E. Knight**, late a pensioner of your County, for the reason that a death, or burial, certificate was not attached to the claim.

Please include the certificate and return the voucher to me for approval.

With kindest regards,

As ever yours,

Director.

LH:LT

Dear Mr. Henson:

We have no fund at our disposal for charges of certificate of death or burial, the fee for same being 50¢.

Yours truly,
T. A. Macon
Ordinary

600

COPY OF CERTIFICATE OF DEATH
GEORGIA STATE BOARD OF HEALTH
Bureau of Vital Statistics

Registered No. 63

1. PLACE OF DEATH
County DeKalb Militia District (Number and Name) Dec. State of Georgia
City or Town ... Length of residence in this city or town: Yrs. ... Mos. ... Ds. ... NON-RESIDENT (Yes or No) ...
Street and Number (No.) ... (Street) ... Ward ...
If death occurred in a hospital, give its name instead of street and number
2. FULL NAME Martha Eliza Anne Knight
Residence (City or Town) Decatur (Street and Number) R.F.D. # 3 (State) Ga.

PERSONAL AND STATISTICAL PARTICULARS

3. SEX: Female
4. COLOR or RACE: White
5. Single, Married, Widowed, Divorced (write the word): widowed
6. DATE OF BIRTH (month, day, year): June 14th, 1850
7. AGE: Years 83 | Months 11 | Days 25 | If less than one day: Hours ... Minutes ...
8. OCCUPATION
(a) Trade, profession or particular kind of work done, as spinner, sawyer, bookkeeper, etc.: None
(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)
(d) Total years spent in this occupation
9. BIRTHPLACE (P. O. Address) Georgia
FATHER
10. NAME Dave Rawlins
11. BIRTHPLACE (P. O. Address) Georgia
MOTHER
12. MAIDEN NAME Betsy Givins
13. BIRTHPLACE (P. O. Address) Georgia
14. INFORMANT (Signed) R. D. Knight
(Address) R.F.D. # 3, Decatur, Georgia
15. BURIAL PLACE (Cemetery) Jersey Cemetery
(Postoffice) DeKalb Co, Ga. Date June 12, 1934
20. UNDERTAKER (Signed) A. S. Turner
(Address) Decatur, Georgia

MEDICAL CERTIFICATE OF DEATH

16. DATE OF DEATH June 9th 1934 at 7:45 A. M. (Month, Day, Year) (Hour)
17. I HEREBY CERTIFY, That I attended the deceased from March 1933 to June 9th 1934
I last saw her alive on June 34 death is said to have occurred on the date and hour stated above.
The principal cause of death and related causes of importance in the order of onset and duration of each:
Cancer, first side of Uterous
Other contributory causes of importance:
Extraction
What test confirmed diagnosis? No.
(Specify whether autopsy, operation, laboratory, or clinical)
If death was due to external causes (violence) fill in also the following:
Was injury an accident, suicide, or homicide? No
Where did injury occur (Specify city or town, if outside of limits, the county, and also the state) No
Did injury occur in a home, public place or industry? No
Manner of injury —
Nature of injury —
(Signed) C. J. Allgood M.D.
(Address) Scottdale, Georgia
18. FILED June 13, 1934
(Signed) J. R. Evans (Local Registrar)

THIS IS TO CERTIFY: That the certificate attached hereto is a true and correct copy of those items prescribed by the State Statutes, as shown on the original, which has become a perpetual record in the archives of the State Bureau of Vital Statistics.

Signed J. Culver Romine
State Registrar.
Atlanta, Ga. By Burkett Woods
Director, Bureau Vital Statistics.
Date July 24 1934

City or Town ____ Length of residence in this city or town: Yrs. ____ Mos. ____ Ds. ____ NON-RESIDENT (Yes or No) ____

Street and Number (No.) ____ (Street) ____ Ward ____
(If death occurred in a hospital, give its name instead of street and number)

2. FULL NAME Martha Eliza Anne Knicat

Residence (City or Town) Decatur (Street and Number) R.F.D. # 2 (State) Ga.

PERSONAL AND STATISTICAL PARTICULARS

3. SEX: Female
4. COLOR or RACE: White
5. Single, Married, Widowed, Divorced (write the word): widowed
6. DATE OF BIRTH (month, day, year): June 14th, 1850
7. AGE: Years 83 | Months 11 | Days 25 | If less than one day: Hours ____ Minutes ____
8. OCCUPATION
   (a) Trade, profession or particular kind of work done, as spinner, sawyer, bookkeeper, etc.: None
   (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) ____ (d) Total years spent in this occupation ____
9. BIRTHPLACE (P. O. Address): Georgia
10. FATHER'S NAME: Dave Rawlins
11. BIRTHPLACE (P. O. Address): Georgia
12. MOTHER'S MAIDEN NAME: Betsy Givins
13. BIRTHPLACE (P. O. Address): Georgia
14. INFORMANT (Signed) R. D. Knicat (Address) R.F.D. # 2, Decatur, Georgia
19. BURIAL PLACE (Cemetery) Pleasant Grove (Postoffice) DeKalb Co, Ga. Date June 12, 1934
20. UNDERTAKER (Signed) A. S. Turner (Address) Decatur, Georgia

MEDICAL CERTIFICATE OF DEATH

16. DATE OF DEATH June 9th 1934 at 7:45 A. M. (Month, Day, Year) (Hour)
17. I HEREBY CERTIFY, That I attended the deceased from March 1933 to June 9th 1934

I last saw h[illegible] alive on June 1934, death is said to have occurred on the date and hour stated above. The principal cause of death and related causes of importance in the order of onset and duration of each:

Cancer, first side of Uterous

Other contributory causes of importance:

Exaction

What test confirmed diagnosis? No. (Specify whether autopsy, operation, laboratory, or clinical)

If death was due to external causes (violence) fill in also the following:

Was injury an accident, suicide, or homicide? No

Where did injury occur (Specify city or town. If outside of limits, the county, and also the state) No

Did injury occur in a home, public place or industry? No

Manner of injury —

Nature of injury —

(Signed) C. L. Allwood M.D.

(Address) Scottdale, Georgia

15. FILED June 13, 1934

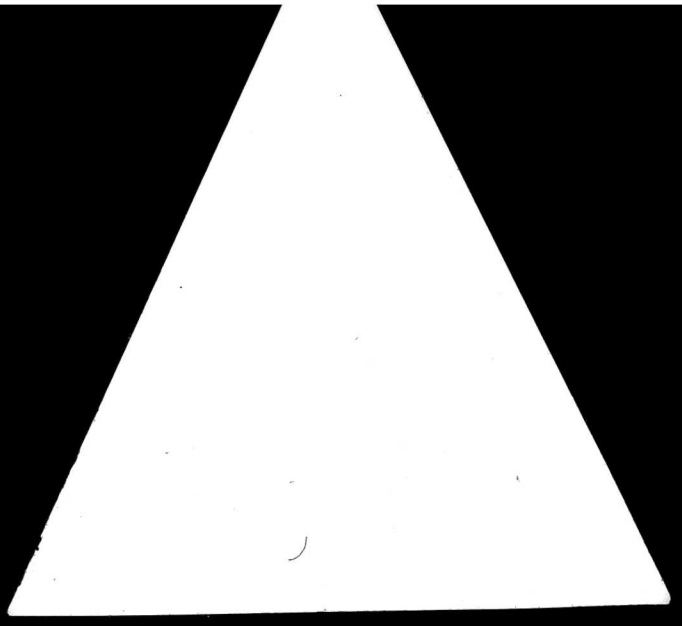
(Signed) J. B. Evans (Local Registrar)

THIS IS TO CERTIFY: That the certificate attached hereto is a true and correct copy of those items prescribed by the State Statutes, as shown on the original, which has become a perpetual record in the archives of the State Bureau of Vital Statistics.

Signed J. H. Severance State Registrar.

Atlanta, Ga. Per Buford Evans Director, Bureau Vital Statistics.

Date July 24 1934



Knight, Sarah Jane
De Kalb County
JK Jr. 1110
1/5-11

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 DeKalb

Name Mrs Sarah Jane Knight

Widow of W J Knight

Company A - 35, Ga

Approved

J. W. LINDSEY,
Commissioner of Pension

CHAS. P. BYRD, State Printer, Atlanta.

10538

Name Mrs. Sarah Jane Knight

Widow of W. J. Knight

Company F-35, Ga

Approved

J. W. LINDSEY,
Commissioner of Pension

CHAS. P. BYRD, State Printer, Atlanta.

15[illegible]

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 DeKalb

Name Mrs. Sarah Jane Knight

Widow of W. J. Knight

Company F-35, Ga

Approved

J. W. LINDSEY,
Commissioner of Pension

CHAS. P. BYRD, State Printer, Atlanta.

No.

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,
DeKalb County.

Personally before me comes Mrs. Sarah J. Knight W. F. of said County, who, after being duly sworn, on oath says, that she is the widow of W. J. Knight to whom in the County of Gwinnett State of Georgia she was married on the 23rd day of Nov. 1869 and that she remained his wife, and resided with him to the date of his death in Dec. 15, 1916 and that she has not since his death remarried. At the time of his death he was a resident of DeKalb County, in said State of Georgia, and he was on the Act 1910 Pension Roll of the State and paid a pension of $60.00 in County County for 1916 per annum, on account of being a soldier in Company F, 35th Regiment (Volunteers of State Militia.)

At the death of W. J. Knight he was in the use and possession of the following property No property. All property owned by W. J. Knight had been sold prior to his death 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 and where situated.) None

Acres land None $

Horses and Mules None $

Hogs, Cows, etc [illegible] $

Total Cash value of all property [illegible] $

That she is now a bona fide resident citizen of said County of DeKalb and she has so continuously resided since 14 day of August xxxx 1879

Sworn to and subscribed before me, this the 14th day of August 1917.

Mrs. Sarah Jane Knight

James R. George Ordinary,
of DeKalb County.

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

STATE OF GEORGIA,
DeKalb County.

Personally before me come J. T. Weems 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. Sarah J. Knight who made the foregoing affidavit, is the lawful widow of W. J. Knight who died in DeKalb County in said State of Gwinnett on 15 day of Dec. 1916 and that she has not since remarried. That she became the wife of W. J. Knight on the 23 day of Nov. 1869 and that she and he had resided together as man and wife continuously since 23 day of Nov. 1869 and that the W. J. Knight was the same man who was on the pension roll of said State from DeKalb County when he died.

Sworn to and subscribed before me, this the 14 day of August 1917.

J. T. Weems
Mark

James R. George Ordinary,
of DeKalb County.

Cannot obtain license as County Notary & Records Burned in 1871 J.R.George

Total Cash value of all property ..... $.....

That she is now a bona fide resident citizen of said County of DeKalb and she has so continuously resided since 14 day of August xxxx 1878

Sworn to and subscribed before me, this the 11th day of August 191 7.

Mrs. Sarah Jane Knight

James R George Ordinary,

of DeKalb County.

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

STATE OF GEORGIA,

DeKalb County.

Personally before me come J. T. Williams 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. Sarah J. Knight who made the foregoing affidavit, is the lawful widow of W. J. Knight who died in DeKalb County in said State of Georgia on 15 day of Dec 1916 and that she has not since remarried. That she became the wife of W. J. Knight on the 23 day of Nov 1864 and that she and he had resided together as man and wife continuously since 23 day of Nov 1864 and that the W. J. Knight was the same man who was on the pension roll of said State from DeKalb County when he died.

Sworn to and subscribed before me, this the 14 day of Aug 1917

J. T. Williams

James R George Ordinary,

of DeKalb County.

Cannot obtain license as County House burned

with Records Burned in 1871 J R George

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,

DeKalb County.

Personally before me comes C. C. Carter & W. D. Williams who after being sworn on oath says, that they are freeholders of said County, and that they know Sarah Jane Knight said County and knew her said husband at his death on the N. O. day of 191 that she and he lived 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:

of the value of $.....

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

C. C. Carter

W. D. Williams

Ordinary,

of..... County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

DeKalb County.

I James R George Ordinary of said County, do certify, that, I know Mrs. Sarah Jane Knight 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 .....191 .....

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 DeKalb County shows that She returned property to the amount of $. Nothing for 1908 $..... for 1909 $..... for 1910 $..... for 1911 $..... for 1912 $..... for 1913 $..... for 1914 $..... for 1915 $..... for 1916

Sworn under my hand and official seal of office this 14 day of Aug 191 7

(SEAL.)

James R George Ordinary.

DeKalb 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 8rst January 1878 are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some present, or by general reputation.

J. T. Williams

Sarah J. Knight

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

of the value of $.....

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

Ede Carter
W. P. Williams

.....Ordinary,

of.....County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
DeKalb County.

I, James P. George, Ordinary of said County, do certify, that, I know Mrs. Sarah Jane Knight 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 .....191.....

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 DeKalb County shows that She returned property to the amount of $. Nothing for 1908 $.....for 1909 $.....for 1910 $.....for 1911 $.....for 1912 $.....for 1913 $.....for 1914 $.....for 1915 $.....for 1916

Sworn under my hand and official seal of office this 4th day of August 1927.

(SEAL.)

James P. George
Ordinary.
DeKalb 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.

Knight Sara Jane
Co V
1927

For DeKalb County

1927 (1927

Application for Pension Due Deceased Pensioner

(UNDER ACT 1910)

(To pay expenses of last illness and funeral)

V. A. Morgan Ordinary

For Mrs Sarah Jane Knight

Date of Death Feb 5 1927

Amount $166

Approved and ordered paid

John W. Clark
JOHN W. CLARK
Commissioner of Pensions

Received of V. A. Morgan Ordinary, Check for "P. O." Dollars, June 2, 1927
C. J. Thomas Jr.

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.

NIGHT AND SUNDAY PHONE DR. 0088
528-37 N. MCDONOUGH ST.
PHONE DEA. 0088

A. S. Turner

Funeral Director and Embalmer
Prompt Ambulance Service
Decatur, Georgia.

Funeral Expenses of Mrs Sara Jane Knight.,

February 5, 1927.

To Casket	$95.00
Embalming	25.00
Gloves, Collar, Hose	2.00
Hearse Service and Service Rendered	15.00
	$137.00

Georgia DeKalb County,

The Above and foregoing account is rendered for the ~~xxx~~ Funeral Expenses of Mrs Sara Jane Knight who died without owning sufficient property to pay this bill,

Sworn to and subscribed before me,
This February 5th, 1927.
Vicky Johnston
Notary Public, DeKalb County, Georgia
My Commission Expires Nov. 4, 1929

A S Turner
By Assistant

Approved and ordered paid 7K

John W. Clark

JOHN W. CLARK,
Commissioner of Pensions

Receipt of V. D. Morgan
Ordinary Check for $200.00 Feby
July 2, 1927
A. M. Turner Feby 5th

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.

$137.00

Georgia DeKalb County,

The Above and foregoing account is rendered for the ~~her~~ Funeral Expenses of Mrs Sara Jane Knight who died without owning sufficient property to pay this bill,

Sworn to and subscribed before me,
This February 5th, 1927.
Vicky Johnston D.
Notary Public, DeKalb Co.
My Commission Expires Nov. 4, 1929.

A. M. Turner
By Author

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, DeKalb County.

Personally before me, the Ordinary of said County, comes A. M. Turner of said County, who, after being sworn, on oath says that he knew Mrs Sara Jane Knight of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in DeKalb County, in this State, on the 5 day of February 1927, and that a Pension of One Hundred ($100.00) 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 $100.00, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me
V. D. Morgan, Ordinary
DeKalb County

(Seal of Ordinary)

A. M. Turner

CERTIFICATE OF ORDINARY

GEORGIA, DeKalb County.

I, V. D. Morgan, Ordinary of said County, do certify that I personally know A. M. Turner, who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew Mrs Sarah Jane Knight while in life and that this was the same person whose name appears on the Pension Roll of DeKalb County, and was paid a Pension of Two Hundred ($200.00) Dollars in said County for 1927, 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 8 day of Feby, 1927

(Seal or Ordinary)

V. D. Morgan, Ordinary
DeKalb 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 filled out.

says that he knew Mrs Sara Jane Knight of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in DeKalb County, in this State, on the 5 day of February 1927, and that a Pension of One Hundred ($100.00) 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 $140.00, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me
V. A. Morgan, Ordinary
DeKalb County

(Seal of Ordinary)

A. M. Turner

CERTIFICATE OF ORDINARY

GEORGIA, DeKalb County.

I, V. A. Morgan, Ordinary of said County, do certify that I personally know A. M. Turner, who is a resident citizen of said County and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew Mrs Sarah Jane Knight while in life and that this was the same person whose name appears on the Pension Roll of DeKalb County, and was paid a Pension of Two Hundred ($200.00) Dollars in said County for 1927, 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 8 day of Feby., 1927

(Seal or Ordinary) V. A. Morgan, Ordinary
DeKalb 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.

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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.

(Seal of Ordinary) ..... DeKalb ..... 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.

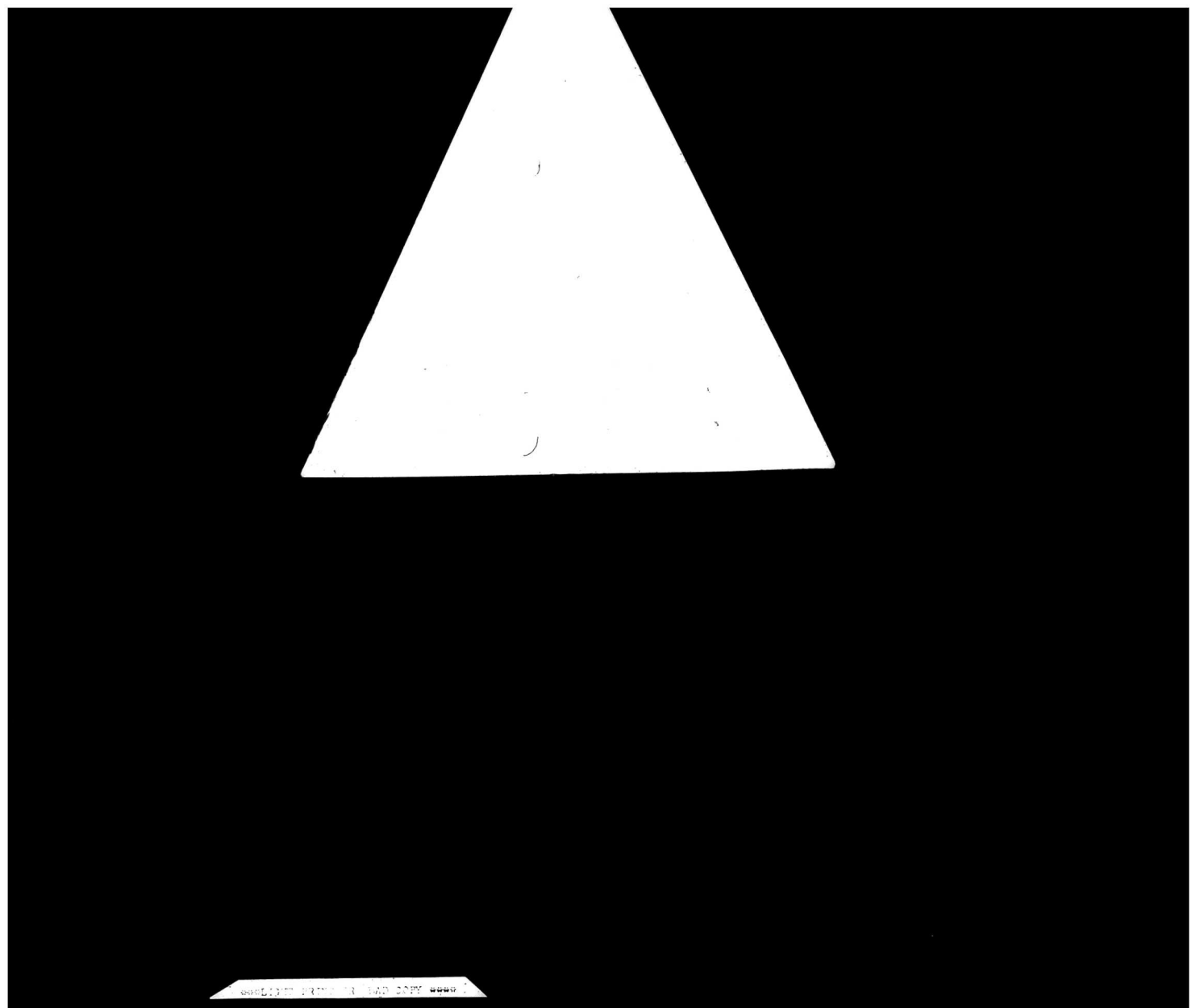
4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.

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 filled out.

ANSELME PRINT 'N' MAIL COPY



Knight, W. J.
DeKalb County

OK for 1911
No.

Confederate Soldier's Application.

UNDER ACT 1910.

County DeKalb

Name W. J. Knight

Company F.

Regiment 35th Georgia

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

10/30/10

BEST AVAILABLE PRINT OR BAD COPY

Knight, W. J.
DeKalb County

Ak-for 1911
No

Confederate
Soldier's Application.

UNDER ACT 1910.

County DeKalb
Name W. J. Knight
Company F.
Regiment 35th Georgia
Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta

10 Sept 10

BEST AVAILABLE PRINT OR BAD COPY

Name W. J. Knight

Company F.

Regiment 35th Georgia

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

10 Sept 0

Confederate
Soldier's Application.
UNDER ACT 1910.

No

Dec 1911

W. J. Knight
Co. F 35th Ga Regt
DeKalb County

County DeKalb

Name W. J. Knight

Company F.

Regiment 35th Georgia

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicant to Answer.

STATE OF GEORGIA,

DeKalb County.

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

1. What is your name and where do you reside? (Give County and Post-office).
W. J. Knight DeKalb Co Ga Chamblee Ga

2. How long and since when have you been a continuous resident citizen of this State?
65 years Sept 1845

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

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) June 1861 Gwinnett Co Company G - 35 Ga Reg

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) from June 1861 to April 1865

6. When and where was your Company and Regiment surrendered or discharged from the Service?
April 1865 Appomattox C.H. 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 present

a. Where was your Command when you left it? did not leave

b. When did you leave the Command? Surrender

c. For what cause did you leave? Surrender

d. By whose authority did you leave?

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

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

g. In what way were you prevented? Surrender

h. What effort did you make to return?

i. Were you captured during the war? was not

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

9. What property of every discription was owned, and the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list of items and value.) 60 acres of land Val $800.00 1 Horse Val $75-00 one cow-$25.00 1 wagon $15.00 - 1 Buggy $15.00 - House Hold Goods $25.00 - Total Value $955-00

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? 50 acres of land for $500.00 to J M Greer I owed some money on Land I sold Sandy bought a chopper

11. What property of any discription of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemised list). 60 acres of Land Val $800.00 - 1 Horse - $75.00 - 1 [illegible] $25.00 one wagon $15.00 - one Buggy $15.00 House Hold Goods Val $25.00 Total - $955.00

12. What annual or monthly income or earnings have you, yourself and wife, and the source derived have you? Nothing only what I Work on farm early & Late during

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 9 day of Sept 1910

James R Gloer
Ordinary
of DeKalb County.

W. J. Knight his mark

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

10/30/10

LIGHT PRINT OR BAD COPY

Confederate
Soldier's Application.
UNDER ACT 1910.

Oct 6 1911
No

County DeKalb
Name W. J. Knight
Company F.
Regiment 35th Georgia
Approved

J. W. LINDSEY,
Commissioner of Pensions

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,
DeKalb County.

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

1. What is your name and where do you reside? (Give County and Post-office).
W. J. Knight DeKalb Co Ga Chamblee Ga

2. How long and since when have you been a continuous resident citizen of this State?
65 years Sept 1845

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

4. When and where, and in what Company and Regiment did you enlist? (Give the term and class of Service) June 1861 Gwinnett Co Company F 35 Ga Reg

5. How long did you remain in this actual Military Service with said Company and Regiment? (Give date of discharge) from June 1861 to April 1865

6. When and where was your Company and Regiment surrendered or discharged from the Service?
April 1865 Appomattox C.H. Va

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

8. If you were not actually present, state specifically and clearly where you were and why you were absent

a. Where was your Command when you left it? did not leave

b. When did you leave the Command? Surrender

c. For what cause did you leave? Surrender

d. By whose authority did you leave?

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

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

g. In what way were you prevented? Surrender

h. What effort did you make to return?

i. Were you captured during the war? We was not

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

9. What property of every discription was owned, and the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list of items and value.) 60 acres of Land Val of $800.00 1 Horse Val $75.00 one cow $25.00 1 wagon $15.00 1 Buggy $15.00 House hold goods $25.00 Total Value $955.00

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? 50 acres of land for $1000.00 to J M Greer I owed some money on Land I Sold Sarah bought a chopen

11. What property of any discription of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemised list). 60 acres of Land Val $800.00 - 1 Horse $75.00 - 1 cow $25.00 one wagon $15.00 - one Buggy $15.00 House Hold Goods Val $25.00 Total $955.00

12. What annual or monthly income or earnings of yourself and wife and the source derived have you? Nothing only what I make on farm barly N & Living

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 6 day of Sept 1910.
James R. Glorge Ordinary.
W. J. Knight his mark
of DeKalb County.

LIGHT PRINT OR BAD COPY

c. For what cause did you leave? Surrender

d. By whose authority did you leave?

e. For how long was your leave granted? In what [illegible]

f. Why did you not return to your Command after [illegible] expired? Surrender

g. In what way were you prevented? Surrender

h. What effort did you make to return?

i. Were you captured during the war? was not

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

9. What property of every discription was owned, [illegible] use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value.) 60 acres of land Val of $800.00 1 Horse Val $75 - one Cow - $25.00 - 1 wagon $15.00 - 1 Buggy $15.00 - House Hold goods $25.00 Total Value $955.00

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? 50 acres [illegible] for $1580.00 to J M Grier I owed some money on Land I Sold Saddle & bought a chopper

11. What property of any discription of any kind, not of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemised list). 60 acres of Land Val $800.00 - 1 Horse - $75.00 - 1 [illegible] $25.00 one wagon $15.00 - one Buggy $15.00 House Hold Goods Val $25.00 Total - $955.00

12. What annual or monthly income or earnings of yourself and wife and the source derived have you? Nothing only what I Work on farm Early & Living

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 15 day of Sept 1910

James R George Ordinary of DeKalb County.

W. J. Knight his mark

G. G. ROBINSON,
ORDINARY GWINNETT COUNTY.

STATE OF GEORGIA,
Gwinnett County.

J.J.McDaniel of said State and County is hereby presented as a witness in support of the application of W.J.Knight 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.J.McDaniel ,Gwinnett County Ga.

2. How long and since when have you known W.J.Knight the applicant? All his life

3. Where does he now reside, and since when has he been a bonafide, continuing resident in this State and how do you know? Dekalb county Ga. all his life.

4. When, where and in what Company and Regiment did W.J.Knight enlist during war from 1861 to 1865? (Give date and place). June,1861 Rawlins court ground,Gwinnett County,Company "E" 35th ga. Reg.

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

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date). From June 1861 until Sept,13th 1862

7. When and where was his Command surrendered or discharged (give date and place) April 5th 1865 Appomattox Va.

8. Were you personally present at the Surrender? No

9. If not, where were you and how came you there? At Home. had lost my leg in Fredisburg fight on 13th day of September 1862

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

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

12. When did he leave his Command? I dont know 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 No If so, when and where?

In what prison was he held? and when released?

Sworn to and subscribed before me, this the 13th day of Sept 1910

J. J. McDaniel

G. G. Robinson Ordinary.

of Gwinnett County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.
DeKalb County.

Personally before me comes W.W.Lively & Charlie Lively who on oath says that they are free holders residing in said County and we know W.J.Knight 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.) 60 acres of Land $800.00 one House $75.00 1 Cow $25.00 1 wagon $15.00 1 Buggy $15.00 House Hold Goods $25.00 Total Value $955.00

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.) He Sold 60 acres of Land for $1580.00 He owed some money was why he sold farme and bough a chopper

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

3. What was the price paid or stated to be paid? $1580.00

4. What relation is the party to applicant? none

5. What disposition was made of the proceeds of the sale? He paid his debts and bought a saddle & bridle

6. Was the disposition of this property made in good faith and full values? It was or was it made to obtain a pension? It was not

Sworn to and subscribed before me, this the 15 day of Sept 1910

James R George Ordinary of DeKalb County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
DeKalb County.

I, James R George Ordinary of said County, certify that I know the applicant W J Knight for Pension to the person he represents himself to be and resides in said County. That I also know J J McDaniel the witness swearing to the service and W W Lively & Charlie Lively who are free holders that they are all residents of said County and were duly sworn before me before signing the foregoing affidavit and they are all truthful and true worthy and their statements are entitled to full faith and credit. That the Tax Results of DeKalb Co shows that he and wife value for tax is in 1908 $ 1110.00 for 1909 none for 1910 $ 930.00

Sworn under my hand and official seal of office this 15 day of Sept 1910

James R George Ordinary of DeKalb 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

11. If not where was he and how can you learn there? I dont know

12. When did he leave his Command? I dont know 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 No If so, when and where?
In what prison was he held? and when released?

Sworn to and subscribed before me, this the 12th day of Sept. 1917. J J McDaniel
J. F. Robinson Ordinary.
of Gwinnett County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.
DeKalb County.

Personally before me comes W. B. Lively & Charlie Lively who on oath says that they are free holders residing in said County and we know W. J. Knight 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.) 5.60 acres of Land $800.00 one Horse $75.00 1 cow $15.00 1 wagon $15.00 1 buggy $15.00 Hogs Household Goodsand $6.00 Total Val $955.00

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

James R George Ordinary of DeKalb 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, DeKalb County.

I, James R. George Ordinary of said county, do certify that I personally know Mrs. Sarah Jane Knight the applicant, and that she is the lawful widow of W. J. Knight, and was on the Indigent Pension Roll of said DeKalb county, and was paid a Pension from DeKalb county for 1916, and at the time of his death on the 15 day of December 1916, there was due to him and unpaid his Pension of Seventy $70.00 Dollars from the State of Georgia, and I know See affidavit, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 19 day of April 1917
James R. George Ordinary,
DeKalb County.

Knight W. J.
Sept 12 C.

No. 1917

Application for Pension Due Deceased Soldier
UNDER ACT 1891
To be paid his Widow or Dependent Children

Mrs Sarah Jane Knight
Widow of W. J. Knight
of DeKalb County
Co. C Regt. 35 Ga Vols

Approved and paid 1917.
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 191..., through my deceased husband, who was on Pension Roll and paid from for 19....

Witness my hand this day of 19....

Attested before me:

Knight, W. J.
Co. F, 11th Ga.

No. _____ 1917

Application for Pension Due Deceased Soldier

UNDER ACT 1891

To be paid his Widow or Dependent Children

By Mrs. Sarah Jane Knight

Widow of W. J. Knight

of _____ County

Co. G Regt. 35 Ga Vols

Approved and paid _____ 1917.

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 191..., through my deceased 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, DeKalb County.

Personally before me comes Mrs Sarah Jane Knight of said county, after being duly sworn, on oath says that she is the widow of W J Knight who was duly enrolled as a Indigent Pensioner from the county of DeKalb and was paid a Pension of Sixty Dollars Dollars from DeKalb county for 1916, and that the said W J Knight died in DeKalb county on the 15 day of December, 1916, and at the time of his death a Pension of 70.00 was due him from DeKalb county and unpaid for 1917

Applicant further swears that she married the said W J Knight on the 23 day of November 1869, in Gwinnett 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 17 day of April, 1917.

James R. George, Ordinary. | her Sarah Jane Knight (L.S.) mark

DeKalb County.

AFFIDAVIT OF WITNESS.

GEORGIA, [illegible] County.

Personally before me comes M. A. Dalton and J. [illegible], who on oath says that he knew W. J. Knight while in life and that he knows Mrs. Sarah Jane Knight the above applicant; that he knows that the said W. J. Knight and Sarah Jane [illegible] were in due form of law married in the county of Gwinnett in the State of Georgia on the 23rd day of November, 1869, and that they resided together as husband and wife from date of marriage to the day of his death on the 15th day of December, 1916, and I now know that she is his dependent widow.

Sworn to and subscribed before me this 17th day of April, 1917.

J. R. Williams Ordinary. | M. A. Dalton

[illegible] County.

Note 1st—This form can be used by guardian or minor children [illegible] Form No. 3 Rev.
2d—Ordinary must send in all cases certified copy of [illegible] J. W. Reeves

the 23 day of November, 1869 in Gwinnett 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 17 day of April, 1917.

James R. George, Ordinary.
DeKalb County.

Sarah Jane Knight (L.S.)
Mark

AFFIDAVIT OF WITNESS.

GEORGIA, Gwinnett County.

Personally before me comes M. A. Talton and J. T. Weems, who on oath says that he knew W. J. Knight while in life and that he knows Mrs. Sarah Jane Knight the above applicant; that he knows that the said W. J. Knight and Sarah Jane Weems were in due form of law married in the county of Gwinnett in the State of Georgia on the 23rd day of November, 1869, and that they resided together as husband and wife from date of marriage to the day of his death on the 12th day of December, 1916, and I now know that she is his dependent widow.

Sworn to and subscribed before me this 17th day of April, 1917.

G. G. Robinson, Ordinary.
Gwinnett County.

M. A. Talton
J. T. Weems

Note 1st—This form can be used by guardian or minor children. Not to be used by widow.
2d—Ordinary must send in all cases certified copy of marriage license attached.

Georgia, Gwinnett County.

I, G. G. Robinson, Ordinary of said county, do certify that I personally know M. A. Talton and J. T. Weems the affiants to the affidavit supporting the proof of the marriage of W. J. Knight and Sarah Jane Weems on the 23rd day of November, 1869, in Gwinnett County, Georgia. That said witnesses are of truthful and trustworthy character and entitled to full credit.

I further certify that on account of fire distroying the Court-house of Gwinnett County in the year 1871, there is no record of the marriage of W. J. Knight and Sarah Jane Weems in this office.

Given under my official signature and seal of this court, this 19th day of April, 1917.

G. G. Robinson
Ordinary, Gwinnett County, Georgia.

LAWRENCEVILLE, GA.

Georgia Gwinnett County,

In person come before me, J.P. Phillips, who on oath says that he is personally acquainted with W.J.Knight, who is an applicant for a pension, and I further certify that I with W.J.Knight, served in Company "F" 35th Ga Reg from March 1862 until April 1865.?
And I further certify that I. J.P.Phillips was at the surender with said Company "F" 35th Ga Reg on April 5th 1865, and that W.J.Knight was also present.

J. P. Phillips

Sworn to and subscribed to before me,
This 12th day of September 1910.

G. G. Robinson, Ordinary.

Georgia Gwinnett County,
I.G.G.Robinson, Ordinary in and for said county, do certify that J.J.McDaniel, and J.P. Phillips, are of trust worthy and entitled to full faith and credit.
Witness my hand and Seal of Office, This 12th day of Sept 1910.

G. G. Robinson

County, Georgia. That said witnesses are of truthful and trustworthy character and entitled to full credit.

I further certify that on account of fire distroying the Courthouse of Gwinnett County in the year 1871, there is no record of the marriage of W. J. Knight and Sarah Jane Weems in this office.

Given under my official signature and seal of this court, this 19th day of April, 1917.

G. G. Robinson
Ordinary, Gwinnett County, Georgia.

LAWRENCEVILLE, GA.,

Georgia Gwinnett County,

In person come before me, J.P.Phillips, who on oath says that he is personally acquainted with W.J.Knight, who is an applicant for a pension, and I further certify that I with W.J.Knight, served in Company "F" 35th Ga Reg from March 1862 until April 1865.?
And I further certify that I. J.P.Phillips was at the surender with said Company "F" 35th Ga Reg on April 5th 1865, and that W.J.Knight was also present.

J. P. Phillips

Sworn to and subscribed to before me,
This 12th day of September 1910.

G. G. Robinson, Ordinary.

Georgia Gwinnett County,
I.G.G.Robinson, ordinary in and for said county, do certify that J.J.McDaniel, and J.P. Phillips, are of trust worthy and entitled to full faith and credit.
Witness my hand and Seal of Office This 12th day of Sept 1910.

G. G. Robinson Ordinary

NAME Knight W. J. YEAR 1911 COUNTY DeKalb

[illegible] Resident of Georgia 65 years Spetember 1845.

[illegible] June 1861, Guinnett County, Georgia.

[illegible]

COMPANY AND REGIMENT? Company F. 35th Georgia Regt.

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED WHEN AND WHERE?

RELEASED

WHEN AN WHERE SURRENDERED? April 1865, Appomattox Court House, Va.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED,

WITNESSES J. J. McDaniel- Same command- No data.
J. P. Phillips- Same command-

v CB

NAME Knight W. J. YEAR 1911 COUNTY DeKalb

WHEN AND WHERE BORN? Resident of Georgia 65 years Spetember 1845.

ENLISTED WHEN AND WHERE? June 1861, Guinnett County, Georgia.

RANK

COMPANY AND REGIMENT? Company F. 35th Georgia Regt.

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED WHEN AND WHERE?

RELEASED

WHEN AND WHERE SURRENDERED? April 1865, Appomattox Court House, Va.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED,

WITNESSES J. J. McDaniel- Same command- No data.
J. P. Phillips- Same command-

V CB

WITNESSES	J. J. McDaniel-	Same command-	No date.
	J. P. Phillips-	Same command-	

v CB

BEST AVAILABLE PRINTER BAD COPY

Lacy, A. S.
DeKalb County

Act for 1911

No.

Confederate
Soldier's Application.

UNDER ACT 1910.

County DeKalb

Name A. S. Lacy

Company D

Regiment 42 Ga

Approved

J. W. LINDSEY,
Commissioner of Pensions

PHAR P. BYRD, State Printer, Atlanta.

Name A S Lacy

Company D

Regiment 42 Ga

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,
DeKalb County.

A S Lacy ... 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 the 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)
A.S. Lacy DeKalb Co Atlanta Ga R.F.D. #3

2. How long and since when have you been a continuous resident citizen of this State?
75 May 25th 1835

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

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) March 1862 Decatur Ga Company D 42 Ga Reg't

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) from March 1862 to Apr'l 1865

6. When and where was your Company and Regiment surrendered or discharged from the Service?
April 1865 Greensboro N C

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

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

a. Where was your Command when you left it? Did not leave Surrender

b. When did you leave the Command? At Surrender

c. For what cause did you leave? Surrender

d. By whose authority did you leave?

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

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

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 discription was owned, in the possession and control of yourself and wife and its cash value on the 4. Nov. 1908? (Make list by items and value.) 54 acres of Land belonging to My wife Value $800.00 2 Cows $50.00 Corn $75.00 Horse Hold Goods $50.00 Total $975.00

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

11. What property of any discription of any kind, and of what value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemized list). 54 acres of Land belonging to My Wife Val $800.00 2 Cows $50.00 each Mule $50.00 Total $975

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? I am not

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

Sworn to and subscribed before me, this the 13 day of Sept 1910

James R George Ordinary, DeKalb County.

A S Lacy

Confederate Soldier's Application.

UNDER ACT 1910.

County DeKalb

Name A S Lacy

Company D

Regiment 42 Ga

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

Co. D 42 Ga Regt

Wm G. Lee
Capt Hall County

No

on.

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? Surrender

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 discription was owned, in the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value.) 54 acres of Land belonging to My wife Value $800.00 2 cows $50 Ea Yoke Mules $75.00 House Hold Goods $50.00 Total $975.00

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? Nothing

11. What property of any discription of any kind, and of what value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemized list). 54 acres of Land belonging to My Wife val $800.00 2 Cows $50.00 each Mule $50.00 Total $975.00

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

13. Are you drawing a pension of any amount from this State or the United States? I am not

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

Sworn to and subscribed before me, this the 13 day of Sept 1910

James R George Ordinary

DeKalb County.

C. D Fraser

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,

DeKalb County.

John W Ozmer 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? John W Ozmer DeKalb Co

2. How long and since what date have you known A S Lacy the applicant? 47 Years since 1863

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

4. When, where and in what Company and Regiment did A S Lacy enlist during war from 1861 to 1865? (Give date and place) March 1862 Decatur Ga Company D 42 Ga

5. How did you obtain your information of this Service? Belonged to Same Company & Regiment

6. How long within your personal knowledge did he perform actual military service with this Company and Regiment? (give date) March 1862 to Aprl 1865

7. When and where was his Command surrendered or discharged (give date and place) April 1865 Greensboro NC

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

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

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

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

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

By whose authority did he leave and how long was he granted leave? Surrender How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) I was Present & Know it of My own Knowledge

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

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

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 13 day of Sept 1910

John. W. Ozmer

James R George Ordinary DeKalb County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

DeKalb County.

Personally before me comes J. O. Brown & Allen Brown who on oath says that they are free holders residing in said County and we know the applicant for pension and we know the property that is now in the use, possession and control of himself and wife and of its cash value to-wit: (Make List by items and value.) 54 acres of Land belonging to his wife Val $800.00 2 cows $50. Yoke Mule $75.00 House Hold Goods $50.00 Total $975.00

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.) Nothing

2. When and to whom was it sold or given to? Sold nothing

3. What was the price paid or stated to be paid? no

4. What relation is the party to applicant?

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

6. Was the disposition of this property made in good faith and full values? or was it made to obtain a pension?

Sworn to and subscribed before me, this the 13 day of Sept 1910

James R George Ordinary

J. O Brown Allen Brown

of DeKalb County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

DeKalb County.

I James R George Ordinary of said County, certify that I know the applicant A S Lacy for pension in the person he represents himself to be and resides in said County. That I also know John W Ozmer the witness swearing to the service and J. O. Brown & Allen Brown who are free-holders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Results of DeKalb county shows that A S Lacy and wife value for tax is in 1908 $ 910.00 for 1909 $ 910.00 for 1910 $ 910.00

Sworn under my hand and official seal of office this 28 day of Oct 1910

James R George Ordinary

of DeKalb 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, affidavit of Free holders unnecessary.

this Company and Regiment? (give date) March 1862 to April 1865

7. When and where was his Command surrendered or discharged (give date and place)
April 1865 Goldsboro NC

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

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

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

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

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

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

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

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

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 3 day of Sept 1910

James R George Ordinary. John. W. Ozmer

DeKalb County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

DeKalb County.

Personally before me comes J.O. Brown & Allen Brown who on oath says that they are free holders residing in said County and we know the applicant for pension and we know the property that is now in the use, possession and control of himself and wife and of its cash value to-wit: (Make List by items and value.) 77 54 acres of land belonging to his wife Val $800.00 2 Teams $50 Corn Meat Fodder $100 Home Hold Furniture $25 Total $975-4

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

the applicant A S Lacy for Pension is the person he represents himself to be and resides in said County. That I also know John W Ozmer the witness swearing to the service and J.O. Brown & Allen Brown who are free holders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Results of DeKalb County shows that A S Lacy and wife value for tax is in 1908 $ 760.00 for 1909 $ 778.00 for 1910 $ 770.00

Sworn under my hand and official seal of office this 28 day of Oct 1910

James R George Ordinary

of DeKalb 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.

NAME Lacy, A. S. YEAR 1911 COUNTY DeKalb

WHEN AND WHERE BORN? Resident of this state(Georgia) 75, May 25th, 1835.

ENLISTED WHEN AND WHERE? March 1862, Decatur, Georgia.

RANK

COMPANY AND REGIMENT? Company D, 42th Georgia Regt.

NAME OF CAPTAIN AND COLONEL?

WOUNDED

CAPTURED WHEN AND WHERE ?

RELEASED

WHEN AND WHERE SURRENDERED? April 1865, Goldsboro, North Carolina.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED,

WITNESSES. John W. Ozmer- Same command- No data.

CB

NAME Lacy, A. S. YEAR 1911 COUNTY DeKalb

WHEN AND WHERE BORN? Resident of this state(Georgia) 75, May 25th, 1835.

ENLISTED WHEN AND WHERE? March 1862, Decatur, Georgia.

RANK

COMPANY AND REGIMENT? Company D, 42th Georgia Regt.

NAME OF CAPTAIN AND COLONEL?

WOUNDED

CAPTURED WHEN AND WHERE ?

RELEASED

WHEN AND WHERE SURRENDERED? April 1865, Goldsboro, North Carolina.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED,

WITNESSES. John W. Ozmer- Same command- No data.
CB

Lacey, Cynthia A.
Dekalb
Apr 1917

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. DeKalb

Name. Mrs. Cynthia A. Lacey

Widow of A. S. Lacey

Company. D- 62nd I.

Approved.

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

538/16

Name Mrs Cynthia A. Lacey
Widow of A. S. Lacey
Company D- 62nd I.
Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

28/16

Lacey, Cynthia A.
Widow of A. S. Lacey
Co. D 62nd Inf.
Spanish War

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. DeKalb
Name Mrs Cynthia A. Lacey
Widow of A. S. Lacey
Company D- 62nd I.
Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer Atlanta.

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,
DeKalb County.

Personally before me comes Mrs. Cynthia A. Lacey of said County who, after being duly sworn, on oath says, that she is the widow of A. S. Lacey to whom in the County of DeKalb State of Georgia she was married on the 19th day of January 1875 and that she remained his wife, and resided with him to the date of his death on March 14 1916 and that she has not since his death remarried. At the time of his death he was a resident of DeKalb County, in Gwinnett said State of Georgia, and he was on the Pension Roll of the State and paid a pension of $ 60.00 in DeKalb County for 1916 per annum, on account of being a soldier in Company D. Regiment 62nd Ga. (Volunteers of State Militia.)

At the death of A. S. Lacey he was in the use and possession of the following property 50 acres (More or Less) in Mills District of the cash value of $ 1000.00

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

50 Acres land Gwinnett Co., Mills District $ 1000.00
Horses and Mules $
Hogs, Cows, etc $
Total Cash value of all property $

That she is now a bona fide resident citizen of said County of DeKalb and she has so continuously resided since 1859 day of 19

Sworn to and subscribed before me, this the 20th day of January 1916.

Cynthia A. Lacey
(Mrs. Cynthia A. Lacey)

James R. George Ordinary,
of DeKalb County.

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

STATE OF GEORGIA,
DeKalb County.

Personally before me come W. K. Maddox & Allen Brown 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 Cynthia A. Lacey who made the foregoing affidavit, is the lawful widow of A. S. Lacey who died in DeKalb County in said State of Georgia on 14th day of March 1916 and that she has not since remarried. (That she became the wife of A. S. Lacey on the 19th day of January 1875 and that she and he had resided together as man and wife continuously since 1875 day of 1897 and that the A. S. Lacey was the same man who was on the pension roll of said State from 1897 to 1916 County when he died.)

(Insert last day of January in the case of widows.)

W. K. Maddox
Allen Brown

Sworn to and subscribed before me, this the 20th day of January 1916.

James R. George Ordinary,
of DeKalb County.

That she is now a bona fide resident citizen of said County of DeKalb and she has so continuously resided since 1859 day of ——— 19—

Sworn to and subscribed before me, this the 27th day of June 1916

Emily Lacy (Mrs. Emily A. Lacy)

James R. George Ordinary,

of DeKalb County.

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

STATE OF GEORGIA,

DeKalb County.

Personally before me come N. H. Maddox & Allen Brown 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. Emily A. Lacy who made the foregoing affidavit, is the lawful widow of A. S. Lacy who died in DeKalb County in said State of Georgia on 14th day of Dec. 1915 and that she has not since remarried. (That she became the wife of A. S. Lacy on the 19th day of Jan 1871 and that she and he had resided together as man and wife continuously since ——— day of Jan 1871) and that the A. S. Lacy was the same man who was on the pension roll of said State from DeKalb County ——— when he died.)

(Line out words in parenthesis if not known to the witnesses)

Sworn to and subscribed before me, this the 27th day of June 1916

N. H. Maddox

Allen Brown

James R. George Ordinary,

of DeKalb County.

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,

DeKalb County.

Personally before me comes N. H. Maddox & Allen Brown who after being sworn on oath says, that they are freeholders of said County, and that they know Mrs. Emily A. Lacy of said County and knew her said husband A. S. Lacy at his death on the 14th day of Dec. 1915 that she and he were in the use, possession and control of the following property at his death to wit: Home Tract 50 Acres of Land in Mills District,

of the value of $ 750.00 That she is now in the use, possession and control of the following property to wit: 50 Acres of Land in Embden Mills Dist

of the value of $ 750.00

Sworn to and subscribed before me, this the 27th day of June 1916

N. H. Maddox

Allen Brown

James R. George Ordinary,

of DeKalb County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

DeKalb County.

I, James R. George Ordinary of said County, do certify, that, I know Mrs. Emily A. Lacy 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 ——— 1916

That I also know N. H. Maddox Allen Brown witness as to marriage and I also know N. H. Maddox Allen Brown 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 $ ——— for 1909 $ ——— for 1910 $ ——— for 1911 $ ——— for 1912 $ ——— for 1913 $ ——— for 1914 $ ——— for 1915 $ 20.00 for 1916

Husband returned property for 1916 at death

Sworn under my hand and official seal of office this 27th day of June 1916

(SEAL.)

James R. George Ordinary.

DeKalb County.

This is to certify that Mrs. Emily A. Lacy was married to A. S. Lacy on the 19th day of Jan. 1871 and lived with husband until his death Dec. 14th 1915

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.

...County.

I, James R George Ordinary of said County, do certify, that, I know Mrs. Cynthia Lacy 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 ...1916

That I also know W H Maddox Allen Brown witness as to marriage and I also know W Maddox Allen Brown 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 $—for 1909 $—for 1910 $—for 1911 $—for 1912 $—for 1913 $—for 1914 $—for 1915 $—for 1916

Husband returned $100.00 prior to death

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

(SEAL.) James R George Ordinary.

DeKalb County.

This is first year she returned property since husband's death

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.

Application for Pension Due to a Deceased Pensioner

Under the Act of August 15, 1904

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

GEORGIA. DeKalb County.

Personally before me, the Ordinary of said County, comes W.P. Lacy of said County, who, after being sworn, on oath says that he knew Mrs Cynthia Lacy of said County, and that She was on the Pension Roll DeKalb County at the time of her death, which occurred in DeKalb County, in this State, on the 29 day of January 1915, and that a Pension of Ninety ($90.00) Dollars was due Her said unpaid at the time of her death. That She left no widow or dependent children surviving her, and no estate of any value sufficient to pay his funeral expenses, which amounted to the sum of $100.00 Dollars, as per sworn statement, itemized, hereto attached.

Sworn to and subscribed before me this 7 day of May 1915 — W P Lacy

James R George Ordinary. DeKalb County.

GEORGIA. DeKalb County.

May 7th 1915

I, James R George Ordinary of said County, do certify that I personally know Mrs Cynthia Lacy who is a resident citizen of said County, and that he is of a truthful and trustworthy character, entitled to full faith and credit.

I also knew W.P. Lacy while in life; that She was the same person whose name appears on the Pension Roll of DeKalb County, and was paid a Pension of Ninety ($90.00) Dollars in said County for 1915, and I now believe her to be dead.

Given under my hand and official seal, this 7 day of May 1915

James R George Ordinary.

DeKalb County.

State of Georgia, County of Jefferson.

To any minister of the Gospel, Justice of the Inferior Court or Justice of the Peace, Greeting: You are hereby ordered to solemnize the rites of matrimony between Mr. [illegible] Lacy of the County aforesaid, of the one part, and Miss [illegible] of the other part, according to the Rites of your Church, Creed or Religion, for so doing this shall be your sufficient warrant for the same.

Given under my hand, as Ordinary for the County aforesaid, this 11th day of June 1870.

[illegible], Ordinary.

I hereby certify that the above and foregoing is a true copy of the original Marriage License issued in the case of Mr. [illegible] Lacy and Miss [illegible] as appears of file and record in my office.

Witness my hand and seal of office, this the 11th day of June 1870.

W.J. Anderson

Ordinary of Jefferson County, Georgia.

GEORGIA, [illegible] County.

Personally before me, the Ordinary of said County, comes W. P. Lacy

of said County, who, after being sworn, on oath says that he knew Mrs Cynthia Lacy of said County, and that She was on the Pension Roll DeKalb County at the time of Her death, which occurred in DeKalb County, in this State, on the 29 day of January 1919, and that a Pension of Ninety ($90.00) Dollars was due Her said unpaid at the time of Her death. That She left no widow or dependent children surviving Her, and no estate of any value sufficient to pay his funeral expenses, which amounted to the sum of $100.00 Dollars, as per sworn statement, itemized, hereto attached.

Sworn to and subscribed before me this 7 day of May 1919

James R. George Ordinary DeKalb County. W P Lacy

GEORGIA, DeKalb County.

May 7th 1919

I, James R. George Ordinary of said County, do certify that I personally know Mrs Cynthia Lacy who is a resident citizen of said County, and that he is of a truthful and trustworthy character, entitled to full faith and credit.

I also knew W. P. Lacy while in life; that She was the same person whose name appears on the Pension Roll of DeKalb County, and was paid a Pension of Ninety ($90.00) Dollars in said County for 1919, and I now believe Her to be dead.

Given under my hand and official seal, this 7 day of May 1919

James R. George Ordinary.

DeKalb County.

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celebr to. These are to authorize and permit you to join in the Honorable State of Matrimony, [illegible] Lacy of the one part, and Miss Cynthia [illegible] Moore, of the other part, according to the Rites of your Church. Provided, there be no lawful cause to obstruct the same; and this shall be your authority for so doing.

Given under my hand, as Ordinary of the County, aforesaid, this fifteenth day of [illegible] 1[illegible]

[illegible], Ordinary.

I [illegible], that [illegible] Lacy and [illegible] were joined together in the Holy Bonds of Matrimony by me, this fifteenth day of [illegible].

[illegible]

[illegible], Ordinary of said County, do certify that the foregoing is a true and correct copy of the record of Marriage of [illegible] Lacy and Miss Cynthia [illegible] Moore, as appears of file and of record in my office.

Witness my hand and seal of office, this the 15th day of [illegible].

W. T. Andrews.
Ordinary of [illegible] County, Georgia.

E. F. BOND, Pres't. S. R. GREENBERG, Sec & Treas.

GREENBERG & BOND CO.

AMBULANCE BELL PHONE 147 ATLANTA PHONE 774

FUNERAL DIRECTORS

135 IVY STREET

CHAPEL

ATLANTA, GA. 5/1/19

To W P Lacy for Mrs. Synthiana Lacy

Casket & Robe	60.00
Hearse	10.00
Automobiles	30.00
	10.00

1/30/19 Paid by W P Lacy

Greenberg & Bond Co.

S. R. Greenberg

State of Ga. County of Fulton

Personally appeared before me S. R. Greenberg who on oath says that the above account of Greenberg & Bond Co. is correct and has been paid by W P Lacy and is correct and has been paid by W P Lacy

Sworn & Subscribed before me this 1st day of May 1919 S. R. Greenberg

Mrs Lacy

E. F. BOND, Pres't. S. R. GREENBERG, Sec. & Treas.

GREENBERG & BOND CO.

FUNERAL DIRECTORS

AMBULANCE — CHAPEL

BELL PHONE IVY 774
ATLANTA PHONE

135 IVY STREET

ATLANTA, GA. 5/1/19

To H P Lacy
for Mrs. Synthiana Lacy

Casket & Box	60.00
Hearse	10.00
Automobiles	30.00
	10.00

5/3/19 Paid by H P Lacy
Greenberg & Bond Co.
S. R. Greenberg

State of Ga.
County of Fulton

Personally appeared before me S. R. Greenberg who on oath says that the above account of Greenberg & Bond Co was paid by H P Lacy and is correct and true.

Sworn & subscribed before me this 5th day of May 1919 S. R. Greenberg

Laing, T. F.
De Kalb G.
No. 1486

INDIGENT PENSION.

1903.

1906

Name T. F. Laing

County DeKalb

Co. C. 5th Inf'd Regt.

Approved Harris 1903

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta.

9/15/03

Pension Office, 10/1/04.

Not aged. Infirmity not shown to be such that he cannot earn a support at some kind of labor or calling. Was his command of the Confederate Army or of the State Militia of Florida. State and prove all clearly.

J. W. Lindsey,
Com. of Pensions.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
COUNTY. }

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

Witness my hand and seal, this _____ day of _____, 1903.

by _____

[L. S.]

Executed in the presence of

_____

Approved ____ Florida 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta.

9/1/05

...ATTORNEY.

...hereby authorize

...of

...at he remit same to

...by

...day of ...1903.

[L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,
_____ COUNTY.

I, _____ hereby authorize

_____ of _____

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

_____ at _____ by _____

Witness my hand and seal, this _____ day of _____ 1903.

[L. S.]

Executed in the presence of

_____

_____

Per Ion ... 4.

...ut of the Treasury of the ...
...ts of the Act of ...
...ficial ...
...ate of Pension.

INDIGENT PENSION.
1903.

Name J. F. Laing
County Dekalb
Co. E 5th Ga Regt.
Approved Florida 1903
No. 1906

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta.

9/1/05

Savings U. S.
Dr. Dekalb Co.
No. 1906

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,
Dekalb COUNTY.

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

1. What is your name and where do you reside? (give State, County and post-office)
J. F. Laing, County of Dekalb State of Georgia
2. How long and since when have you been a resident of this State?
50 years
3. When and where were you born? Gadston County S. C. 44
4. When and where and in what company and regiment did you enlist or serve? 1863 - Newport
5th Company "C" 5 S. C. Bat of Col Gist
Scott C.
5. How long did you remain in such company and regiment? 2 yrs.
6. When and where was your company and regiment surrendered and discharged?
May 186[illegible] at [illegible]
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 sick
9. How much can you earn (gross) per annum by your own exertions or labor? Precarious
10. What has been your occupation since 1865? Farming
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? second
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? Suffer from heart trouble & general debility - result of wounds renders me totally unable to make a support
13. What property, real and personal, or income, do you possess, and its gross value? None
14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? 50 to 60 acres of land I was in possession of 6 or 7 years but sold and was bro't by process of law & the proceeds applied to debts
15. In what County did you reside during those years, and what property did you then return for taxation?
Butts Co. Ga, Returned to Tax
16. How were you supported during the years 1899, 1900, 1901 and 1902?
From income as last above refer'd to.
17. How much did your support cost for each of those years, and what person did you contribute thereto by your own labor or income? Can't say as to cost Live from proc. of land
18. What was your employment during 1899, 1900, 1901 and 1902? What pay did you receive in each year?
Farming Received no pay
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? Yes have family Wife and [illegible] daughters. 2 are supported by their own labor & no homestead & small amt of personal property they have different employments
20. Are you receiving any pension? If so, what amount and for what disability?
Not receiving any
21. Have you ever made an application for pension before? Have not
22. How many applications have you ever made and under what class?
Have [illegible]

Every Question MUST be Answered.

Sworn to and subscribed before me this the 7th day of Sept 1903.
James R. George Ordinary,
of _____ County.

J. F. Laing
Applicant.

23-26-28

Saving $ 2.50
Fee Paid G.
No. 1936
Pension Order No. 1936

INDIGENT PENSION.
1903.

Name of Applicant J. F. Laing
County Pickens
Co. P. O. Jasper
Reg. No.
Approved 1903

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, Bible Printer, Atlanta.

Every Question Must Be Answered.

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"? Second
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? Suffer from heart trouble & general debility, & - effects of wine, renders me totally unable to make a support
13. What property, real and personal, or income, do you possess, and its gross value? None
14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? $60 00 one year's in possession 64 acres land and was sold by process of law and proceeds appropriated for debt
15. In what County did you reside during those years, and what property did you then return for taxation? Butts Co. Ga, Returned to Tax
16. How were you supported during the years 1899, 1900, 1901 and 1902? From income as last above refer'd to.
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? Can't say as to cost. Lived from produce raised on farm
18. What was your employment during 1898, 1899, 1901 and 1902? What pay did you receive in each year? Farming. Received no pay
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 have family Wife and two daughters. 22 years supported by their own labor & not homestead. have small amt of stock
20. Are you receiving any pension? If so, what amount and for what disability? Not receiving any
21. Have you ever made an application for pension before? Have not
22. How many applications have you ever made and under what class? Have made none

Sworn to and subscribed before me this the 7th day of Sept 1904
James R. George Ordinary,
of ____ County.

J F Laing Applicant.

QUESTIONS FOR WITNESS.

STATE OF ~~GEORGIA~~, Florida
Gadsden COUNTY.

W. E. Laing of said State and County, having been presented as a witness in support of the application of Theodore F. Laing 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. E. Laing, Gadsden County Florida
2. Are you acquainted with Theodore F. Laing, the applicant; if so, how long have you known him? Yes, since Child
3. Where does he reside, and how long and since when has he been a resident of this State? Northwest, near Adaula Ga about 30 yrs in Georgia
4. When, where and in what company and regiment did he enlist, and how do you know? 1863 I was in the C.S.A. in Co. H 5th Ga Regt Gen Wall Com, I was a member of the Brown the enlisted.
5. Were you a member of the same company and regiment? Yes
6. How long did he perform regular military duty? About 2 yrs
7. When and where was his command surrendered? About first of May 1865 at [illegible] Ala
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? At surrender For what cause? ____ By what authority he left? ____ How do you know all of this? I was [illegible] and associated with him
11. What property, effects or income has the applicant? (Give your means of knowledge.)
12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same?
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom?
14. What is the applicant's occupation and physical condition?
15. Is the applicant unable to support himself by labor of any sort, if so, why?
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902?
17. What portion of his support for these four years was derived from his own labor or income?
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code?
19. Who composes family? What property have they? Children's age and their earning capacity?
20. What interest have you in the recovery of a pension by this applicant?

Sworn to and subscribed before me, this the 20th day of August 1904
James R Thomson Ordinary.
County Judge
Gadsden County Fla

W. E. Laing Witness.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
____ COUNTY.

Personally came before me H. H. Houston M.D. and W. S. Manly, 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:

Organic Heart trouble (valvular) Right Inguinal Hernia Enlarged prostate gland Chronic Cystitis Totally unfit him to do a living,

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

Sworn to and subscribed before me, this the 7th day of Sept 1904
James R George Ordinary.

W. S. Manly M.D.
H. H. Houston M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
DeKalb COUNTY.

I, James R George Ordinary, in and for said County, hereby certify that the applicant T. F. Laing resides in said County, and has been a bona fide resident of this State since the 23 day of March 1870 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 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 DeKalb County show that applicant returned for taxation in his name in 1899 ____ Dollars of property, and in 1900 ____ Dollars of property, in 1901 ____ Dollars of property, in 1902 ____ Dollars of property.

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

Witness my hand and seal of office, this 7th day of Sept 1904
James R George Ordinary,
of DeKalb 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.

By what authority he left? ____ How do you know all of this?

I was present and supplied with him

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

12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same?

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

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

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

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

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

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

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

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

Sworn to and subscribed before me, this the 20th day of August 1904

Justus Thomson ~~Ordinary~~ county Judge Jackson County Ala

W. E. Lasley Witness.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
DeKalb County.

I, James Ryburn Ordinary, in and for said County, hereby certify that the applicant T R Laing resides in said County, and has been a bona fide resident of this State since the 23 day of March 1870 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 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 DeKalb County show that applicant returned for taxation in his name in 1899 [illegible] Dollars of property, and in 1900 Dollars of property, in 1901 Dollars of property, in 1902 Dollars of property.

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

Witness my hand and seal of office, this 7th day of Sept 1904

James Ryburn Ordinary,
of DeKalb 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,
Butts County.

W. W. Mills of said State and County, having been presented as a witness in support of the application of J. J. Laing 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. W. Mills
near Whitestone Ga
2. Are you acquainted with J. J. Laing, the applicant; if so, how long have you known him? For 25 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.)
Not any that I am interested in or that is subject under such
12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same? He owned real estate in Butts Co. Ga. he is now living on said real estate in Butts Co. Ga.
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 am aware of. Sold 20 acres to W. Ventile Co near
14. What is the applicant's occupation and physical condition? Has no special occupation. He suffers from Heart trouble and is old
15. Is the applicant unable to support himself by labor of any sort, if so, why? Yes
From age and feeble health.
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? By income from said real estate in Butts Co at that time
17. What portion of his support for these four years was derived from his own labor or income?
Support was derived from income of property the same having
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? Heart trouble which enabled the
Applicant unable to make a support
19. Who composes family? What property have they? Children's age and their earning capacity?
Wife and three daughters. Have no property. 22 - 26 - 28 Yrs
They are supported by their own labor.
20. What interest have you in the recovery of a pension by this applicant? Not any

Sworn to and subscribed before me, this the 25 day of August 1904

J. N. Woods Ordinary.

W. W. Mills Witness.

Butts County.

I, J H Hand Ordinary, in and for said County, hereby certify that the applicant J. J. Laing family resided in said County, and has been a bona fide resident of this State since the day of 189 0 and that the witnesses, viz.: W. W. Mills and J. H. Wright

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 X County show that applicant returned for taxation in his name in 1899 X Dollars of property, and in 1900 X Dollars of property, in 1901 X Dollars of property, in 1902 X Dollars of property.

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

Witness my hand and seal of office, this 25 day of August 1904

J H Hand Ordinary,
of Butts 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.

11. What property, effects or income has the applicant? (Give your means of knowledge.)
Not any. Interested party in life under which
12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same? He owned real estate to Stock
in Butts Co. Income having been sold under process of law
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom?
Not except as above stated. Acted as Mercantile Co was
14. What is the applicant's occupation and physical condition? Has no special occupation
He suffers from Heart Trouble and Asthma
15. Is the applicant unable to support himself by labor of any sort, if so, why? Yes
From age and Heart Trouble
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? By income
from said real estate in said Butts Co at that time
17. What portion of his support for these four years was derived from his own labor or income?
Support was derived from income of property the same having
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? Heart Trouble which enabled the
applicant unable to make a support.
19. Who composes family? What property have they? Children's age and their earning capacity?
Wife and three daughters. Have no property. 22 -
26 #28 Dollars are supported by their own labor.
20. What interest have you in the recovery of a pension by this applicant? Not any

Sworn to and subscribed before me, this the 25 day of August 1904

W M Mills
Witness.

J. H. Ivey
Ordinary.

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

Witness my hand and seal of office, this 25 day of August 1904

J. H. Ivey
Ordinary.

of Butts 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,
Fulton COUNTY.

I, T. F. Ivey hereby authorize
Mrs. M. E. Ivey of Kirkwood
to receive and receipt for the pension allowed, and request that he remit same to
W. T. Ivey at Kirkwood
by

WITNESS my hand and seal, this 6 day of January 1906.

T. F. Ivey [L. S.]

Executed in the presence of
James R. George
Witness

T. F. Ivey
Co. Fulton Regiment Ga Vol
(FOR THOSE ALREADY ENROLLED)
Under Section 1254
No. 6 48

INDIGENT
SOLDIER'S PENSION
1906.

Name T. F. Ivey
County Fulton
Co. I 12th Regiment Ga Vol

WARRANT ISSUED
1-2 1906.
JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
T. F. Ivey

T. F. Laing
Dekalb Co.

Cross Section 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 56

INDIGENT
SOLDIER'S PENSION
1906.

Name T. F. Laing
County DeKalb
Co. 13th Regiment 5th Ga

WARRANT ISSUED
1-22 1906.
JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
T. F. Laing

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
DeKalb **County.**

Personally appears T. F. Laing of DeKalb 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 28 day of Oct 1845; that he is 61 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 5th Regiment of Georgia State; that his physical condition is as follows: Crippled up & 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 DeKalb County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the 6 day of January 1906.
James R George Ordinary.

T. F. Laing.

State of Georgia,
DeKalb **County.**

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

Given under my official signature and seal, this 6 day of January 1906.

James R George
Ordinary DeKalb County.

Affix your seal here.

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

of [illegible]; that his physical condition is as follows: Impaired by paralysis

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 [illegible] County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the 6 day of January 1906. } T. F. Laing.

James R George Ordinary.

State of Georgia,
[illegible] **County.**

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

Given under my official signature and seal, this 6 day of January 1906.

James R George
Ordinary [illegible] County.

Affix your seal here

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

GEORGIA

THE ORDINARY
[illegible] COUNTY

J. H. HAM, ORDINARY

JACKSON, GA., _____ 190

Georgia, Butts County.

Personally appeared J. P. Wright, President of the Jackson Mercantile Co. who being duly sworn says on oath that he as president of the Jackson Mercantile Co, received all of the proceeds of the sale of Georgia to T F Laing, said sale being and there in the County of Butts and that the said firm of Jackson Mercantile Co. had said goods sold under process of law as creditors. The same having been purchased by said Jackson Mercantile Co., and said company received all of proceeds except $93 to pay the indebtedness of the said T F Laing.

Sworn to and subscribed before me this August 25 1904

J. H. Ham, Ordinary } J. P. Wright—Pres Jackson Mercantile Co

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ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Georgia Butts County

In person came before the undersigned, a regularly qualified Notary Public in and for said County and State, the within named Jackson Mercantile Co. a corporation chartered under the laws of the State of Georgia, and made oath that the statements set forth in the foregoing affidavit are true, and that the said Jackson Mercantile Co. is a bona fide creditor of the said T F Laing, and that the said T F Laing is indebted to the said Jackson Mercantile Co. in the sum of [illegible] Dollars, and that the said Jackson Mercantile Co. has received the proceeds of the sale of the property described in the foregoing affidavit, and that the said T F Laing has not received the proceeds of said sale, but that the said Jackson Mercantile Co. has received the same, and that the said T F Laing is entitled to the benefits of the Act of the General Assembly of Georgia approved December 15th, 1894, and the Acts amendatory thereof

proceeds of the land belonging to T F Laing, said land being and lying in the County of Butts and that the said firm of Jackson Mercantile Co., had said lands sold under process of law as creditors. The same having been purchased by said Jackson Mercantile Co., and said company received all of proceeds except $93 to pay the indebtedness of the said T F Laing

Sworn to and subscribed before me this August 25 1904.

J. H. Ham, Ordinary

R. Wright-Pres Jackson Mercantile Co

J. H. Ham Ordinary

Georgia
DeKalb County } Personally came T. F. Laing who on oath says that he was a member of the 5th Fla Bat Company C Col Geo W Scott Command Colonel of said Bat was in the Confederate Army and was not in State Militia and by infirmity is such as I cannot earn a support at any kind of labor

Sworn to and subscribed before me Dec 19th 1904

James R George Ordinary

T F Laing

Georgia DeKalb Co

Personally came before me W. H. Hamilton & W. Hamby who on oath say that the information set forth in his application totally unfits him to earn a support by any kind of labor

Wiley S. Cumby mhs

Sworn to and subscribed before Dec 19th 1904

James R George Ordinary

NAME Laing, T.F. YEAR 1906 COUNTY DeKalb

WHEN AND WHERE BORN? Oct. 3rd, 1844, Gadston County, Florida

ENLISTED WHEN AND WHERE? 1863, Newport, Florida

NAME.

COMPANY AND REGIMENT? Co. C. 5th, Fla. Bat. of Calvary.

(Geo. W. Scott,)

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

DESERTED, WHEN AND WHERE?

RELEASED.

WHEN AT [illegible] May 1865, Tallahassee, Florida.

IF NOT RELEASED, WHERE AND WHEN?

DIED, WHEN AND WHERE?

REMARKS.

WITNESSES. W.E. Laing,-Same Command- No data mh.

was a member of the 5th Fla Inf
Company C Col Geo W Scott Commanding
Colonel of said Bat was in the
Confederate Army and was not in
State Militia and my infirmity
is such as I cannot earn a support
at any kind of labor
Sworn to and subscribed
before me Dec 19th 1904
James R George
Ordinary

J A Laing

Georgia DeKalb Co
Personally came before me
W H Houston & W Edwards who on
oath say that the infirmities set
forth in his application totally unfit
him to earn a support by any kind
of labor

Thos S. Cowley Notary

Sworn to and subscribed
before Dec 19th 1904
James R George
Ordinary

WHEN AND WHERE BORN? Oct. 3rd, 1844, Gedston County, Florida

ENLISTED WHEN AND WHERE? 1863, Newport, Florida

RANK.

COMPANY AND REGIMENT? Co. C. 5th, Fla. Bet. of Calvary.

(Geo. W. Scott,)
NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED.

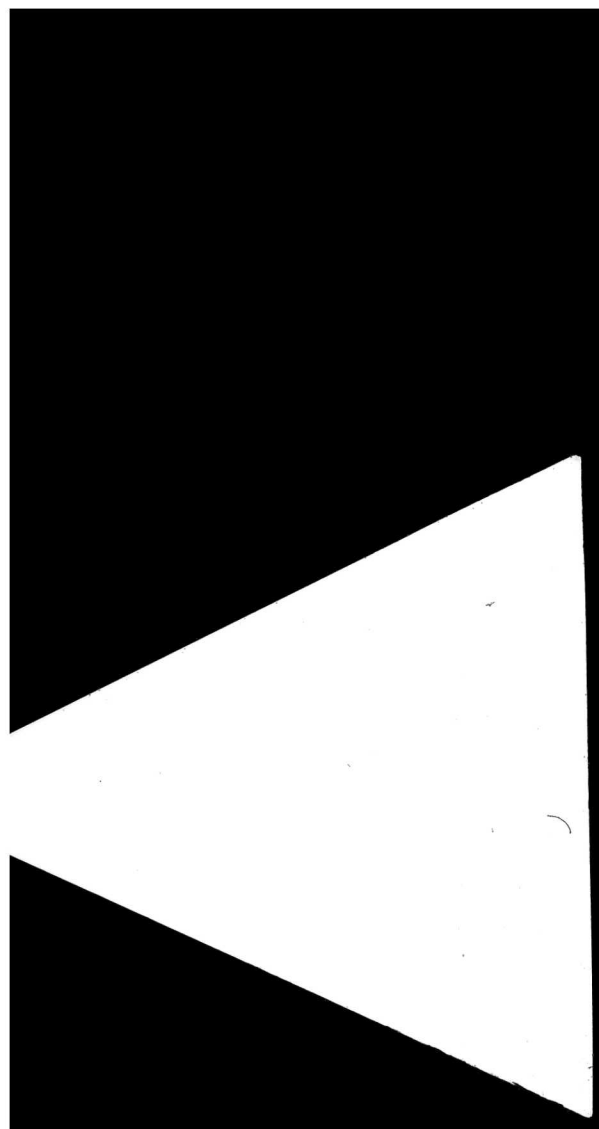
WHEN AND WHERE PAROLED? May 1865, Tallahassee, Florida.

IF NOT IN [illegible] GIVE WHERE AND WHEN

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. W.E. Laing,-Same Command- No data
mh.



La Grange Ga. Aug 21st 1926
Approved
Troup County

Widow's Application

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

County De Kalb
Name Martha Caldwell
Widow of John Caldwell
Date of Marriage Dec 7, 1876
Company A
Regiment 2nd Ga Vol Inf
Approved 22 July 27

JOHN W. CLARK,
Commissioner of Pensions.

7-22-27 G.

Ordinary's Certificate.

STATE OF GEORGIA,
Newton COUNTY.

I, G. L. Loyd, Ordinary of said County, do certify that I know Mrs Martha Caldwell 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 Martha J. Dobbs 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 17 day of July 1927.

(SEAL OF ORDINARY) G. L. Loyd, Ordinary.
of Newton 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, 1861, are entitled.
4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Fill out the back of the application carefully.
7. Don't use the bulky form of Marriage Certificate in vogue throughout the States. A short, simple form is easier to handle.

Regiment

Approved John W. Clark
22 July 27

JOHN W. CLARK.
Commissioner of Pensions.

7-22-276.

ary's Certificate.

COUNTY.

Ordinary of said County, do certify
Lallerstedt the applicant for pension; that
d that she has been, continuously, a bona fide resident citizen
also know Mrs Martha J. Dobbs
and; that both of them are now residents of said County and
egoing affidavits, and that they are truthful and trustworthy
nd credit.

ffice this 17 day of July 192 7

Clerk Ord.
of Newton County

Instructions:
linary shall swear applicant and the witness in the following words:
help you God."
ll the spaces are insufficient.
ary of the County in which the applicant or witness resides and must

If obtainable. If not, prove marriage, by some person, or by general
le; A short, simple form is easier
ficate in vogue throughout the State.

1927
Approved
7-22-276.

Widow's Application

Under Act of 1910, As Amended by Act of 1919, and Constitutional Amendment of 1920.

County De Kalb Ga
Name Martha A. Lallerstedt
Widow of Thos A. Lallerstedt
Date of Marriage Dec 7, 1876
Company A 22nd Ga Vol Inf
Regiment 22nd Ga Vol Inf
Approved John W. Clark
22 July 27

JOHN W. CLARK.
Commissioner of Pensions.

7-22-276.

Ordinary's Certificate.

STATE OF GEORGIA,
Newton COUNTY.

I, G. L. Layfield, Ordinary of said County, do certify that I know Mrs Martha A. Lallerstedt 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 Martha J. Dobbs 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 17 day of July 1927.

(SEAL OF ORDINARY) G. L. Layfield, Ordinary.
of Newton 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, 1861, are entitled.
4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Fill out the back of the application carefully.
7. Don't use the bulky form of **Marriage Certificate** in vogue throughout the State. A short, simple form is **easier** to handle.

APPLICATION FOR PENSION BY A WIDOW

Under Act of 1910, as Amended by Act of 1919, and Constitutional Amendment of 1920

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,
Newton COUNTY, Dekalb

Personally appears before me, Martha A. Lallerstedt a citizen of said State and County and hereby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendment of 1920, and submits testimony to support the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to wit:

1. What is your name, and where do you reside? (Give Post Office and County)
Martha A. Lallerstedt, Decatur Ga R.F.D. 6 Dekalb Co
2. How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? All my life
3. When, where and to whom were you married? Dec 7th 1876.
De Kalb Co. Ga. Thomas A. Lallerstedt
a. Have you married since the death of first and soldier husband? No
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service, and give name of Colonel and Captain.)
Co A 22nd Ga Reg. Enlisted in 1861 Infantry, Jones Co 5th Ga Reg S.C. Hess Lieut. 1862
5. When and where did the commands of your husband surrender or discharge from the Service?
Dont Know
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? ✓
a For what cause did he leave? ✓
b. By whose authority did he leave? ✓
c. For how long was his leave of absence granted? ✓ In what way?
Husband served throughout the war.
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? not that I know of
i. If so, when and where? In what prison was he held and when was he released? Dont know
j. When and where did your first husband die? Aug 7th 1892 in De Kalb Co Ga
k. Were you residing together when he died? Yes
l. If not, how long had you resided apart? ✓
m. Are you now a widow? Yes
9. Have you or your husband heretofore been paid a pension by the State? No
If so, when and for what cause were you or your husband placed on the roll? ✓

Sworn to and subscribed before me, this the
17 day of July 1927.
G. L. Layfield, Ordinary
of Newton County.
(SEAL OF ORDINARY)

Martha A. Lallerstedt
Applicant.

Ordinary's Certificate.

STATE OF GEORGIA.

Newton COUNTY.

I, G. L. Layfield, Ordinary of said County, do certify that I know Mrs. Martha G. Lallerstedt 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. Martha J. Dobbs 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 17 day of July 1927.

(SEAL OF ORDINARY) G. L. Layfield, Ordinary.

of Newton County

Instructions:

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the whole truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Fill out the back of the application carefully.
7. Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.

5. When and where did the commands of your husband surrender or discharge from the service? Don't Know

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? ✓

a. For what cause did he leave? ✓

b. By whose authority did he leave? ✓

c. For how long was his leave of absence granted? ✓ In what way? Husband served throughout the war.

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? Not that I know of

i. If so, when and where? In what prison was he held and when was he released? Don't know

j. When and where did your first husband die? Aug 7, 1892 in De Kalb Co Ga

k. Were you residing together when he died? 8 yrs

l. If not, how long had you resided apart? ✓

m. Are you now a widow? Yes

9. Have you or your husband heretofore been paid a pension by the State? No

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

Sworn to and subscribed before me, this the 19 day of July 1927.

G. L. Layfield, Ordinary

of Newton County

(SEAL OF ORDINARY)

Martha G. Lallerstedt
Applicant.

Questions for Witness as to Service of Husband and Marriage

STATE OF GEORGIA Newton COUNTY.

Mrs. Martha J. Dobbs of said State and County is hereby presented as a witness in support of the application of Martha G. Lallerstedt for the pension provided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendment of 1920, in said State, who, after being sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? Martha J. Dobbs Union, Newton Co. Ga

2. How long and since when have you known Martha G. Lallerstedt applicant Over 60 years

3. Where does she now reside, and since when has she been, continuously, a bona fide resident citizen of this State? Decatur Ga. Resident of Ga. all her life

4. When and to whom was she married? Mrs 15 16 Thos L. Lallerstedt (How do you know?)

5. How long and since when did you know Thos L. Lallerstedt her husband? since 1874

6. When and where did Thos L. Lallerstedt the husband of applicant, die? Aug 7 1892 in De Kalb 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? ✓

Were they divorced? ✓

9. When, where and in what Company and Regiment did Thos L. Lallerstedt enlist? (Give date and place) In 1861 Co. A 22nd Ga Reg. Vol. Infantry

10. How did you obtain your information of this service? What I have heard him say.

11. How long within your personal knowledge did he perform actual military service with this Company and Regiment? (Give dates.) None no personal knowledge

12. When and where was his Command surrendered or discharged? (Give date and place) Don't know

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? Do not know

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) I only know what I have heard him say about his service. I personally know of the marriage

15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command? I think he came home the surrender

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 July 1927.

G. L. Layfield, Ordinary

of Newton County

(SEAL OF ORDINARY)

Martha J. her X Dobbs
(Witness)
Mark

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 Theron L. Lallerstedt enlist? (Give date and place) In 1861 Co. A 22nd Ga. Reg. Vol. Infantry

10. How did you obtain your information of this service? What I have been told by my husband

11. How long within your personal knowledge did he perform actual military service with this Company and Regiment? (Give dates.) Have no personal knowledge

12. When and where was his Command surrendered or discharged? (Give date and place) Don't know

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? Do not know
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.) I only know what I have heard him say about his service. I personally know of the marriage

15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command? I think he served until the surrender

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 July, 1927.
V. A. Morgan, Ordinary
of Hartwell County.
(SEAL OF ORDINARY)

Martha J. Lallerstedt (her X mark)
(Witness)
Mar 18

FILED
JAN 10 1934
VEL. [illegible]

Received of V. A. Morgan, Ordy check for $127.00 for funeral bill opened Mrs. Martha A. Lallerstedt
1/11/34

FEB 1 1934
TELMA SMITH, CLERK
A. L. HENSON, Director

TO PAY-
1930. $127
City & C. Taxes
TOTAL

LALLERSTEDT, MARTHA A. (Mrs.)
E/ DeKalb CO. 298

For DeKalb County

Application for Expenses of Last Illness and Funeral

(UNDER ACT OF 1919)

V. S. Morgan, Ordinary

For: Mrs Martha A. Lallerstedt
(Name of Pensioner)

Date of Death: November 24, 1933

Amount: $ ~~109.00~~ 127.00

DATE PAID	FUND FROM WHICH PAID	$
1934		
4-24	Cr C	45.00
1-25-35	1930	127.00
8-3-36	Cr C	10.00
		182.00
	TOTAL	477.00

Approved, and ordered paid,
[illegible], 1934
A. L. HENSON,
Director, Veterans Service Office.

Received of V. A. Morgan Ord. check for $127.00 as per within account 1-11-34
[illegible] by Mary J. Hinton

A. S. Turner
Funeral Director and Embalmer
Prompt Ambulance Service
Decatur, Georgia

NIGHT AND SUNDAY PHONE DE. 0088
928-37 N. McDONOUGH ST
PHONE DE. 0088

December 12, 1933.

Funeral Expenses of Mrs Martha Adeline Lallerstedt,
705 Covington Rd, Decatur, Georgia.

November [illegible], 1933.

To Casket	195 00
Embalming	30 00
Dress	9 00
1 Funeral Notice	4 00
Steel Vault	70 00
Hearse & auto and Service for Burial	10 00
	$298 00

State of DeKalb County,
I do hereby certify that the above and foregoing account is a true and correct statement of the funeral expenses of Mrs Martha Adeline Lallerstedt, who died without having sufficient property to pay this bill.
Sworn to and subscribed before me, this December 1st, 1933.

A. S. Turner

A CERTIFICATE

STATE OF GEORGIA, County of DeKalb.

In Re: Expenses last illness and funeral, Mrs. Martha A. Lallerstedt

This is to certify that from an examination of the records in my office, and from personal knowledge, or inquiry, it is ascertained that this pensioner:

1. Died inside of the State of Georgia;

2. Left no estate of any kind or value, sufficient to pay these expenses.

This the 10 day of Jan, 1934.

(SEAL) V. A. Morgan Ordinary

FEB
VETERAN SERVICE OFFICE
A. L. HENSON, Director

TO PAY-
1930. $127
Cig. & C. Tax. 3
TOTAL.

298
17
146

Approved, and ordered paid,
Apr 13, 1934
A. L. HENSON,
Director, Veterans Service Office.
Received of V. S. Morgan Ord
check for $127 as per within
acct. 4/26/34
C. Travis by Notary of Director

A CERTIFICATE

STATE OF GEORGIA, County of DeKalb.

In Re: Expenses last illness and funeral Mrs. Martha A. Lallerstedt

This is to cerfify that from an examination of the records in my office, and from personal knowledge, or inquiry, it is ascertained that this pensioner:

1. Died inside of the State of Georgia;
2. Left no estate of any kind or value, sufficient to pay these expenses.

This the 10 day of Jan, 1934.

V. S. Morgan Ordinary

(SEAL)

Georgia, DeKalb County,

I do hereby certify that the above and foregoing account is rendered for the funeral expenses of the Martha Adeline Lallerstedt, who died without owning sufficient property to pay this bill.

Sworn to and subscribed before me, this is December 12th, 1933.

A S Turner

State of Georgia
Pension Department
Atlanta

JOHN W. CLARK
COMMISSIONER OF PENSIONS

July 19, 1927.

Hon. V. S. Morgan,
Ordinary of DeKalb County,
Decatur, Ga.

My dear Judge:

In response to your request of this morning, I find the record of Mr. Lasserstedt as follows:

Thomas L. Lallerstedt, Co. A. 32nd. Regt. Ga.Inf. 1st. Sergt. Aug. 31, 1861

Transferred to Co. G. 1st. S. C. Heavy Artillery 1862.
To Co. ____ 2nd. Regt. S. C. Heavy Artillery.
Roll dated December 31, 1864, last on file, shows him present.

(Washington Record)

With kind regards,

Very truly yours,
John W. Clark
Commissioner of Pensions

A

Received of V. S. Morgan, Ordinary, DeKalb County, Georgia, Ninety and no/100 ($90.00) Dollars in full settlement for funeral expenses of Mrs. Martha A. Lallerstedt, deceased.

This 11 day of September, 1936.

A S Turner

Application for Payment of Expenses of Last Illness and Funeral

(Under Act of 1919)
(To be disbursed by the Ordinary)

GEORGIA, DeKalb County:

Before me, the Ordinary of said County, comes A. S. Turner, of said County, who, after being duly sworn, on oath says that he knew Mrs. Martha A. Lallerstedt late of said County, a Confederate pensioner, and that said person is the identical person named and described in the attached certified copy of burial certificate; and that said pensioner 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 $ 298.00, as shown by sworn statements FULLY and COMPLETELY ITEMIZED, hereto attached.

Sworn to and subscribed before me, this the 12 day of December, 1933.
V. S. Morgan Ordinary.

A S Turner

CERTIFICATE OF THE ORDINARY

GEORGIA, DeKalb County.

I certify that A. S. Turner who subscibed 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. Martha A. Lallerstedt the deceased pensioner referred to in the foregoing affidavit and that said deceased was at the time of death regularly enrolled as a pensioner on the records of file in my office. I further certify that said deceased pensioner is the identical person named and described in the attached certified copy of burial certificate, was not survived by a widow and left no estate of any kind sufficient to pay the expenses of last illness and burial for which claim is made.

Given under my hand and seal of office, this the 12 day of December, 1933.

(Seal of Ordinary) V. S. Morgan, Ordinary.

INSTRUCTIONS:

1st. Certified copy of Burial Certificate must accompany this application.

2nd. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.

3rd. Each account must be sworn to before the Ordinary, and in the following form:

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

4th. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed and signed as indicated.

5th. The completed voucher—this blank and the bills—must be sent to the Veterans Service Office for approval and no money must be paid out until it is returned to you as your authority to make the payment.

6th. Return this application, and attached bills, properly receipted, to the Veterans Service Office.

7th. Ordinary should see that the back of this blank, when folded, is filled out.

8th. This voucher, if approved, will be sent back to you with the funds with which to pay the approved bills. When you have paid the bills and obtained a receipt for each payment, return the voucher, with bills and receipts, to be permanently filed in the Veterans Service Office.

9th. The State does not authorize the payment of these expenses in the event a soldier pensioner is survived by a widow, nor if the pensioner left any estate of any kind or value sufficient to pay them, nor if the pensioner had been outside of the State of Georgia for more than twelve (12) months immediately preceding date of death.

In response to your request of this morning, I find the record of Mr. Lasserstedt as follows:

Thomas L. Lallerstedt, Co. A. 22nd. Regt. Ga. Inf.
1st. Sergt. Aug. 31, 1861

Transferred to Co. G. 1st. S. C. Heavy Artillery 1862.
To Co. ____ 2nd. Regt. S. C. Heavy Artillery.
Roll dated December 31, 1864, last on file, shows him present.

(Washington Record)

With kind regards,

Very truly yours,

John W. Clark
Commissioner of Pensions

A

Received of V. S. Morgan, Ordinary, DeKalb County, Georgia, Ninety and no/100 ($90.00) Dollars in full settlement for funeral expenses of Mrs. Martha A. Lallerstedt, deceased.

This 11 day of September, 1936.

A S Turner

to the sum of $ 298.00, as shown by sworn statements FULLY and COMPLETELY ITEMIZED, hereto attached.

Sworn to and subscribed before me,
this the 12 day of December, 1936.
V. A. Morgan Ordinary.

A S Turner

CERTIFICATE OF THE ORDINARY

GEORGIA, DeKalb County.

I certify that A. S. Turner who subscibed 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. Martha A. Lallerstedt the deceased pensioner referred to in the foregoing affidavit and that said deceased was at the time of death regularly enrolled as a pensioner on the records of file in my office. I further certify that said deceased pensioner is the identical person named and described in the attached certified copy of burial certificate, was not survived by a widow and left no estate of any kind sufficient to pay the expenses of last illness and burial for which claim is made.

Given under my hand and seal of office, this the 12 day of December, 1936.

(Seal of Ordinary) V. A. Morgan, Ordinary.

INSTRUCTIONS:

1st. Certified copy of Burial Certificate must accompany this application.

2nd. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving **each item and the value of it, and each date.**

3rd. Each account must be sworn to before the Ordinary, and in the following form:

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

4th. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed and signed as indicated.

5th. The completed voucher—this blank and the bills—must be sent to the Veterans Service Office for approval and no money must be paid out until it is returned to you as your authority to make the payment.

6th. Return this application, and attached bills, properly receipted, to the Veterans Service Office.

7th. Ordinary should see that the back of this blank, when folded, is filled out.

8th. This voucher, if approved, will be sent back to you with the funds with which to pay the approved bills. When you have paid the bills and obtained a receipt for each payment, return the voucher, with bills and receipts, to be permanently filed in the Veterans Service Office.

9th. The State does not authorize the payment of these expenses in the event a soldier pensioner is survived by a widow, nor if the pensioner left any estate of any kind or value sufficient to pay them, nor if the pensioner had been outside of the State of Georgia for more than twelve (12) months immediately preceding date of death.

MARRIAGE LICENSE.

State of Georgia, DeKalb 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, T. L. Lallerstedt and Martha Dobbs, 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 7 day of Dec. 1876.

John B. Steward (SEAL)
Ordinary.

I hereby certify, That T. L. Lallerstedt and Martha Dobbs were joined together in the HOLY BANS OF MATRIMONY, on the 7 day of Dec. 1876, by me.

Wm. G. Staples, J. P.

Georgia, DeKalb County.

I, E. H. Mason, Clerk of the Court of Ordinary in and for said County, do hereby certify that I have compared the above and foregoing copy of Marriage License and Certificate of Marriage of T. L. Lallerstedt and Martha Dobbs, 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, and that said court is a court of record.

In Testimony Whereof, I have hereunto set my hand and affixed the Seal of said Court at Decatur, Georgia, this the 22nd day of July, 1927.

E H Mason
Clerk Court Ordinary, DeKalb County, Georgia.

Georgia Soldier Roster Commission

303 State Capitol

COMMISSION:
CLIFFORD WALKER, *Governor*
JOHN W. CLARK, *Commissioner of Pensions*
CHARLES H. COX, *Adjutant General*

LILLIAN HENDERSON, *Acting Superintendent*

ATLANTA, GA., July 11, 1927.

Hon. T. L. Loyd,
Covington, Ga.,
Dear Sir:

The rolls of Co. A, 22d Regt. Ga. Vol. Infantry show that Thomas L. Lallerstedt was appointed 1st Sergeant at organization of company Aug. 31, 1861. Transferred to Co. G, 1st Regt. South Carolina Heavy Artillery 1862; to Co. - 2d Regt. South Carolina Heavy Artillery, date not stated. Roll dated Dec. 31, 1864, last on file, shows him present. No later record found. We believe you will be able to perfect Mrs. Lallerstedt's application for a pension with this information. If we can be of further assistance to you, call on us.

Very truly yours,
GEORGIA SOLDIER ROSTER COMMISSION,
By Lillian Henderson
Acting Superintendent.

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 7 day of Dec. 1876.

John B. Steward (SEAL)
Ordinary.

I hereby certify, That T. L. Lallerstedt and Martha Dobbs were joined together in the HOLY BANS OF MATRIMONY, on the 7 day of Dec. 1876, by me.

Wm. G. Staples, J. P.

Georgia, DeKalb County.

I, E. H. Mason, Clerk of the Court of Ordinary in and for said County, do hereby certify that I have compared the above and foregoing copy of Marriage License and Certificate of Marriage of T. L. Lallerstedt and Martha Dobbs, 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, and that said court is a court of record.

In Testimony Whereof, I have hereunto set my hand and affixed the Seal of said Court at Decatur, Georgia, this the 22nd day of July, 1927.

E H Mason
Clerk Court Ordinary, DeKalb County, Georgia.

Hon. T. L. Loyd,
Covington, Ga.,
Dear Sir:

The rolls of Co. A, 22d Regt. Ga. Vol. Infantry show that Thomas L. Lallerstedt was appointed 1st Sergeant at organization of company Aug. 31, 1861. Transferred to Co. G, 1st Regt. South Carolina Heavy Artillery 1862; to Co. - 2d Regt. South Carolina Heavy Artillery, date not stated. Roll dated Dec. 31, 1864, last on file, shows him present. No later record found. We believe you will be able to perfect Mrs. Lallerstedt's application for a pension with this information. If we can be of further assistance to you, call on us.

Very truly yours,
GEORGIA SOLDIER ROSTER COMMISSION,
By Lillian Henderson
Acting Superintendent.

187

COPY OF CERTIFICATE OF DEATH 25571
GEORGIA DEPARTMENT OF PUBLIC HEALTH
Bureau of Vital Statistics

Registered No. 441

1. PLACE OF DEATH
County DeKalb Militia District (Number and Name) 531 State of Georgia
City or Town Length of residence in the city or town Yrs. Mos. Ds. NON-RESIDENT (Yes or No)
Street and Number (No.) (Street) Ward
(If death occurred in a hospital, give its name instead of street and number)

2. FULL NAME MARTHA ADELINE LALLERSTEDT
Place (City or Town) Decatur (Street and Number) 792 Covington Rd. (Street) Georgia

PERSONAL AND STATISTICAL PARTICULARS

3. SEX Female 4. COLOR or RACE White 5. Single, Married, Widowed, Divorced (write the word) Widowed

6. DATE OF BIRTH (month, day, year) August 4, 1843

7. AGE Years 90 Months 3 Days 19 If less than one day Hours Minutes

8. OCCUPATION (a) Trade, profession or particular kind of work done, as spinner, lawyer, bookkeeper, etc. None
(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) (d) Total years spent in this occupation

9. BIRTHPLACE (City or County) Georgia

10. FATHER'S NAME Nelson Dobbs
BIRTHPLACE (City or County) S. C.

11. MOTHER'S MAIDEN NAME Sarah Buckelon
BIRTHPLACE (City or County) S. C.

12. INFORMANT (Signed) L. M. Lallerstedt
(Address) 792 Covington Rd. Decatur, Ga.

13. BURIAL PLACE (Cemetery) Wesley Chapel Cemetery
(Post office) DeKalb Cy. Ga. Date Nov. 25, 1933

20. UNDERTAKER (Signed) A. S. Turner
(Address) Decatur, Georgia.

MEDICAL CERTIFICATE OF DEATH

16. DATE OF DEATH (Month, Day, Year) Nov. 23, 1933 at (Hour) 10:35 P.M.

17. I HEREBY CERTIFY, That I attended the deceased from Nov. 19th 1933 to Nov. 23, 1933

I last saw her alive on Nov. 23, 1933 death is said to have occurred on the date and hour stated above. The principal cause of death and related causes of importance in the order of onset and duration of each:

Arterosolerosis

Other contributory causes of importance:

Paralyces - Exaustion

What test confirmed diagnosis? No (Specify whether Wassermann, microscopic examination, autopsy, or clinical)

If death was due to external causes (violence) fill in also the following:

Was injury an accident, suicide, or homicide? No

Where did injury occur? No (Specify whether in or outside of home, the county, and also the state)

Did injury occur in a home, public place or industry? No

Manner of injury

Nature of injury No

(Signed) C. L. Allgood M.D.
(Address) Scottdale, Ga.

15. FILED Nov. 29, 1933
(Signed) J. R. Evans (Local Registrar)

THIS IS TO CERTIFY: That the certificate attached hereto is a true and correct copy of those items prescribed by the State Statutes, as shown on the original, which has become a perpetual record in the archives of the Georgia Department of Public Health.

Signed [illegible] Director.

Atlanta, Ga. Per Chief, Bureau Vital Statistics

Date January 17, 1934.

County DeKalb Militia District (Number and Name) 531 State of Georgia

City or Town ... Length of residence in this city or town: Yrs. ... Mos. ... Ds. ... NON-RESIDENT (Yes or No) ...

Street and Number (No.) ... (Street) ... Ward ...

(If death occurred in a hospital, give its name instead of street and number)

2. FULL NAME MARTHA ADELINE LALLERSTEDT

Residence (City or Town) Decatur (Street and Number) 792 Covington Rd. (State) Georgia

PERSONAL AND STATISTICAL PARTICULARS

3. SEX: Female

4. COLOR or RACE: White

5. Single, Married, Widowed, Divorced (write the word): Widowed

6. DATE OF BIRTH (month, day, year) August 4, 1843

7. AGE: Years 90 | Months 3 | Days 19 | If less than one day: Hours ... Minutes ...

8. OCCUPATION
(a) Trade, profession or particular kind of work done, as spinner, lawyer, bookkeeper, etc. None
(b) Industry or business in which work was done, as cotton mill, sawmill, bank, etc.
(c) Date leaved last worked at this occupation (month and year)
(d) Total years spent in this occupation

9. BIRTHPLACE (State or Foreign Country) Georgia

10. FATHER
NAME Nelson Dobbs
BIRTHPLACE (City or County) S. C.

11. MOTHER
MAIDEN NAME Sarah Buckelon
BIRTHPLACE (City or County) S. C.

14. INFORMANT (Signed) L. M. Lallerstedt
(Address) 792 Covington Rd. Decatur, Ga.

15. BURIAL PLACE (Cemetery) Wesley Chapel Cemetery
(Incorporated) DeKalb Cy. Ga. Date Nov. 25, 1933

20. UNDERTAKER (Signed) A. S. Turner
(Address) Decatur, Georgia.

MEDICAL CERTIFICATE OF DEATH

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I last saw her alive on Nov. 23, 1933 death is said to have occurred on the date and hour stated above. The principal cause of death and related causes of importance in the order of onset and duration of each:

Arterosclerosis

Other contributory causes of importance:

Paralyces - Exaustion

What test confirmed diagnosis? No (specify whether autopsy, laboratory, or clinical)

If death was due to external causes (violence) fill in also the following:

Was injury an accident, suicide, or homicide? No

Where did injury occur? No (Specify city or town, if outside of limits, the county, and also the state)

Did injury occur in a home, public place or industry? No

Manner of injury ...

Nature of injury No

(Signed) C. L. Allgood M.D.

(Address) Scottdale, Ga.

18 FILED Nov. 29, 1933 19...

(Signed) J. R. Evans (Local Registrar)

THIS IS TO CERTIFY: That the certificate attached hereto is a true and correct copy of those items prescribed by the State Statutes, as shown on the original, which has become a perpetual record in the archives of the Georgia Department of Public Health.

Signed ...
Director

Atlanta, Ga. Per ...
Chief, Bureau Vital Statistics

Date January 17, 1934.

R. Co.
Land Lot
Decatur Co.

INDIGENT PENSION

1899.

Name J. J. Land

County Decatur Ga
North Decatur PO

Approved 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

2/4.99

POWER OF ATTORNEY.

STATE OF GEORGIA.
COUNTY.

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

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

Executed in presence of

_____ (L. S.)

_____

Approved 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

2/4.99

TTORNEY.

of

bereby authorize

st that he remit same to

by

1899.

(L. S.)

POWER OF ATTORNEY.

STATE OF GEORGIA.
COUNTY.

I, , bereby authorize

of

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

at by

Witness my hand and seal this day of 1899.

Executed in presence of

(L. S.)

INDIGENT PENSION
1899.

Name J. J. Land
County Decatur Co Ga
Clerk Superior Ct

1899.

Approved

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

2/4.99

Questions for Applicant.

STATE OF GEORGIA,
Decatur County.

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

1. What is your name and where do you reside? (give State, County and post office.) J. J. Land
Decatur Co Ga, North Bainbridge
2. How long and since when have you been a resident of this State? 10 years
3. When and where were you born? 27 August 1829 Appling Co Ga
4. When and where and in what company and regiment did you enlist or serve?
Enlisted in 64 at Battle Springs Ga
Co F 1st Ga Reg Col Rifles
5. How long did you remain in such company and regiment? from July 1861
to April 9th 1865
6. For how long a period did you discharge regular military duty? Many yrs
7. When, where and under what circumstances were you discharged from service? (If a Substitute, say so.)
On 9th of April 1865 at Appomattox Va at the
Surrender of Genl Lee's Army
8. What is your present occupation? Farmer
9. How much can you earn (gross) per annum by your own exertions or labor? about 300
10. What has been your occupation since 1865? Farming & Merchandising
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"?
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?
Sir I wd. the early Asst General has made
Also was wounded 3 times once in the
Wilderness Campaign Spotsylvania Court House &
Petersburg
13. What property, effects or income do you possess, and its gross value? Nothing

Every Question MUST be Answered.

14. What property, effects or income did you possess in 1894, 1895, 1896, 1897 and 1898, and what disposition, if any, did you make of same? Nothing Dead broke
In Bankruptcy
15. In what County did you reside during those years, and what property did you then return for taxation?
Decatur Co Ga. Nothing
16. How were you supported during the years 1897 and 1898? By my family
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? about $ are Rendered Dollars Nothing
18. What was your employment during 1897 and 1898? What pay did you receive in each year?
Buying & Selling Nothing
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead?
Self, Wife and Small Child
Nothing their own work no

20. Are you receiving any pension? If so, what amount, and for what disability?
Nothing

Sworn to and subscribed before me this the 9 day of Feb, 1899.
Wm Ragsdale Ordinary,
of Decatur County.

J. J. Land Applicant.

INDIGENT PENSION

1899.

Name J. J. Laird

County Heard

Approved 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

2/4.99

Every Question MUST be

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?

Lost sight in the army Asst General had mail[illegible] Also what was called 3 times wounded the Most in the Confederate Army was with Bragg

13. What property, effects or income do you possess, and its gross value? Nothing

14. What property, effects or income did you possess in 1894, 1895, 1896, 1897 and 1898, and what disposition, if any, did you make of same? Nothing had nothing to dispose of

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

Pickens Co Ga. Nothing

16. How were you supported during the years 1897 and 1898? By my family

17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? about one hundred Dollars, nothing

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

Living to Same Nothing

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

Self, Wife and Small Son by their own work no

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

Nothing

Sworn to and subscribed before me this the 3 day of Feb, 1899.

J. J. Laird
Applicant.

W. M. Ragsdale, Ordinary,
of DeKalb County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Fulton COUNTY.

I, A. L. Hairston, of said State and County, having been presented as a witness in support of the application of J. J. Laird 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?
I A. L. Hairston
In Fulton County Ga

2. Are you acquainted with J. J. Laird, the applicant; if so how long have you known him?
I am about Forty seven years

3. Where does he reside, and how long and since when has he been a resident of this State?
In Dekalb Co 20 years

4. When, where and in what company and regiment did he enlist, and how do you know?
Enlisted at Sandy Springs S C Co I 3 S C Rifles Mclaws Brigade

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?
From July 21 1861 to April 9th 1865 he was a good Soldier was discharged at Appomattox Va at the Surrender of Gen Lee's Army

7. What property, effects or income has the applicant? (Give your means of knowledge.)
He owns a small farm, maintained with the applicant and I know that he does not own any property

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?
Nothing no disposition

9. Has he conveyed away any of his property in the last three years, if so, what was it, and to whom?
No

10. What is the applicant's occupation and physical condition?
He owns a small farm is simply disabled

11. Is the applicant unable to support himself by labor of any sort, if so, why?
Yes Infirmity Age and rheumatism & Wounds during the War rendered unable to get food and Clothing by his own labor

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

13. What portion of his support for these two years was derived from his own labor or income?
More than one half that the ~~contributed~~ Applicant Contributed nothing

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code?
He and General had mail[illegible] & Wounds received in the Confederate Service

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

Sworn to and subscribed before me, this the 2nd day of March 1899.

A. L. Hairston
Witness.

W. M. Ragsdale
Ordinary.

I am satisfied that A. L. Hairston is worthy of full credit and his testimony should be received
Jan 2nd 1899 W. M. Ragsdale Acting Justices Court

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

DeKalb COUNTY.

Personally came before me Dr. Joseph H. Green and Chas. J. Ramsey, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully J. J. Laird applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

Inguinal Hernia of left side, same is with suppuration continually, has to wear a truss, a general debilitated condition of the whole system, being seventy four years old he could not expect to recover & is never able to make support for himself

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 3rd day of Feb 1899.

Chas. J. Ramsey M.D.

W. M. Ragsdale
Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

DeKalb COUNTY.

I, W. M. Ragsdale, Ordinary in and for said County, hereby certify that the applicant J. J. Laird resides in said County, and has been a bona fide resident of this State since the day of 189 and that the witnesses, viz: Dr. J. H. Green M.D. and Dr. Chas. J. Ramsey are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Has not resided in this County show that applicant returned for taxation in his name in 1897 Dollars of property, and in 1898 Dollars of property.

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

Witness my hand and seal of office, this 3 day of Feb 1899.

W. M. Ragsdale
Ordinary,
of DeKalb 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.

Lieut Harvey

7. What property, effects or income has the applicant? (Give your means of knowledge.)
He owns what are maintained with the applicant
and knows that he does not own any property

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? Nothing no disposition

9. Has he conveyed away any of his property in the last three years, if so, what was it, and to whom?
None Tract Illegible to Harvey

10. What is the applicant's occupation and physical condition? Old infirm Boy in
service Crippled

11. Is the applicant unable to support himself by labor of any sort, if so, why? Old Infirmity
Age and rheumatism Received 3 Wounds during the
War Confederate Shot in right foot and left thigh across the Causing Injuries

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

13. What portion of his support for these two years was derived from his own labor or income?
Mrs Elizabeth testifies that the Contributed Applicant Contributed with

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? Old and General Bad Health & Wounds
Received in the Confederate Service

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

Sworn to and subscribed before me, this the 2nd day of January 1899. A. L. Hairston Witness

T. M. McCrackin Ordinary.

Sworn to and subscribed before me this 21st day of January 1899 T. M. McCrackin Ordinary Fulton Co Ga

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, DeKalb COUNTY.

I, T. M. McCrackin, Ordinary in and for said County, hereby certify that the applicant J. J. Land resides in said County, and has been a bona fide resident of this State since the day of 189 and that the witnesses, viz: Dr. J. H. Green and Dr. Chas. J. Rowe sworn are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Has not resided in this County show that applicant returned for taxation in his name in 1897 Dollars of property, and in 1898 Dollars of property.

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

Witness my hand and seal of office, this 3 day of Feb 1899.

T. M. McCrackin Ordinary.
of DeKalb County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
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.

_____ [L. S.]

Executed in presence of

_____

CODE SEC. 1254.
(For Those Already Enrolled.)
No. 62
INDIGENT
SOLDIER'S PENSION,
1900.
Name J. J. Land
County DeKalb
WARRANT ISSUED
Jany 21 1900.
JOHN. W. LINDSEY, Commissioner of Pensions.
WARRANT HANDED TO
Geo. W. Harrison, State Printer, Atlanta.

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 _____ 1901.

_____ [L. S.]

Executed in presence of

(For Those Already Enrolled.)
No. 62
INDIGENT
SOLDIER'S PENSION.
1901.
Name J. J. Land
County DeKalb
WARRANT ISSUED
Jan 21 1901.
JOHN W. LINDSEY,
WARRANT HANDED TO

CODE SEC. 1254.
(For Those Already Enrolled.)

NO. 62

INDIGENT SOLDIER'S PENSION, 1900.

Name J.J. Land
County DeKalb

WARRANT ISSUED Jan 12 1900.

JOHN. W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

CODE SECTION 1254.
(For Those Already Enrolled.)

No. 645

INDIGENT SOLDIER'S PENSION. 1901.

Name J.J. Land
County DeKalb

WARRANT ISSUED Jan 21 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
DeKalb County.

Personally appears J.J. Land of DeKalb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 22 day of [illegible] 1827; that he is 73 years old and by occupation a [illegible]; that he enlisted in the military service of the Confederate States (or of the State of [illegible]) during the war between the States, and served for the term of [illegible] in Company L, of [illegible] Regiment of [illegible]; that his physical condition is as follows: [illegible]

that his property consists of the following items [illegible]

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1900. I have heretofore as a resident of [illegible] county been allowed a pension for the year 189[illegible]

Sworn to and subscribed before me, this the [illegible] day of [illegible] 1900. J F Land
[illegible] Ordinary.

State of Georgia,
DeKalb County.

I, [illegible] Ordinary of said County, do certify that I am well acquainted with [illegible] the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 [illegible] 1900.

Affix your seal here.

[illegible] Ordinary. DeKalb 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,
DeKalb County.

Personally appears J.J. Land of DeKalb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 22 day of [illegible] 1827; 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 Ga) during the war between the States, and served for the term of 4 Years in Company L, of 12th Regiment of [illegible]; that his physical condition is as follows: Has rheumatism old age and general debility.

that his property consists of the following items [illegible]

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

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

Sworn to and subscribed before me, this the [illegible] day of [illegible] 1901.
[illegible] Ordinary.

STATE OF GEORGIA,
DeKalb County.

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

Given under my official signature and seal, this 11th day of Jan 1901.

Affix your seal here.

[illegible] Ordinary. DeKalb County.

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

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 _____ county been allowed a pension for the year 189__

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

_____ Ordinary.

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 _____ 1900.

Affix your seal here.

_____ Ordinary _____ County.

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

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

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

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

_____ Ordinary.

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 _____ 1901.

Affix your seal here.

_____ Ordinary _____ County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ 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 _____ 1902.

_____ [L. S.]

Executed in presence of

_____

_____

Land S.S.
D. Pollard.

CODE, SECTION 231.

FOR THOSE ALREADY ENROLLED.

No. 536

INDIGENT

SOLDIER'S PENSION

1902.

Name Land S.S.

County _____

Co. _____ Regiment _____

WARRANT ISSUED

_____ 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

_____

Geo. W. Harrison, State Printer, Atlanta.

Sarah J. Ford
De Kalb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)
No Further Fee
No. 576

INDIGENT
SOLDIER'S PENSION
1902.

Name Sarah J. Ford
County DeKalb
Co. — Regiment —

WARRANT ISSUED — 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
De Kalb County.

Personally appears S J Ford of De Kalb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 22 day of Dec 1829; 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 Ga) during the war between the States, and served for the term of 4 yrs 9 mo in Company L, of 12th Regiment of Ga Forces C. Keller; that his physical condition is as follows: Old age and Infirmities he is unable to work & make a support

that his property consists of the following items None

of the value of 00 Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

S J Ford

Sworn to and subscribed before me, this the 15 day of Jan 1902.

WM Ragsdale Ordinary.

STATE OF GEORGIA,
De Kalb County.

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

Given under my official signature and seal, this 15 day of Jan 1902.

Affix your seal here

WM Ragsdale
Ordinary De Kalb County.

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

follows: We do not find that he is entitled to pension & make a report

that his property consists of the following items None

of the value of 00 Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

J J Land

Sworn to and subscribed before me, this the 15 day of Jan 1902.

W M Ragsdale Ordinary.

STATE OF GEORGIA,
De Kalb **County.**

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

Given under my official signature and seal, this 15 day of Jan 1902.

Affix your seal here

W M Ragsdale, Ordinary. De Kalb County.

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

NAME Land, J J YEAR 1899 COUNTY DeKalb

WHEN AND WHERE BORN? August 27, 1827 - Anderson Co., South Carolina

ENLISTED WHEN AND WHERE? July 21, 1861 - Sandy Springs, South Carolina

RANK

COMPANY AND REGIMENT? Co L 1st South Carolina Rifles

NAME OF CAPTAIN AND COLONEL?

WOUNDED? Wounded three times during the war.

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED? April 9, 1865 - Appomattox, Va.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. A L Hairston - same command - No date

mh

WHEN AND WHERE BORN? August 27, 1827 - Anderson Co., South Carolina

ENLISTED WHEN AND WHERE? July 21, 1861 - Sandy Springs, South Carolina

RANK

COMPANY AND REGIMENT? Co L 1st South Caroline Rifles

NAME OF CAPTAIN AND COLONEL?

WOUNDED? Wounded three times during the war.

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED? April 9, 1865 - Appomattox, Va.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. A L Hairston - same command - No date
mh

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,
DeKalb COUNTY.

I, James R George Ordinary of said County, do certify that I know Mrs. Mary E Lankford the applicant for this pension, and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the ..... day of 19

That I also know ..... 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 ..... day of ..... 19....

(SEAL.) ..... Ordinary.

..... County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the county of residence.
4. Only widows who married prior to first January, 1885, 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 DeKalb

Name Mrs Mary E. Lankford

Widow of W M Lankford

Company D

Regiment 12 Ga Batt

Approved .....

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

Mrs Mary E Lankford
Decatur Georgia
DeKalb County

Company C

Regiment 12 Ga Batt

Approved

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

CERTIFICATE

Ordinary of said County, do certify that I

the applicant for this pension, and that she is the

bona fide continuing resident of said County and was

19

witness as to marriage, and I also know

that both of the foregoing were duly sworn by me

y are truthful and trustworthy and their statements

for this day of 19

Ordinary.

County.

2. Shall same applicant and the witness to 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."
3. Additional affidavits may be attached if blank spaces are insufficient.
4. All affidavits must be made before the Ordinary of the county of residence.
5. Only widows who married prior to first January, 1881, are entitled.
6. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
7. 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.

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,
DeKalb COUNTY.

I, James R George Ordinary of said County, do certify that I know Mrs. Mary E Langford the applicant for this pension, and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the day of 19

That I also know 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 day of 19

SEAL. Ordinary.

County.

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

Langford Mary E
No. 97,172 92 6
DeKalb 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 DeKalb

Name Mrs Mary E. Langford

Widow of Wm Langford

Company C

Regiment 12 Ga Batt

Approved

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta

State of Georgia
DeKalb County

To any Minister of the Gospel Judge of Superior Court Justice of Inferior Court or Justice of the Peace to Celebrate.

You are hereby authorized and permitted to join in the Honorable State of Matrimony Mr. Nath Langford and Miss Lizzie McElroy 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 8th day of November 1867..

J. B. Wilson Ordinary (Seal)

I hereby certify that Mr. Nathan Langford and Miss Lizzie McElroy were joined together in the Holy Bans of Matrimony on the fourteenth day of November 1867 by me.

W. H. Dodge M. G.

Georgia, DeKalb County.

I, James R. George, Ordinary in and for said County, do hereby certify that the above and foregoing copies of marriage license and certificate of marriage, are true, correct and complete copies of the marriage license and certificate of marriage of Mr. Nathan Langford and Miss Lizzie McElroy, as appears of record in Book "B", Record of Marriages, Page 229.

In Testimony Whereof, I have hereunto set my hand and affixed the seal of said Court of Ordinary at Decatur, Georgia, this 29th day of September, 1921.

James R George
Ordinary DeKalb County, Georgia.

6. Widows of Disabled Pensioners must use the same Application blank and state and prove the term of husband's service—because he made no proof of service and was not required to do so.

Langford Mary E.
Dekalb County
No. 9

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, 1919. As Amended by Act of 1919.

County DeKalb

Name Mrs. Mary E. Lankford

Widow of N. M. Lankford

Company C

Regiment 2 Ga. Batt.

Approved

J. W. LINDSEY, Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

Georgia, DeKalb County.

I, James R. George, Ordinary in and for said County, do hereby certify that the above and foregoing copies of marriage license and certificate of marriage, are true, correct and complete copies of the marriage license and certificate of marriage of Mr. Nathan Langford and Miss Lizzie McElroy, as appears of record in Book "B", Record of Marriages, Page 229.

In Testimony Whereof, I have hereunto set my hand and affixed the seal of said Court of Ordinary at Decatur, Georgia, this 29th day of September, 1921.

James R George
Ordinary, DeKalb County, Georgia.

WIDOW'S AFFIDAVIT

STATE OF GEORGIA,
DeKalb COUNTY.

Personally before me comes Mrs. Mary E. Lankford of said County, who, after being duly sworn, says that she is the widow of N M Lankford to whom, in the County of DeKalb State of Ga she was married on the 14 day of Nov 1867 and that she remained his wife, and resided with him to the date of his death in June 5th 1920 and that she has not since his death remarried. At the time of his death he was a resident of DeKalb County, in said State of Georgia, and he was on the Indigent Pension Roll of the State and paid a pension of $100.00 in DeKalb County for 1920 per annum, on account of being a soldier in Company C Regiment 2 Ga Batt (Volunteers or State Militia)

That she is now a bona fide resident citizen of said County of DeKalb and she has so continuously resided since 9 day of Feby 1849

Sworn to and subscribed before me, this the 29 day of Sept 1921

James R George Ordinary of DeKalb County.

(SEAL)

Mrs Mary E Lankford

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

STATE OF GEORGIA,
Gwinnett COUNTY.

Personally before me comes J. E. McElroy, 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. Mary E. Lankford who made the foregoing affidavit, is the lawful widow of N. M. Lankford who died in DeKalb County in said State of Georgia on 5th day of June, 1920 and that she has not since remarried. That she became the wife of N.M.Lankford on the 14th day of November 1867, and that she and he had resided together as man and wife continuously since 14th day of Nov. 1867 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 7th day of November, 1921

C. G. Robinson Ordinary of Gwinnett County.

(SEAL)

J E McElroy

the 14 day of Nov 1867, and that she remained his wife, and resided with him to the date of his death in June 5th 1920 and that she has not since his death remarried. At the time of his death he was a resident of DeKalb County, in said State of Georgia, and he was on the Indigent Pension Roll of the State and paid a pension of $100.00 in DeKalb County for 1920 per annum, on account of being a soldier in Company C Regiment 2 Ga Batt (Volunteers or State Militia)

That she is now a bona fide resident citizen of said County of DeKalb and she has so continuously resided since 9 day of Feby 1849

Sworn to and subscribed before me, this the 29 day of Sept 1921

James R Grange Ordinary of DeKalb County. (SEAL)

Mrs Mary E Lankford

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

STATE OF GEORGIA, Gwinnett COUNTY.

Personally before me comes J. E. McElroy. 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. Mary E. Lankford who made the foregoing affidavit, is the lawful widow of N. M. Lankford who died in DeKalb County in said State of Georgia on 5th day of June, 1920 and that she has not since remarried. That she became the wife of N.M.Lankford on the 14th day of November 18 67, and that she and he had resided together as man and wife continuously since 14th day of Nov. 18 67 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 7th day of November, 1921

C. G. Robinson Ordinary of Gwinnett County. (SEAL)

J E McElroy

Lanier, D.S.
DeKalb County

No _____

INDIGENT PENSION, 1900.

Name D.S. Lanier

County DeKalb

Approved _____ 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

Power of Attorney.

STATE OF GEORGIA,
County. }

I, _____ of _____ 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 _____ 1900.

[L. S.]

Executed in presence of

_____

Approved _____ 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

[L. S.]

hereby authorize

result same to

orney.

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.

[L. S.]

Executed in presence of

INDIGENT PENSION,
1900.

No _____

Name D.S. Lanier

County DeKalb

Approved _____ 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

Lanier, D.S.
DeKalb Co.

Questions for Applicant.

STATE OF GEORGIA, }
DeKalb County. }

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

1. What is your name and where do you reside? (give State, County and post office) Kirkwood DeKalb County Georgia. D.S. Lanier.
2. How long and since when have you been a resident of this State? All of my life being now Fifty nine years of age.
3. When and where were you born? Near Lawrenceville, In Gwinnett Co Ga.
4. When and where and in what company and regiment did you enlist or serve? At Hudson's Old Stand In Gwinnett County Co H, 3rd Ga Regiment. Enlisted about the 1st of September 1861.
5. How long did you remain in such company and regiment? 18 months.
6. For how long a period did you discharge regular military duty? 18 months
7. When, where and under what circumstances were you discharged from service? Were you with your command at the time? I was wounded at Battle of Seven Pines. May 31st 1862. & 15 days afterwards was sent to Atlanta Ga to the Empire Hospital. Stayed in the Hospital 8 Eight months then sent to Conalescent camp. Was Atlanta & then discharged by Surgeon on Account of my wounds. Was in the organization.
8. What is your present occupation? I have no occupation. Live with wife & children.
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. I have simply tried to farm
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? Infirmity & Poverty.
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? Was wounded on May 31st 1862 & have never been able to do manual labor since that Time. I have no property to support me. I am dependent for a living upon my wife and children. am not able to work.
13. What property, effects or income do you possess, and its gross value? Nothing
14. What property, effects or income did you possess in 1894, 1895, 1896, 1897, 1898 and 1899, and what disposition, if any, did you make of same? Nothing for any of these years. Made nothing at all.
15. In what County did you reside during those years, and what property did you then return for taxation? In Gwinnett & DeKalb Counties & made no returns in either County
16. How were you supported during the years 1898 and 1899? By my wife and 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? $75.00 for each year. I contributed nothing.
18. What was your employment during 1898 and 1899? What pay did you receive in each year? Tried to Peddle some. Made nothing.
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? Yes. Wife & three children. Work on a farm. They have no Homestead.
20. Are you receiving any pension? If so, what amount, and for what disability? Am not. None.

Every Question MUST be Answered.

Sworn to and subscribed before me this the 15 day of Aug 1900.

W.W. Rogers Ordinary.
of DeKalb County.

D.S. Lanier
Applicant.

Lanier, D. S.
D. Kalb Co. Ga.

No. —

INDIGENT PENSION, 1900.

Name D. S. Lanier

County DeKalb

Approved. 1900.

JOHN W. LINDSEY, Commissioner of Pensions.

WARRANT ISSUED TO

Chas. W. Harrison, State Printer, Atlanta.

Every Question MUST

11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? Infirmity & Poverty.

12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? Was wounded on May 31st 1862 & have been able to do manual labor since that Time. I have no property to support me. Am dependent for a living upon my wife and children. am not able to work.

13. What property, effects or income do you possess, and its gross value? Nothing

14. What property, effects or income did you possess in 1894, 1895, 1896, 1897, 1898 and 1899, and what disposition, if any, did you make of same? Nothing for any of these years and nothing at all.

15. In what County did you reside during those years, and what property did you then return for taxation? In Gwinnett & DeKalb Counties & made no returns in either County

16. How were you supported during the years 1898 and 1899? By my wife and 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? $75.00 for each year. I contributed nothing.

18. What was your employment during 1898 and 1899? What pay did you receive in each year? Tried to Peddle some. Made nothing.

19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? Yes. Wife & three children. Work on a farm. They have no Homestead.

20. Are you receiving any pension? If so, what amount, and for what disability? am not. None.

Sworn to and subscribed before me this the 15 day of Aug 1900.

D. S. Lanier. Applicant.

W. M. Ragsdale Ordinary, of DeKalb County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA, Gwinnett COUNTY.

Jesse J. McDaniel and D. S. Rawlins, of said State and County, having been presented as witness in support of the application of D. S. Lanier 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? Jesse J. McDaniel and David S. Rawlins, reside in Gwinnett Co. Ga

2. Are you acquainted with D. S. Lanier, the applicant; if so, how long have you known him? We are have for 55 years. or more,

3. Where does he reside, and how long and since when has he been a resident of this State? He was born and raised in DeKalb Co. Ga. and Ga has resided in this State all his life.

4. When, where and in what company and regiment did he enlist, and how do you know? He enlisted in Gwinnett County, Ga. in Sept. 1861 in Co. H 35th Ga. Regt. He enlisted at same time and place

5. Were you a member of the same company and regiment? We were,

6. How long did he perform regular military duty, and what do you know of his services as a Confederate soldier, and the time and circumstances of his discharge from the service? Were you present with command when discharged? He served 18 Months. - Was a good Soldier, He was discharged on account of a Wound received in Feby. 1863. Witness the hand of this 4 day of June 1900 J. J. McDaniel D. S. Rawlins

John P. Webb Ordinary

7. What property, effects or income has the applicant? (Give your means of knowledge) From personal knowledge I know he has none

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? He had none in either of these years.

9. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? None

10. What is the applicant's occupation and physical condition? Farming is his occupation. His Physical condition is very bad

11. Is the applicant unable to support himself by labor of any sort, if so, why? On account of his rupture and wounds he is unable to support himself or do any labor of any sort

12. How was he supported during the years 1898 and 1899? By his wife and children

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 Section 1254, Code? He received in his leg & the rupture is the cause of his present condition

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

Sworn to and subscribed before me, this the 17 day of August 1900.

J. A. Brownlee Witness.

W. M. Ragsdale Ordinary.

W. W. Brownlee

Georgia Gwinnett County. I, John P. Webb Ordinary of said County, hereby certify that the foregoing questions and answers were made before me by the witnesses named therein, and that I am not interested in the application for pension, and that I am not related to the applicant by consanguinity or affinity within the degree of first cousin. Witness my hand and seal of my office this 4 day of June 1900 John P. Webb Ordinary Gwinnett County Ga

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA, DeKalb COUNTY.

Personally came before me [illegible] and [illegible] both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully D. S. Lanier, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

[illegible]

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 17 day of Aug 1900.

W. M. Ragsdale Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, DeKalb COUNTY.

I, W. M. Ragsdale, Ordinary in and for said County, hereby certify that the applicant D. S. Lanier resides in said County, and has been a bona fide resident of this State since the day of 18[illegible] and that the witnesses, viz: J. A. Brownlee

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

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

I further certify that the tax digests of DeKalb County show that applicant returned for taxation in his name in 1898 None Dollars of property, and in 1899 None Dollars of property.

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

Witness my hand and seal of office, this 17th day of Aug 1900.

W. M. Ragsdale Ordinary, of DeKalb 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.

From personal knowledge I know he has none

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? He had none in either of these years.

9. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? None

10. What is the applicant's occupation and physical condition? Farming is his occupation. His physical condition is very bad

11. Is the applicant unable to support himself by labor of any sort, if so, why? On account of his rupture and wounds he is unable to support himself or do any labor of any sort

12. How was he supported during the years 1898 and 1899? By his wife and children

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 Section 1254, Code? He received in his leg & the rupture is the cause of his present condition

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

Sworn to and subscribed before me, this the 13 day of August 1900.

J. A. Brownlee Witness.

W. M. Ragsdale Ordinary.

W. M. Ragsdale

Georgia, Dekalb County. I, John W. Lindsey, Ordinary of said County, do hereby certify that the foregoing is a true copy of the Application of D. S. Lanier for Pension as the same appears of record in my office. Witness my hand and official seal of office this 10th day of Nov 1902. John W. Lindsey Ordinary

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, De Kalb COUNTY.

I, W. M. Ragsdale, Ordinary in and for said County, hereby certify that the applicant D. S. Lanier resides in said County, and has been a bona fide resident of this State since the day of 18[illegible] and that the witnesses, viz: J. A. Brownlee

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

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

I further certify that the tax digests of De Kalb County show that applicant returned for taxation in his name in 1898 None Dollars of property, and in 1899 None 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 Aug 1900.

W. M. Ragsdale Ordinary, of De Kalb County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA, County.

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

Witness my hand and seal, this day of 1901.

[L. S.]

Executed in presence of

(For Those Already Enrolled.)

No. 4220

INDIGENT SOLDIER'S PENSION. 1901.

Name D. S. Lanier

County Dekalb

WARRANT ISSUED 1901.

JOHN W. LINDSEY,

WARRANT HANDED To

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 1902.

[L. S.]

Executed in presence of

Lanier D. S. De Kalb Co.

(FOR THOSE ALREADY ENROLLED.)

No. 89.

INDIGENT SOLDIER'S PENSION 1902.

Name Lanier D. S.

County Dekalb

Co. F Regiment 35th

WARRANT ISSUED 1902.

JOHN W. LINDSEY, Commissioner of Pensions.

WARRANT HANDED To

Geo. W. Harrison, State Printer, Atlanta.

(For Those Already Enrolled.)

No. 4935

INDIGENT SOLDIER'S PENSION. 1901.

Name D.S. Lanier
County DeKalb

WARRANT ISSUED 4/10 1901.

JOHN W. LINDSEY,

WARRANT HANDED TO

Lanier, D.S.
Co. F, 35th Ga.
(FOR THOSE ALREADY ENROLLED.)

No. 89.

INDIGENT SOLDIER'S PENSION 1902.

Name Lanier D.S.
County DeKalb
Co. F Regiment 35th

WARRANT ISSUED 1/15 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
DeKalb County.

Personally appears D.S. Lanier of DeKalb 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 24 day of Nov 1841; that he is 60 years old and by occupation a Farmer that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served for the term of 18 months in Company F, of 35 th Regiment of Ga Vol; that his physical condition is as follows: Was wounded while in service and is now crippled and unable to labor. He is married

that his property consists of the following items & is worth

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 DeKalb county been allowed a pension for the year 1900. D.S. Lanier

Sworn to and subscribed before me, this the 27 day of March 1901.
W.W. Loveless Ordinary

STATE OF GEORGIA,
DeKalb County.

I, W.W. Loveless Ordinary of said County, do certify that I am well acquainted with D.S. Lanier the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 March 1901.
W.W. Loveless
Ordinary DeKalb County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
DeKalb County.

Personally appears, D.S. Lanier of DeKalb County, State of Geoogia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 24 day of Nov 1841; 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 Ga) during the war between the States, and served for the term of 1½ Years in Company F, of 35 th Regiment of Ga Vol; that his physical condition is as follows: Ruptured and old age and infirmity

that his property consists of the following items & is worth

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 DeKalb county been allowed a pension for the year 1901.

Sworn to and subscribed before me, this the 15 day of Jan 1902. D.S. Lanier
W.W. Loveless Ordinary.

STATE OF GEORGIA,
DeKalb County.

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

Given under my official signature and seal, this 15 day of Jan 1902.
W.W. Loveless
Ordinary. DeKalb County.

Affix your seal here

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

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 DeKalb county been allowed a pension for the year 1901

Sworn to and subscribed before me, this the 27 day of March 1901.

Ordinary

STATE OF GEORGIA,
DeKalb 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 27 day of March 1901.

Ordinary DeKalb County.

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

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 DeKalb county been allowed a pension for the year 1901

Sworn to and subscribed before me, this the 15 day of Jan 1902.

Ordinary

STATE OF GEORGIA,
DeKalb 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 15 day of Jan 1902.

Ordinary DeKalb County.

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

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 1904.

[L. S.]

Executed in presence of

(FOR THOSE ALREADY ENROLLED.)
No.

INDIGENT
SOLDIER'S PENSION
1904.

Name F. S. Mauer
County DeKalb
Co. Regiment

WARRANT ISSUED
1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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 1905.

[L. S.]

Executed in the presence of

Mauer, F. S.
DeKalb County

(FOR THOSE ALREADY ENROLLED.)
No.

INDIGENT
SOLDIER'S PENSION
1905.

Name F. S. Mauer
County DeKalb
Co. Regiment

WARRANT ISSUED
1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 622

INDIGENT
SOLDIER'S PENSION
1904.

Name E. S. Lanier
County DeKalb
Co. [illegible] Regiment [illegible]

WARRANT ISSUED 1/23 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
[illegible]

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

Lanier, E S
DeKalb County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 602

INDIGENT
SOLDIER'S PENSION
1905.

Name E. S. Lanier
County DeKalb
Co. I Regiment 35 Ga

WARRANT ISSUED 1/23 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
[illegible]

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

re-Issue

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
DeKalb County.

Personally appears E. S. Lanier of DeKalb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 2nd day of Feb 1841; that he is 63 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 11 months in Company F, of 35 th Regiment of ; that his physical condition is as follows: Registered into Service Crippled Age + Infirmity

that his property consists of the following items: House

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 DeKalb County been allowed a pension for the year 1903

Sworn to and subscribed before me, this the 23" day of January 1904. } E S Lanier

James R George Ordinary.

STATE OF GEORGIA,
DeKalb County.

I, James R George Ordinary of said County, do certify that I am well acquainted with E. S. Lanier the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 January 1904.

James R George
Ordinary DeKalb County.

Affix your seal here.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
DeKalb County.

Personally appears E. S. Lanier of

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 18 ; that he is years old and by occupation a , that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of in Company D, of 35 th Regiment of Ga ; that his physical condition is as follows: Infirmity + 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 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 14 day of Jan 1905. } E S Lanier

James R George Ordinary.

STATE OF GEORGIA,
DeKalb County.

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

Given under my official signature and seal, this 14th day of Jan 1905.

James R George
Ordinary DeKalb County.

Affix your seal here.

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

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

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

Sworn to and subscribed before me, this the 23" day of January 1904. — D. B. Lanier

James R. George — Ordinary.

STATE OF GEORGIA, DeKalb County.

I, James R. George, Ordinary of said County, do certify that I am well acquainted with D. B. Lanier the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 January 1904.

James R. George — Ordinary DeKalb County.

Affix seal here.

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

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

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of [illegible] County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the 14 day of [illegible] 1905. — [illegible]

James R. George — Ordinary.

STATE OF GEORGIA, [illegible] County.

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

Given under my official signature and seal, this 14th day of [illegible] 1905.

James R. George — Ordinary [illegible] County.

Affix seal here.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before 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 _____ 1906. _____ [L. S.]

Executed in the presence of

(FOR THOSE ALREADY ENROLLED.) Code Section 1254. No. 22

INDIGENT SOLDIER'S PENSION 1906.

Name D. B. Lanier
County DeKalb
Co. I Regiment 35 Ga.

WARRANT ISSUED 1905

JOHN W. LINDSEY, Commissioner of Pensions.

WARRANT HANDED TO

POWER OF ATTORNEY.

STATE OF GEORGIA, [illegible] County.

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

WITNESS my hand and seal, this _____ day of _____ 1907 _____ [L. S.]

Executed in presence of

(FOR THOSE ALREADY ENROLLED.) Code Section 1254. No. 1705

INDIGENT SOLDIER'S PENSION 1907.

Name D. B. Lanier
County DeKalb
Co. I Regiment 35 Ga.

WARRANT ISSUED 1/31/ 1907.

JOHN W. LINDSEY, Commissioner of Pensions.

WARRANT HANDED TO

Code Section 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 22

INDIGENT
SOLDIER'S PENSION
1906.

Name D S Lanier
County Pike
Co. F Regiment 35 Ga

WARRANT ISSUED
Jan 22 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
[illegible]

Code Section 1254.
(FOR THOSE ALREADY ENROLLED)

No. 7105

INDIGENT
SOLDIER'S PENSION
1907.

Name D S Lanier
County [illegible]
Co. F Regiment 35 Ga

WARRANT ISSUED
Jan 21 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
[illegible]

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
[illegible] **County.**

Personally appears D S Lanier of Pike 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 27 day of Nov 1841; that he is 65 years old and by occupation a [illegible], that he enlisted in the military service of the Confederate States (or of the State of [illegible]) during the war between the States, and served for the term of [illegible] in Company F, of 35 th Regiment of [illegible]; that his physical condition is as follows: [illegible]

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this the 22 day of January 1906.

D S Lanier

James R George Ordinary.

State of Georgia,
[illegible] **County.**

I, James R George Ordinary of said County, do certify that I am well acquainted with D S Lanier the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 January 1906.

James R George
Ordinary [illegible] County.

Affix your seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
Pike **County.**

Personally appears D S Lanier of Pike 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 27 day of Nov 1841; that he is 65 years old and by occupation a [illegible], that he enlisted in the military service of the Confederate States (or of the State of [illegible]) during the war between the States, and served for the term of [illegible] in Company F, of 35 th Regiment of Ga [illegible]; that his physical condition is as follows: Infirmity and Poverty

that his property consists of the following items: [illegible]

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

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

Sworn to and subscribed before me, this the 12 day of January 1907.

D S Lanier

James R George Ordinary.

State of Georgia,
[illegible] **County.**

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

Given under my official signature and seal this 12 day of [illegible] 1907.

James R George
Ordinary [illegible] County.

Affix your seal here

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

follows: Infirmity and 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 _____ County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the 22 day of January 1906. D S Lanier

James R George Ordinary.

State of Georgia,

_____ County.

I, James R George Ordinary of said County, do certify that I am well acquainted with D S Lanier the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 January 1906.

James R George Ordinary _____ County.

Affix your seal here

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

follows: Infirmity and 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 12 day of January 1907. D S Lanier

James R George Ordinary.

State of Georgia,

_____ County.

I, James R George 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 12 day of January 1907.

James R George Ordinary _____ County.

Affix your seal here

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

NAME Lanier, D.S. YEAR 1901 COUNTY DeKalb

WHEN AND WHERE BORN? Near Lawrenceville, Ga. Gwinnett Co. Resident of Ga. since birth.

ENLISTED WHEN AND WHERE? At "Hutson's Old Stand" in Gwinnett Co. Ga. September 1st. 1861

RANK.

COMPANY AND REGIMENT? Co. F, 35th. Regt. Ga. Vols.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? May 31st. 1862 Seven Pines, Va. was wounded - fifteen days afterward was sent to Atlanta, Ga. to Empire hospital - in hospital eight months, was then sent to convalescent camps near Atlanta, Ga.

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? Discharged account of disability - served eighteen months.

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. Fort F. McDaniel, D.S. Rawlins, same command -No data.

JWT

WHEN AND WHERE BORN? Near Lawrenceville, Ga. Gwinnett Co.
Resident of Ga. since birth.

ENLISTED WHEN AND WHERE? At"Hutson's Old Stand" in Gwinnett Co. Ga.
September 1st. 1861

RANK.

COMPANY AND REGIMENT? Co. F, 35th. Regt. Ga. Vols.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? May 31st. 1862 Seven Pines, Va. was wounded - fifteen days afterward was sent to Atlanta, Ga. to Empire hospital - in hospital eight months, was then sent to convalescent camps near Atlanta, Ga.

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? Discharged account of disability - served eighteen months.

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. John F. McDaniel, D.S. Rawlins, same command --No data.

JWT

Lanier, Nancy
DeKalb County

1891.

No 280

Widows' Pension

PAID TO

Mrs. Nancy Lanier

OF

DeKalb COUNTY.

$100.00.

Warrant Issued

1891

AND HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

Form No. 3.

STATE OF GEORGIA. }
County. }

Know all Men by these Presents, That I,

of

County, in said State, do hereby appoint

of

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

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

[L. S.]

Executed in the presence of us:

DIRECTIONS.

If allowed, send amount by to

me at

and oblige.

POWER OF

STATE OF GEORGIA.

County.

Know all Men by these Presents, That I,

of

County, in said State, do hereby appoint

of

me and in my name, to receive and receipt for

to from the State of Georgia as a widow of a C

affidavit; hereby authorizing my said attorney to

be issued by the Governor, or for any sum of mo

aforesaid.

IN WITNESS WHEREOF, I hav

day of

Executed in the presence of us:

DIRECT

If allowed, send amount by

me at

Dec Term 1891

Lee County

$100.00.

Warrant Issued

1891

AND HANDED TO

Geo. W. Harrison, State Printer, Atlanta

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA.

County.

Know all Men by these Presents, That I,

of

County, in said State, do hereby appoint

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

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

day of 189

[L. S.]

Executed in the presence of us:

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 Dec Term

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

Mrs. Nancy Lassiter, who being sworn according to law, says under oath that she is the widow of Reedy Lassiter, who was a soldier in the service of the Confederate States, and served as a member of Company H, of the 38" Regiment of Lee's Virginia Volunteers; that he enlisted in said service on or about the day of Oct 1863, and was in the Confederate Army up to May 1864. That, while in the Army, he was on the 19th day of Dec 1864, (See Note No 1) Killed in battle at Spotsylvania Court House Virginia.

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 2 th day of Oct 1844, and that she has resided in Georgia continuously since the day of 1874; 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 1 day of Apr 1891. Nancy her X Lassiter. mark

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 supposed to have resulted from the service of the soldier in the Army and not from any other cause.

Nancy Lassiter
Dec Term 1891
Lee County

No 250

1891.

Widows' Pension

PAID TO

Mrs. Nancy Lassiter

OF

Lee County

GA.

$100.00.

Warrant Issued

1891

AND HANDED TO

me at , and oblige,

Nancy Lassiter
DeKalb County
1891.

No. 250

Widows' Pension

PAID TO

Mrs. Nancy Lassiter

COUNTY

$100.00

Warrant Issued

1891

AND HANDED TO

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 2 th day of Feb 1844, and that she has resided in Georgia continuously since the day of 1826: 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 April 1891. Nancy X Lassiter. mark

Ordinary.

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

Form No. 2.

Affidavit for Three Witnesses.

STATE OF GEORGIA,

County of De Kalb

In person came before me, the undersigned Ordinary in and for said County, witnesses J. G. Hinson, & W. H. Dickerson.

who are known to said Attesting Officer as truthful, sober and reputable persons, who severally say and swear, that, from their own personal knowledge, Mrs. Nancy Lassiter of the County of De Kalb, State of Georgia, is the widow of Jesse Lassiter, who was a soldier in Company D of the 38th Regiment of Georgia Volunteers. That said soldier enlisted in the service of the Confederate States and the Georgia State Troops on or about the 2nd day of Feb 1862. That while in said service, or by reason of said service in the Army, he met his death as follows:

Died on the 6th day on the 6th at Spotsylvania Court House Virginia.

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

Sworn to and subscribed before me, this, the 7th day of April 1891.

J. G. Hinson
W. H. Dickerson.
J. J. Jackson

Ordinary.

Form No. 3.

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

STATE OF GEORGIA,

County of De Kalb

I, W. H. Rogsdale Ordinary in and for said County of De Kalb, State of Georgia, hereby certify that I am acquainted with Mrs. Nancy Lassiter, 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 the claim is made in good faith, and that I have caused the applicant and the witnesses to state fully and fairly all the facts they might.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the 9th day of April 1891.

(SEAL)

W. H. Rogsdale.

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 must be proven as 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 moved from the State since 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 every 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 to receive at the Treasurer's office in Atlanta and receive that money, to receipt for same.

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

By order of the Governor.

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

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 ills since 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 every 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, and 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.

We the last-swear that Mrs. Nancy Lanier was the wife of said soldier during the service, and that she has not intermarried since his death, and that she resides in [illegible] County of the State of Georgia.

Sworn to and subscribed before me, this, the [illegible] day of April 1891.

[illegible] Ordinary.

J. G. Hamilton
W. H. Dickerson.
J. J. Lanier

POWER OF ATTORNEY. Form No. 5.

STATE OF GEORGIA, }
County. }

Know all Men by these Presents, That I, [illegible] of [illegible] County, in said State, do hereby appoint [illegible] of [illegible] 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 [illegible] day of [illegible] 189

[L. S.]

Executed in the presence of us:

DIRECTIONS.

If allowed, send amount by [illegible] to me at [illegible], and oblige.

1891.

No. 2979

Widows' Pension

PAID TO

Mrs. Nancy Lanier

[illegible] County.

$100.00.

Warrant Issued [illegible] 1891

AND HANDED TO

[illegible]

Affidavit to be Made by the Widow. Form No. 1.

STATE OF GEORGIA.

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

Mrs. Nancy Lanier, who being sworn according to law, says under oath that she is the widow of Presley Lanier, who was a soldier in the service of the Confederate States, and served as a member of Company [illegible], of the 98th Regiment of Ga. Volunteers; that he enlisted in said service on or about the [illegible] day of [illegible] 1862, and was in the Confederate Army up to [illegible] 1864. That while in the Army, he was on the 12th day of May 1864, (See Note No 1) Killed in the battle of Spotsylvania Court House, Va.

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 23rd day of December 1862, and that she has resided in Georgia continuously since the 13th day of July 1823; 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 19th day of May 1891.

her
Nancy X Lanier
mark

[illegible] 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 [illegible] positively to have resulted from the service of the soldier in the Army and not from any other cause.

If allowed, send amount by to

me at , and oblige,

Widows' Pension

PAID TO

Mrs. Nancy Lassiter

Post Office

County.

$100.00.

Warrant Issued

1891

AND HANDED TO

No. 2784

1891.

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 25th day of September 1842, and that she has resided in Georgia continuously since the 13th day of July 1823; 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 19th day of May 1891. Nancy her X Lassiter mark

Millidgeville Ordinary.

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

Form No. 2.

Affidavit for Three Witnesses.

STATE OF GEORGIA,

County of De Kalb

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

and (each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge, Mrs. Nancy Lassiter, of the County of De Kalb, State of Georgia, is the widow of Wiley Lassiter, who was a soldier in Company D of the 38th Regiment of 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:

Killed in the battle at Bentonville, N.C. on the 19th day of March 1865.

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

Sworn to and subscribed before me, this, the 2nd day of May 1891.

Millidgeville Ordinary.

W. H. Hitchcock

Geo. H. Perry

J. G. Hamilton

Form No. 3.

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

STATE OF GEORGIA,

County of De Kalb

I, Wm. Pequignot Ordinary in and for said County of De Kalb State of Georgia, hereby certify that I am acquainted with Mrs. Nancy Lassiter 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 19th day of May 1891.

SEAL

Wm. Pequignot Ordinary.

Form No. 1.

NOTES.

The pension is only payable to certain classes of widows.

Those whose husbands were killed in service.

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

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

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

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

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

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

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

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

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

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

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

Fill out the "*direction*" 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.

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.

We further swear that Miss Nancy Lanier was the wife of said soldier during the service, and that she has not intermarried since his death, and that she resides in DeKalb County of the State of Georgia.

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

W. H. & J. Dickinson
Ord'y Dep'y
J. G. Mann Jr.

W. H. Cowsdale,
Ordinary.

Form No. 2.

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

STATE OF GEORGIA, County of DeKalb

I, W. H. Cowsdale, Ordinary in and for said County of DeKalb State of Georgia, hereby certify that I am acquainted with Mrs. Nancy Lanier 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, 1859, and has not lived out of the State since that date. That she is the widow of Beverly Lanier 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 5th day of March 1894.

[Seal] W. H. Cowsdale Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, County.

KNOW ALL MEN BY THESE PRESENTS, That I,

of

County in said State, do hereby appoint

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

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

day of 1894.

[L. S.]

Executed in the presence of us:

DIRECTIONS.

Send amount by to

me at , and oblige

Lanier, Nancy
DeKalb County
FOR THOSE HERETOFORE PAID

1894.

No. 10 574

WIDOWS' PENSION,

for year ending February 15th, 1894.

—PAID TO—
Mrs. Nancy Lanier
—OF—
DeKalb County.

WARRANT ISSUED
2 1894.
AND HANDED TO
Applicant

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

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 1894.

[L. S.]

Executed in the presence of us:

DIRECTIONS.

Send amount by to me at , and oblige

Lanier, Nancy
DeKalb County
FOR THOSE HERETOFORE PAID

1894.

No. 10 574

WIDOWS' PENSION,

for year ending February 15th, 1894.

—PAID TO—

Mrs. Nancy Lanier

—OF—

DeKalb County.

WARRANT ISSUED

1894.

AND HANDED TO

Attorney

Geo. W. Harrison, State Printer, Atlanta.

Form No. 1

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of DeKalb

Personally comes Mrs. Nancy Lanier

who being sworn, says on oath, that she is a bona fide resident of said County of DeKalb State of Georgia, and that she has *resided* in said State continuously ever since November 1890 18. That she is the Widow of Presley Lanier who was a Soldier in Company D of the 38th Regiment of Geo Volunteers, that he enlisted in said Regiment on or about the month of July 1862 and served in the Army up to [illegible] 1864 That he lost his life on the 12th day of [illegible] 1864. (*State here full particulars of the husband's death, when, where and from what cause.*)

[illegible]

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1844; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1893, and now apply for the allowance provided by law for the year ending February 15th, 1894.

Sworn to and subscribed before me, this 22nd day of Jan 1894.

[illegible] Ordinary.

her
Nancy X Lanier
mark

Post-office Stone Mt. Ga.

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1844; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1893, and now apply for the allowance provided by law for the year ending February 15th, 1894.

Sworn to and subscribed before me, this 22d day of Mar 1894. Ordinary.

Her Nancy X Lanier Mark

Post-office Stone Mt. Ga.

Form No. 9.

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

STATE OF GEORGIA, County of [illegible]

I, [illegible] Ordinary in and for said County of [illegible] State of Georgia, hereby certify that I am acquainted with Mrs. [illegible] 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 [illegible] 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 [illegible] day of [illegible] 1893.

[L. S.] [illegible] Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, County.

KNOW ALL MEN BY THESE PRESENTS, That I, of

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

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

[L. S.]

Executed in the presence of us:

DIRECTIONS.

Send amount by to me at , and oblige

Lanier, Nancy
Dekalb County

FOR THOSE HERETOFORE PAID.

1893.

No. 1012

Widow's Pension,

for year ending February 15th, 1893.

—PAID TO—

Mrs. [illegible]

—OF—

County.

Warrant Issued 2[illegible] 1893

AND HANDED TO [illegible]

Geo. W. Harrison, State Printer, Atlanta.

Form No. 9.

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

STATE OF GEORGIA, County of DeKalb

I, [illegible] Ordinary in and for said County of DeKalb State of Georgia, hereby certify that I am acquainted with Mrs. Nancy Lanier 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 Presley Lanier 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 16th day of [illegible] 1895.

[L. S.] [illegible] Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, County.

KNOW ALL MEN BY THESE PRESENTS, That I, of

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of 1895.

[L. S.]

Executed in the presence of us:

DIRECTIONS.

Send amount by to me at , and oblige

Lanier, Nancy
DeKalb County

FOR THOSE HERETOFORE PAID.

1895.

No. 1662

WIDOW'S PENSION,

for year ending February 15th, 1895.

—PAID TO—

Mrs. [illegible]

—OF—

DeKalb County.

widow of Presley Lanier

WARRANT ISSUED [illegible] 1895.

AND HANDED TO [illegible]

Geo. W. Harrison, State Printer.

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

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

day of _____ 189

[L. S.]

Executed in the presence of us:

DIRECTIONS.

Send amount by _____ to

me at _____, and oblige

FOR THOSE HERETOFORE PAID.

1893.

No. 1012

Widows' Pension,

for year ending February 15th, 1893.

—PAID TO—

Mrs. _____

—OF—

_____ County.

Warrant Issued

1893

AND HANDED TO

Jno. W. Harrison, State Printer, Atlanta.

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

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

day of _____ 1895.

[L. S.]

Executed in the presence of us:

DIRECTIONS.

Send amount by _____ to

me at _____, and oblige

FOR THOSE HERETOFORE PAID.

1895.

No. 966

WIDOW'S PENSION,

for year ending February 15th, 1895.

—PAID TO—

Mrs. _____

—OF—

_____ County.

WARRANT ISSUED

1895.

AND HANDED TO

Geo. W. Harrison, State Printer.

Form No. 1.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, County of _____

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 _____ 1899 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_ and served in the Army up to _____ 186_ That he lost his life on the _____ day of _____ 186_ (*State here full particulars of the husband's death, when, where and from what cause.*)

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, 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 _____ 1893.

_____ Ordinary.

Post-office _____

Form 1.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, County of _____

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 _____ 18_ 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_ and served in the Army up to _____ 186_ 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.*)

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 _____ day of _____ 1895.

_____ Ordinary.

Post-office _____

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 4, 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 6 day of 1893. Ordinary. Post-office

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 ... day of ... 1895. ... Ordinary. Post-office

Form No. 2.

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

STATE OF GEORGIA, County of DeKalb

I, ... Ordinary in and for said County of DeKalb 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 26th day of ... 1896.

(SEAL) ... Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, ... County.

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

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

... [L.S.]

Executed in the presence of

...

Form No. 2.

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

STATE OF GEORGIA, County of DeKalb

I, ... Ordinary in and for said County of DeKalb 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, 1896.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the 21st day of ... 1897.

(SEAL) ... Ordinary

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, DeKalb County.

I, ... hereby authorize D. Peek of DeKalb 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 21st day of ... 1897.

... [L.S.]

Executed in the presence of

...

Pansy, Piney, Polk, Pauly

FOR THOSE HERETOFORE PAID.

1896.

No. 206

WIDOW'S PENSION,

for year ending February 15th, 1896.

PAID TO

Mrs. Nancy Garrett

OF

DeKalb County,

widow of Presly Garrett

WARRANT ISSUED

1896.

AND HANDED TO

WM. W. HARRISON, STATE PRINTER.

FOR THOSE HERETOFORE PAID.

1897.

No. 2146

WIDOW'S PENSION,

for year ending February 15th, 1897.

PAID TO

Mrs. Nancy Garrett

OF

DeKalb County,

widow of Presly Garrett

RICHARD JOHNSON, Commissioner of Pensions

WARRANT ISSUED

2/1 1897.

AND HANDED TO

REG. W. HARRISON, STATE PRINTER, ATLANTA.

STATE OF GEORGIA, [illegible] County.

I, [illegible] hereby authorize [illegible] of [illegible] to receive and receipt for the pension paid hereon and request that he remit same to [illegible] at [illegible]

In Witness Whereof, I have hereunto set my hand and seal, this [illegible] day of [illegible] 1896.

[illegible] [L.S.]

Executed in the presence of

[illegible]

FOR THOSE HERETOFORE PAID.

1896.

No. 306

WIDOW'S PENSION,

for year ending February 15th, 1896.

PAID TO

Mrs. Nancy Lanier

OF

DeKalb County,

widow of Privt. Lanier

WARRANT ISSUED

1896.

AND HANDED TO

[illegible]

[illegible] W. HARRISON, STATE PRINTER, ATLANTA.

STATE OF GEORGIA, DeKalb County.

I, Nancy Lanier hereby authorize C. D. Nash of DeKalb to receive and receipt for the pension paid hereon and request that he remit same to [illegible] at [illegible]

In Witness Whereof, I have hereunto set my hand and seal, this [illegible] day of [illegible] 1897.

Nancy Lanier [L.S.]

Executed in the presence of

[illegible]

[illegible]

FOR THOSE HERETOFORE PAID.

1897.

No. 2146

WIDOW'S PENSION,

for year ending February 15th, 1897.

PAID TO

Mrs. Nancy Lanier

OF

DeKalb County,

widow of Privt. Lanier

WARRANT ISSUED

2-11 1897.

AND HANDED TO

[illegible]

RICHARD JOHNSON,

Commissioner of Pensions.

[illegible] W. HARRISON, STATE PRINTER, ATLANTA.

Form 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of [illegible]

Personally Comes Mrs. [illegible]

who being sworn, says on oath, that she is a bona fide resident of said county of [illegible] State of Georgia, and that she has RESIDED in said State continuously ever since [illegible] 18 That she is the Widow of [illegible] who was a Soldier in Company [illegible] of the [illegible] Regiment of [illegible] Volunteers, that he enlisted in said regiment on or about the month of [illegible] 186[illegible] and served in the Army up to [illegible] 186[illegible] That he lost his life on the [illegible] day of [illegible] 186[illegible] (State here full particulars of the husband's death, when, where and from what cause.) [illegible]

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 18[illegible], 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 [illegible] 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 [illegible] day of [illegible] 1896.

[illegible] Ordinary.

[illegible] Post-office [illegible]

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of DeKalb

Personally Comes Mrs. Nancy Lanier

who being sworn, says on oath, that she is a bona fide resident of said county of DeKalb State of Georgia, and that she has RESIDED in said State continuously ever since all her life 18 That she is the Widow of Privt Lanier who was a Soldier in Company D of the 38th Regiment of Ga Volunteers, that enlisted in said regiment on or about the month of Feb 1862 and served in the Army up to [illegible] 1864 That he lost his life on the 5th day of May 1864 (State here full particulars of the husband's death, when, where and from what cause.) killed in the battle of Spotsylvania Court House on the date above

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1844, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of DeKalb 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 [illegible] day of [illegible] 1897.

[illegible] Ordinary.

Nancy Lanier Post-office [illegible]

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, 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 [illegible] 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 [illegible] day of [illegible] 1896. Ordinary.

her
Nancy X Lanier
mark
Post-office [illegible]

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1844, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of DeKalb 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 [illegible] day of [illegible] 1897. Ordinary.

her
Nancy X Lanier
mark
Post-office [illegible]

POWER OF ATTORNEY.

State of Georgia, DeKalb County.

I, Nancy Lanier hereby authorize L. N. Nash of DeKalb 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 12th day of June 1898.

her
Nancy X Lanier [L. S.]
mark

Executed in the presence of

L. D. Tomlinson
W. M. Redding
Ordinary.

For Those Heretofore Paid.

1898.

No. 2642

WIDOW'S PENSION,

For year ending February 15th, 1898.

PAID TO

Mrs. Nancy Lanier

of

DeKalb County,

Widow of Pready Lanier

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

2/12 1898.

AND HANDED TO

L. N. Nash

GEO. W. HARRISON, STATE PRINTER, ATLANTA

Lanier, Nancy
DeKalb
Pd. W. M. Redding Ord.

POWER OF ATTORNEY.

State of Georgia,
DeKalb County.

I, Nancy Lanier hereby authorize L. N. Nash of DeKalb to receive and receipt for the pension paid hereon and request that he remit same to at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 13 day of June 1899.

her
Nancy X Lanier [L. S.]
mark

Executed in presence of

E. A. Branchamp
W. M. Redding
Ordinary.

For Those Heretofore Paid.

1899.

No. 2472

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAID TO

Mrs. Nancy Lanier

of

DeKalb County

Widow of Pready Lanier

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

2/1 1899.

AND HANDED TO

L. N. Nash

GEO. W. HARRISON, STATE PRINTER, ATLANTA

Lanier, Nancy
DeKalb
Pd. W. M. Redding Ord.

For Those Heretofore Paid.

1898.

NO. 2642

WIDOW'S PENSION,

For year ending February 15th, 1898.

PAID TO

Mrs. Nancy Lanier

OF

DeKalb County,

Widow of Pressly Lanier

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

2/12 1898.

AND HANDED TO

L. N. Mark

GEO. W. HARRISON, STATE PRINTER, ATLANTA

For Those Heretofore Paid.

1899.

NO. 2472

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAID TO

Mrs. Nancy Lanier

OF

DeKalb County,

Widow of Pressly Lanier

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

2/1 1899.

AND HANDED TO

L. N. Mark

GEO. W. HARRISON, STATE PRINTER, ATLANTA

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of DeKalb

Personally Comes Mrs. Nancy Lanier

who, being sworn, says on oath, that she is a bona fide resident of said county of DeKalb State of Georgia, and that she has RESIDED in said State continuously ever since July 14 1822 That she is the Widow of Pressley Lanier who was a Soldier in Company A of the 38th Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of [illegible] 1862 and served in the Army up to May 1864 That he lost his life on the 12th day of May 1864 (State here full particulars of the husband's death, when, where and from what cause.)

was killed at the battle of Spottsylvania Co. Va.

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

I have been allowed a pension as a resident of DeKalb 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 12th day of Jan 1898.

her
Nancy X Lanier
mark

Post-Office Stone Mountain

W. M. Ragsdale Ordinary.

State of Georgia,
DeKalb County.

I W. M. Ragsdale Ordinary of said County, certify that I am well acquainted with Mrs. Nancy Lanier who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the [illegible] day of [illegible] 18[illegible]

Given under my official signature and seal this the 12th day of Jan 1898.

W. M. Ragsdale

(Official Seal)

Ordinary of [illegible] County.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of DeKalb

Personally Comes Mrs. Nancy Lanier

who, being sworn, says on oath, that she is a bona fide resident of said county of DeKalb State of Georgia, and that she has RESIDED in said State continuously ever since July 14th 1822 That she is the Widow of Pressly Lanier who was a soldier in Company A of the 38th Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of Feb 1862 and served in the Army up to May 1864 That he lost his life on the 12th day of May 1864 (State here full particulars of the husband's death, when, where and from what cause.)

was killed at the battle of Spottsylvania Co. Va.

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

I have been allowed a pension as a resident of DeKalb 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 Jan 1899.

her
Nancy X Lanier
mark

W. M. Ragsdale Ordinary.

Post-Office Stone Mtn Ga

State of Georgia,
DeKalb County.

I W. M. Ragsdale Ordinary of said County, certify that I am well acquainted with Mrs. Nancy Lanier 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 14 day of July 1822.

Given under my official signature and seal this the 13th day of Jan 1899.

W. M. Ragsdale

(Official Seal)

Ordinary of DeKalb County

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 a pension as a resident of DeKalb 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 12th day of Jan 1898. — her Nancy X Lanier mark — Post-Office Stone Mountain

W.M. Ragsdale Ordinary.

State of Georgia, DeKalb County. I W.M. Ragsdale Ordinary of said County, certify that I am well acquainted with Mrs. [illegible] who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the [illegible] day of [illegible] 18

Given under my official signature and seal this the 13th day of Jan 1898.

W.M. Ragsdale

(Official Seal) Ordinary of [illegible] County.

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 a pension as a resident of DeKalb 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 Jan 1899. — her Nancy X Lanier mark — Post-Office Stone Mountain Ga

W.M. Ragsdale Ordinary.

State of Georgia, DeKalb County. I W.M. Ragsdale Ordinary of said County, certify that I am well acquainted with Mrs. Nancy Lanier 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 14 day of July 1822, Given under my official signature and seal this the 13th day of Jan 1899.

W.M. Ragsdale

(Official Seal) Ordinary of DeKalb County

POWER OF ATTORNEY.

STATE OF GEORGIA, DeKalb County.

I Nancy Lanier hereby authorize S.N. Nash of DeKalb County to receive and receipt for the pension paid hereon and request that he remit same to [illegible] at [illegible]

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 16 day of Jan 1900.

her Nancy X Lanier mark [L.S.]

Executed in presence of

C.L. Lowery

[illegible]

To Those Heretofore Paid.

1900.

No. 12350

WIDOW'S PENSION,

For year ending February 15th, 1900.

PAID TO Mrs. Nancy Lanier OF DeKalb County, Widow of Beverly Lanier

JNO. W. LINDSEY, Commissioner of Pensions.

WARRANT ISSUED Jan 24 1900, AND HANDED TO S.N. Nash

Geo. W. Harrison, State Printer, Atlanta

Lanier, Nancy

DeKalb

POWER OF ATTORNEY.

STATE OF GEORGIA, DeKalb County.

I, Nancy Lanier hereby authorize S.N. Nash of DeKalb Co. to receive and receipt for the pension paid hereon and request that he remit same to [illegible] at [illegible]

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 9th day of Jan 1901.

her Nancy X Lanier mark [L.S.]

Executed in presence of

W.J. Crumbley

W.M. Ragsdale

To Those Heretofore Paid.

1901.

No. 341

WIDOW'S PENSION,

For year ending February 15th, 1901

PAID TO Mrs. Nancy Lanier OF DeKalb County, Widow of Beverly Lanier

JOHN W. LINDSEY, Commissioner of Pensions.

WARRANT ISSUED Jan 21 1901, AND HANDED TO [illegible]

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

Harrison, Nancy

DeKalb

Lanier, Nancy
DeKalb

To Those Heretofore Paid.

1900.

No. 1230

WIDOW'S PENSION,

For year ending February 15th, 1900.

PAID TO

Mrs. Nancy Lanier

OF

DeKalb County,

Widow of Pressley Lanier

JNO. W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

Feb 14 1900,

AND HANDED TO

S. T. Clark

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

Lanier, Nancy
DeKalb

To Those Heretofore Paid.

1901.

No. 841

WIDOW'S PENSION,

For year ending February 15th, 1901.

PAID TO

Mrs. Nancy Lanier

OF

DeKalb County,

Widow of Pressley Lanier

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

Jan 21 1901,

AND HANDED TO

S. T. Clark

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

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of [illegible] } Personally Comes Mrs. [illegible]

who, being sworn, says on oath, that she is a bona fide resident of said county of [illegible] State of Georgia, and that she has RESIDED in said State continuously ever since [illegible] 18[illegible]. That she is the Widow of [illegible] who was a soldier in Company [illegible] of the [illegible] Regiment of [illegible] Volunteers, that he enlisted in said regiment on or about the month of [illegible] 186[illegible] and served in the Army up to [illegible] 186[illegible]. That he lost his life on the [illegible] day of [illegible] 18[illegible]. (*State here particulars of the husband's death, when, where and from what cause*) [illegible]

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

I have been allowed a pension as a resident of [illegible] County for the year ending February 15th, 189[illegible], and now apply for the pension provided by law for the year ending February 15th, 1900.

Sworn to and subscribed before me, this [illegible] day of [illegible] 1900. [illegible] Ordinary

[illegible] Post Office [illegible]

State of Georgia, [illegible] County. } I [illegible] Ordinary of said County, certify that I am well acquainted with Mrs. [illegible], who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the [illegible] day of [illegible] 18[illegible]

Given under my official signature and seal, this the [illegible] day of [illegible] 1900.

{ Official Seal. }

[illegible] Ordinary of [illegible] County.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of DeKalb } Personally Comes Mrs. Nancy Lanier

who, being sworn, says on oath, that she is a bona fide resident of said County of DeKalb State of Georgia, and that she has RESIDED in said State continuously ever since July 14th 1822. That she is the Widow of Pressley Lanier who was a soldier in Company A of the 36th Regiment of Ga Vols. Volunteers, that he enlisted in said regiment on or about the month of Feb 1862 and served in the Army up to May 1864. That he lost his life on the 12th day of May 1864. (*State here particulars of the husband's death, when, where and from what cause*) Killed at the battle of Spottsylvania

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 a pension as a resident of DeKalb 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 9th day of Jan 1901. W. M. Ragsdale Ordinary. } Nancy Lanier Post Office Stone Mountain

State of Georgia, DeKalb County. } I W. M. Ragsdale Ordinary of said County, certify that I am well acquainted with Mrs. Nancy Lanier, 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 14th day of July 1822

Given under my official signature and seal, this the 9th day of Jan 1901.

{ Official Seal. }

W. M. Ragsdale Ordinary of DeKalb County.

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

I have been allowed a pension as a resident of [illegible] County for the year ending February 15th, 189[illegible], and now apply for the pension provided by law for the year ending February 15th, 1900.

Sworn to and subscribed before me, this [illegible] day of [illegible] 1900.
Ordinary

Post Office [illegible]

State of Georgia, [illegible] County.

I [illegible] Ordinary of said County, certify that I am well acquainted with Mrs. [illegible], who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the [illegible] day of [illegible] 18[illegible].

Given under my official signature and seal, this the [illegible] day of [illegible] 1900.

{ Official Seal. }

Ordinary of [illegible] County.

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 a pension as a resident of DeKalb County for the year ending February 15th, 1[illegible], and now apply for the pension provided by law for the year ending February 15th, 1901.

Sworn to and subscribed before me, this 5th day of Jan 1901.
Wm Rogsdale
Ordinary.

her
Nancy X Lanier
mark
Post Office Stone Mountain

State of Georgia, DeKalb County.

I Wm. M. Rogsdale Ordinary of said County, certify that I am well acquainted with Mrs. Nancy Lanier, 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 14th day of July 1822.

Given under my official signature and seal, this the 9th day of Jan 1901.

{ Official Seal. }

Wm Rogsdale
Ordinary of DeKalb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
DeKalb County.

I, Nancy Lanier, hereby authorize
J. DeVaste of DeKalb County, 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 17
day of Jan 1902.

her
Nancy X Lanier [L. S.]
mark

Executed in presence of
A. W. Rogsdale
[illegible]

To Those Heretofore Paid.

1902.

No. 436

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. Lanier
OF
DeKalb County,
Widow of Peredy Lanier
Co. A Regiment 38th

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED 1902
120
AND HANDED TO
J. W. Rogsdale

GEO. W. HARRISON, BOOK & PAPER RULING CO.

POWER OF ATTORNEY.

STATE OF GEORGIA,
DeKalb County.

I, Nancy Lanier, hereby authorize
A. M. Nash of DeKalb Co.
to receive and receipt for the pension paid hereon, and request that he remit same to
me at Stone Mountain Ga

In Witness Whereof, I have hereunto set my hand and seal, this 5th
day of Jan 1903.

her
Nancy X Lanier [L. S.]
mark

Executed in presence of
A. C. Moore
Wm Rogsdale
[illegible]

[illegible]
DeKalb County

To Those Heretofore Paid.

1903.

No. 357

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. Nancy Lanier
OF
DeKalb County,
Widow of Peredy Lanier
Co. A Regiment 38th

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED 1903
143
AND HANDED TO
J. J. Lanier

GEO. W. HARRISON, BOOK & PAPER RULING CO.

To Those Heretofore Paid.

1902.

No. 436

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. Nancy Lanier

OF

De Kalb County,

Widow of Pressley Lanier

Co. A Regiment 38th

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED 1902

120

AND HANDED TO

W. Rogers

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

Nancy Lanier
De Kalb County

To Those Heretofore Paid.

1903.

No. 287

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. Nancy Lanier

OF

De Kalb County,

Widow of Pressley Lanier

Co. A Regiment 38th

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED 1903.

143

AND HANDED TO

W. Rogers

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

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of De Kalb } PERSONALLY COMES MRS. Lucy Lanier

who, being sworn, says on oath, that she is a bona fide resident of said County of De Kalb State of Georgia, and that she has RESIDED in said State continuously ever since Dec 24th 1877. That she is the Widow of Pressley Lanier who was a soldier in Company A of the 38th Regiment of Ga. Volunteers, that he enlisted in said regiment on or about the month of Feb 1862, and served in the Army up to May, 1864. That he lost his life on the 12th day of May 1864. (State here particulars of the husband's death, when, where and from what cause.) Killed in battle of Spotsylvania C.H. Va.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1863.

I have been paid a pension as a resident of De Kalb 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 15 day of Jan 1902. W. W. Rogersdale, Ordinary. } her Lucy X Lanier mark, Post Office

State of Georgia, De Kalb, County. } I, W. W. Rogersdale, Ordinary of said County, certify that I am well acquainted with Mrs. Lucy Lanier, 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 24th day of Dec 1877.

Given under my official signature and seal, this the 15th day of Jan 1902.

{ Official Seal. }

W. W. Rogersdale
Ordinary of De Kalb County.

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

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of De Kalb } PERSONALLY COMES MRS. Nancy Lanier

who, being sworn says on oath, that she is a bona fide resident of said County of De Kalb State of Georgia, and that she has RESIDED in said State continuously ever since July 14th 1877. That she is the Widow of Pressley Lanier who was a soldier in Company A of the 38th Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of Feb 1862, and served in the Army up to May, 1864. That he lost his life on the 12th day of May 1864. (State here particulars of the husband's death, when, where and from what cause.) Killed in the battle of Spotsylvania C.H. Va.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1863.

I have been paid a pension as a resident of De Kalb 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 4 day of Jan 1903. W. W. Rogersdale, Ordinary. } her Nancy X Lanier mark, Post Office Stone Mountain, Ga.

State of Georgia, De Kalb, County. } I, W. W. Rogersdale, Ordinary of said County, certify that I am well acquainted with Mrs. Nancy Lanier, 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 14th day of July 1877.

Given under my official signature and seal, this the 4 day of Jan 1903.

{ Official Seal. }

W. W. Rogersdale
Ordinary of De Kalb County.

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

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 paid a pension as a resident of De Kalb 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 15 day of Jan 1902. W. M. Rogdale, Ordinary. } Nancy X Lanier, Post-Office

State of Georgia, De Kalb, County. } I, W. M. Rogdale, Ordinary of said County, certify that I am well acquainted with Mrs. Nancy Lanier, 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 14 day of Dec 1827.

Given under my official signature and seal, this the 15 day of Jan 1902.

{ Official Seal. } W. M. Rogdale, Ordinary of De Kalb County.

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

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 paid a pension as a resident of De Kalb 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 9 day of Jany 1903. W. M. Rogdale, Ordinary. } Nancy Lanier, Post-Office Stone Mountain, Ga

State of Georgia, De Kalb, County. } I, W. M. Rogdale, Ordinary of said County, certify that I am well acquainted with Mrs. Nancy Lanier, 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 14 day of Dec 1822.

Given under my official signature and seal, this the 9 day of Jany 1903.

{ Official Seal. } W. M. Rogdale, Ordinary of De Kalb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA, Dekalb COUNTY.

I, Fanny Lanier of De Kalb County hereby authorize J. N. Nash to receive and receipt for the pension paid hereon, and request that he remit same to at Lithonia Ga

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

Fanny her Lanier mark [L. S.]

Executed in presence of
James R. George
Ordinary

POWER OF ATTORNEY.

STATE OF GEORGIA, De Kalb COUNTY.

I, Nancy Lanier, hereby authorize J. N. Nash of Stone Mountain to receive and receipt for the pension paid hereon, and request that he remit same to me at Stone Mountain

In Witness Whereof, I have hereunto set my hand and seal, this 11th day of Jan 1905.

Nancy her X mark [L. S.]

Executed in presence of
James R. George
Ordinary

TO THOSE HERETOFORE PAID.

1904.

No. 203

WIDOW'S PENSION

FOR YEAR ENDING DECEMBER 31, 1904

PAID TO Mrs. Nancy Lanier

Widow of E. Etals Co. A Regiment 35th Georgia County.

JOHN W. LINDSEY, *Commissioner of Pensions.*

WARRANT ISSUED 1-30 1904.

AND HANDED TO J. N. Nash

Geo. W. Harrison, State Printer, Atlanta.

To Those Heretofore Paid.

1905.

No. 209

WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO Mrs. Nancy Lanier

Widow of E. Etals Co. A Regiment 35th Georgia County.

JOHN W. LINDSEY, *Commissioner of Pensions.*

WARRANT ISSUED 1-12 1906.

AND HANDED TO J. N. Nash

TO THOSE HERETOFORE PAID.

1904.

No. 203

WIDOW'S PENSION

FOR

YEAR ENDING DECEMBER 31, 1904.

PAID TO

Mrs Nancy Lanier

Widow of Presley Lanier

Co. A Regiment 38th

County.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1-13-05 1904.

AND HANDED TO

Lanier

Geo. W. Harrison, State Printer, Atlanta.

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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 43

I have been paid a pension as a resident of DeKalb 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 Jany 1904. James R George Ordinary. Nancy her + mark Lanier Post Office

State of Georgia, DeKalb County. I, James R George Ordinary of said County, certify that I am well acquainted with Mrs. Nancy Lanier 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 14 day of July 18 72

Given under my official signature and seal, this the 18 day of Jany 1904.

Official Seal. James R George Ordinary of DeKalb County.

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

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 DeKalb 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 11 day of Jany 1905. James R George Ordinary. Nancy her + mark Lanier Post-Office

State of Georgia, DeKalb County. I, James R. George Ordinary of said County, certify that I am well acquainted with Mrs. Nancy Lanier 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 11th day of Jany 1905

Official Seal. James R George Ordinary of DeKalb County

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

POWER OF ATTORNEY.

STATE OF GEORGIA, DeKalb County.

I, Nancy Lanier, hereby authorize J H Nash of DeKalb Co

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

In Witness Whereof, I have hereunto set my hand and seal, this 16th day of June 1906.

Nancy her + mark Lanier [L. S.]

Executed in presence of
James R George
Ordinary

To Those Heretofore Paid.

1906.

No. 148

WIDOW'S PENSION

For year ending Dec. 31, 1906.

PAID TO

Mrs. Nancy Lanier

OF

DeKalb County,

Widow of Pvt Wesley Lanier

Co. K Regiment 35th Ga

JOHN W. LINDSEY, *Commissioner of Pensions.*

WARRANT ISSUED 1/22 1906,

AND HANDED TO

Ord

Nancy Lanier

DeKalb County

POWER OF ATTORNEY.

STATE OF GEORGIA, DeKALB. County.

I, Nancy Lanier hereby authorize J H Nash

to receive and receipt for the pension paid hereon, and request that he remit same to Nancy Lanier at St Mountain Ga

In Witness Whereof, I have hereunto set my hand and seal, this 11th day of January 1907.

Nancy her + mark Lanier [L. S.]

Executed in presence of
James R George
Ordinary

To Those Heretofore Paid.

1907.

No. 211

WIDOW'S PENSION

For Year ending Dec. 31, 1907.

PAID TO

Mrs. Nancy Lanier

OF

DeKALB County,

Widow of Wesley Lanier

Co. K Regiment 35th

JOHN W. LINDSEY, *Commissioner of Pensions.*

WARRANT ISSUED 1/21 1907,

AND HANDED TO

Ord

To Those Heretofore Paid.

1906.

No. 148

WIDOW'S PENSION

For year ending Dec. 31, 1906.

PAID TO

Mrs. Nancy Lanier

OF

De Kalb County,

Widow of Wesley Lanier

Co. K Regiment 35 Ga

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

12-2 1906,

AND HANDED TO

[illegible]

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

Form No. 1

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of De Kalb

PERSONALLY COMES MRS Nancy Lanier

who, being sworn, says on oath that she is a bona fide resident of said County of De Kalb State of Georgia, and that she has RESIDED in said State continuously ever since Aug 14, 1822. That she is the Widow of Wesley Lanier who was a soldier in Company K of the 35 Georgia Regiment of Volunteers, that he enlisted in said regiment on or about the month of Feby 1862, and served in the Army up to May 1864. That he lost his life on the day of May 1864 (*State here particulars of the husband's death, when, where and from what cause.*)

Killed at Spotsylvania.

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 De Kalb 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 10 day of Jany 1906.

James R George, Ordinary.

Nancy her X mark Lanier

Post Office

State of Georgia, De Kalb County.

I, James R George Ordinary of said County, certify that I am well acquainted with Mrs. Nancy Lanier, 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 10 day of Jany 1906.

{ Official Seal }

James R George
Ordinary of De Kalb County

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

Senior, Nancy
De Kalb County

To Those Heretofore Paid.

1907.

No. 211

WIDOW'S PENSION

For Year ending Dec. 31, 1907.

PAID TO

Mrs. Nancy Lanier

OF

DeKALB. County,

Widow of Wesley Lanier

Co. K Regiment 35th

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1/21 1907,

AND HANDED TO

[illegible]

Geo. W. Harrison, Mgr. Printing, Atlanta.

Form No. 1

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of DeKALB.

PERSONALLY COMES MRS. Nancy Lanier

who, being sworn says on oath, that she is a bona fide resident of said County of DeKALB. State of Georgia, and that she has RESIDED in said State continuously ever since That she is the Widow of Wesley Lanier who was a soldier in Company D. of the 38th Ga Regiment of Volunteers, that he enlisted in said regiment on or about the month of Feby 1862, and served in the Army up to 186 That he lost his life on the day of 18 (*State here particulars of the husband's death, when, where and from what cause.*)

Killed Spotsylvania, May. 1864

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

I have been paid a pension as a resident of [illegible] 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 11 day of Jany 1907.

James R George, Ordinary.

Nancy her X mark Lanier

Post Office

State of Georgia, DeKALB. County.

I, James R. George Ordinary of said County, certify that I am well acquainted with Mrs. Nancy Lanier 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 11 day of [illegible] 1907.

{ Official Seal }

James R George
Ordinary of DeKALB. County

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

DeKalb State of Georgia, and that she has RESIDED in said State continuously ever since July 14, 1822. That she is the Widow of Wesley Lanier who was a soldier in Company D of the 38 Georgia Regiment of Volunteers, that he enlisted in said regiment on or about the month of Feby 186 2, and served in the Army up to May 1864 That he lost his life on the day of May 1864 (*State here particulars of the husband's death, when, where and from what cause.*) Killed at Spotsylvania.

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 DeKalb 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 10 day of Jany 1906. James R George, Ordinary.

her Nancy X Lanier mark
Post Office

State of Georgia, DeKalb County.

I, James R George Ordinary of said County, certify that I am well acquainted with Mrs. Nancy Lanier, 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 10 day of Jany 1906.

Official Seal

James R George
Ordinary of DeKalb County.

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

DeKALB. State of Georgia, and that she has RESIDED in said State continuously ever since That she is the Widow of Wesley Lanier who was a soldier in Company D. of the 38th Ga Regiment of Volunteers, that he enlisted in said regiment on or about the month of Feby 1862, and served in the Army up to 186 That he lost his life on the day of 18 (*State here particulars of the husband's death, when, where and from what cause.*) Killed Spotsylvania May. 1864

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

I have been paid a pension as a resident of DeKALB 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 11 day of Jany 1907. James R George, Ordinary.

her Nancy X Lanier mark
Post Office

State of Georgia, DeKALB County.

I, James R George Ordinary of said County, certify that I am well acquainted with Mrs. Nancy Lanier, 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 11 day of 1907

Official Seal

James R George
Ordinary of DeKALB. County

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

Lanier, D. S. (Mrs.)
DeKalb Co.

En- C.R. Jan 1911
No.

Widow's Application

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

County DeKalb

Name Mrs. D. S. Lanier

Widow of D. S. Lanier

Approved

J. W. LINDSEY,
Commissioner of Pensions

Chas. P. Byrd, State Printer, Atlanta.

Name Mrs. D. S. Lanier

Widow of D. S. Lanier

Approved

J. W. LINDSEY,
Commissioner of Pensions

Chas. P. Byrd, State Printer, Atlanta.

Lanier D. S. (Mrs.)
DeKalb Co.
Ga. M.W. Jan 1911
No.

Widow's Application

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

County DeKalb

Name Mrs. D. S. Lanier

Widow of D. S. Lanier

Approved

J. W. LINDSEY,
Commissioner of Pensions

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,
DEKALB County.

Personally before me comes Mrs. D. S. Lanier of said County, who, after being duly sworn, on oath says, that she is the widow of D. S. Lanier to whom in the County of Gwinnett State of Georgia she was married on the 29th day of July 1866 and that she remained his wife, and resided with him to the date of his death in December 1908 and that she has not since his death remarried. At the time of his death he was a resident of DeKalb County, in 1908 said State of Georgia, and he was on the Indigent Pension Roll of the State and paida pension of $60.00 in DeKalb County for 1908 per annum, on account of being a soldier in Company F. Thirty-fifth Georgia Regiment (Volunteers of State Militia.)

At the death of D. S. Lanier he was in the use and possession of the following property a house and lot of two acres, in East End DeKalb Co., Ga. of the cash value of $ $800.00

What property of any kind and of any value have you in your use, control and possession now and the cash value (State fully.) a house and lot in East End. DeKalb County, Ga

Two	Acres land	Valued at about	$ 800.00
	Horses	Valued at	$ 25.00
	Hogs, Cows, etc	valued	$ 40.00
	Total Cash value of all property		$ 865.00

That she is now a bonafide resident citizen of said County of DeKalb and she has so continuously resided since day of December 1898

Sworn to and subscribed before me, this the 19 day of August 1910

Mrs. D. S. Lanier

James R. Georgia Ordinary

of DeKalb County.

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

STATE OF GEORGIA,
Gwinnett County.

Personally before me come W. J. Rawlins 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. D. S. Lanier who made the foregoing affidavit, is the lawful widow of D. S. Lanier who died in Dekalb County in said State of Georgia on 22nd day of Dec, 1908, and that she has not since remarried. That she became the wife of D. S. Lanier on the 27th day of July, 1866 and that she and he had resided together as man and wife continuously since 27th day of July 1866, until his death. and that the D. S. Lanier was the same man who was on the pension roll of said State from Dekalb County when he died.

Sworn to and subscribed before me, this the 5th day of Sept 1910,

W. J. Rawlins

G. G. Robinson Ordinary,

of Gwinnett County.

That she is now a bonafide resident citizen of said County of DeKalb and she has so continuously resided since day of December 1898

Sworn to and subscribed before me, this the 19 day of August 1910 Mrs. D.S. Lanier

James R George Ordinary.

of DeKalb County.

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

STATE OF GEORGIA,
Gwinnett County.

Personally before me come W.J.Rawlins 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. D.S.Lanier who made the foregoing affidavit, is the lawful widow of D.S.Lanier who died in Dekalb County in said State of Georgia on 22nd day of Dec, 1908, and that she has not since remarried. That she became the wife of D.S.Lanier on the 27th day of July, 1866 and that she and he had resided together as man and wife continuously since 27th day of July 1866, until his death. and that the D.S.Lanier was the same man who was on the pension roll of said State from Dekalb County when he died.

Sworn to and subscribed before me, this the 5th day of Sept 1910, W.J. Rawlins

G G Robinson Ordinary.

of Gwinnett County.

Georgia Gwinnett County,

I. G.G.Robinson ordinary in and for said county, do certify that the within is a true and correct Copy as appears on the records of this Office,

Given under my hand and official Seal of Office,

This 5th day of Sept, 1910,

G. G. Robinson Ordinary.

MARRIAGE LICENSE

OF

AND

Issued

and recorded on page

Book of Marriage Licenses,

Ordinary.

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,
DeKalb County. R L Coley

Personally before me comes N M Hastings 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 D S Lanier at his death on the 22 day of Dec 1908 that she and he were in the use, possession and control of the following property at his death to wit: a House & Lot in East End DeKalb Co

of the value of $1000.00 That she is now in the use, possession and control of the following property to wit: one House & Lot in East End DeKalb Co

of the value of $1000.00 R L Coley N M Hastings

Sworn to and subscribed before me, this the 7 day of Sept 1910

James R George Ordinary.

of DeKalb County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
DeKalb County.

I, James R George Ordinary of said County, do certify that I know Mrs D S Lanier 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 4th day of Nov 1908

that I also know R L Coley & N M Hastings who I know to be a resident free holder of said County that all of the foregoing was 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 DeKalb County shows that Mrs D S Lanier returned property to the amount of None for 1908 $ 850 for 1909 $ 900 for 1910 $ 925

Sworn under my hand and official seal of office this 7 day of Sept 1910

(SEAL.) James R George Ordinary. DeKalb 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, Gwinnett County,

I. G.G.Robinson ordinary in and for said county, do certify that the within is a true and correct Copy as appears on the records of this Office,

Given under my hand and official Seal of Office,

This 5th day of Sept, 1910,

G. G. Robinson Ordinary.

MARRIAGE LICENSE

OF

AND

Issued

and recorded on page

Book of Marriage Licenses,

Ordinary.

said County and knew her said husband D S Lanier at his death on the 4th day of Dec 1908 that she and he were in the use, possession and control of the following property at his death to wit: a House & Lot in East End DeKalb Co of the value of $1000.00 That she is now in the use, possession and control of the following property to wit: one House & Lot in East End DeKalb Co of the value of $1000.00

Sworn to and subscribed before me, this the 7 day of Sept 1910

R. L. Coley
Asst. Stenographer

James R George Ordinary
of DeKalb County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

DeKalb County.

I, James R George Ordinary of said County, do certify, that I know Mrs D S Lanier 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 4th day of Dec 1908

That I also know R S Clay & N M Hardeman 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 DeKalb County shows that Mrs D S Lanier returned property to the amount of None for 1908 $ 855- for 1909 $ 920 for 1910 $ 920-

Sworn under my hand and official seal of office this 7 day of Sept 1910

(SEAL.) James R George Ordinary DeKalb County.

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

No. 492

MARRIAGE LICENSE.

STATE OF GEORGIA — COUNTY OF GWINNETT

(Copy)

To any JUDGE, JUSTICE of the PEACE, or MINISTER of the GOSPEL:

You are hereby authorized to join David S.Lanier and R.Rawlins 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 thereon of the fact and date of the Marriage.

Given under my hand, and seal, this 27th day of July, 1866 xxx

G.T.Pakeatraw, (LS)
Ordinary

STATE OF GEORGIA — CERTIFICATE. — GWINNETT COUNTY

I Certify that David S.Lanier and R.Rawlins, were joined in Matrimony by me, this 27th day of July, 1866, xxx

Recorded 19

W.D.Almand, M.G
Ordinary.

MARRIAGE LICENSE

STATE OF GEORGIA — COUNTY OF GWINNETT

(Copy)

To any JUDGE, JUSTICE of the PEACE, or MINISTER of the GOSPEL:

You are hereby authorized to join David S.Lanier and R.Rawlins 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 27th day of July, 1866 xxx

G.T.Bakestraw, (LS) Ordinary

STATE OF GEORGIA — GWINNETT COUNTY

I Certify that David S.Lanier and R.Rawlins, were joined in Matrimony by me this 27th day of July, 1866, xxx

Recorded 19

W.D.Almand, M.G

Ordinary.

Lanier, Selela J.
DeKalb Co
GA Vol Inf

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 DeKalb

Name Selela Jane Lanier

Widow of W. S. Lanier

Company K = 36th 41st Regiment

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

10/11/46

Widow of W. S. Ranier

Company K=36th 42 Regiment

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

10/11/16

Widow's Application

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

County DeKalb

Name Mrs Seleta Jane Ranier

Widow of W. S. Ranier

Company K=36th 42 Regiment

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

10/11/16

Ranier, Seleta J.
Co. K 36th Ga.
Pvt.

No.

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,
DeKalb County.

Personally before me comes Seleta Jane Ranier of said County, who, after being duly sworn, on oath says, that she is the widow of W. S. Ranier to whom in the County of DeKalb State of Georgia she was married on the 2 day of Nov 1866 and that she remained his wife, and resided with him to the date of his death on April 27 1916 and that she has not since his death remarried. At the time of his death he was a resident of DeKalb County, in said State of Georgia, and he was on the Indigent Pension Roll of the State and paid a pension of $60.00 in DeKalb County for 1916 per annum, on account of being a soldier in Company K=36th 42 Regiment Ga (Volunteers of State Militia.)

At the death of W. S. Ranier he was in the use and possession of the following property Nothing 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 and where situated.) Nothing

Acres land None	$ —
Horses and Mules	$ —
Hogs, Cows, etc	$ —
Total Cash value of all property	$ —

That she is now a bona fide resident citizen of said County of DeKalb and she has so continuously resided since 18 Years day of 19

Sworn to and subscribed before me, this the 11 day of August 1916.

James R. George Ordinary,
of DeKalb County.

Seleta Jane Ranier
her mark

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

STATE OF GEORGIA,
DeKalb County.

Personally before me come W. T. Arnold 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. Seleta Jane Ranier who made the foregoing affidavit, is the lawful widow of W. S. Ranier who died in DeKalb County in said State of Georgia on 27 day of April 1916 and that she has not since remarried. That she became the wife of W. S. Ranier on the 2 day of April 1866 and that she and he had resided together as man and wife continuously since 2 day of April 1866 and that the he was the same man who was on the pension roll of said State from DeKalb County when he died.

Sworn to and subscribed before me, this the 11 day of August 1916.

W. T. Arnold
his mark

James R. George Ordinary,
of DeKalb County.

That she is now a bona fide resident citizen of said County of DeKalb and she has so continuously resided since 18 years day of 19

Sworn to and subscribed before me, this the 11 day of August 1916. Selesta Jane Lanier her mark

James R George Ordinary, of DeKalb County.

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

STATE OF GEORGIA, DeKalb County.

Personally before me come W. T. Arnold 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. Selesta Jane Lanier who made the foregoing affidavit, is the lawful widow of W. S. Lanier who died in DeKalb County in said State of Georgia on 27 day of April 1916 and that she has not since remarried. That she became the wife of W. S. Lanier on the 2 day of April 1865 and that she and he had resided together as man and wife continuously since 2 day of April 1865 and that the he was the same man who was on the pension roll of said State from DeKalb County when he died.

Sworn to and subscribed before me, this the 11 day of August 1916. W. T. Arnold his mark

James R George Ordinary, of DeKalb County.

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA, DeKalb County.

Personally before me comes Thos C Mason & W T Arnold who after being sworn on oath says, that they are freeholders of said County, and that they know Selesta Jane Lanier of said County and knew her said husband W. S. Lanier at his death on the 27 day of April 1916 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 $ Nothing 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 11 day of August 1916. Thos C Mason & W T Arnold his X mark

James R George Ordinary, of DeKalb County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, County.

I, Ordinary of said County, do certify, that, I know Mrs. 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 191

That I also know witness as to marriage and I also 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 $ for 1909 $ for 1910 $ for 1911 $ for 1912 $ for 1913 $ for 1914 $ for 1915 $ for 1916

Sworn under my hand and official seal of office this 14 day of Oct 1916

(SEAL.) James R George Ordinary, DeKalb 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.

of the value of $.....

Sworn to and subscribed before me, this the 11 day of August 1916. | G.G. Robinson + W.T. Arnold his X Mark.

James R. George, Ordinary,

of DeKalb County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

..... County.

I, ... Ordinary of said County, do certify, that, I know Mrs. ..... 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 ..... 191..

That I also know ..... witness as to marriage and I also 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 $..... for 1909 $..... for 1910 $..... for 1911 $..... for 1912 $..... for 1913 $..... for 1914 $..... for 1915 $..... for 1916

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

(SEAL.) James R. George Ordinary.

DeKalb 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 Gwinnett County.

I, G.G.Robinson, Ordinary for said County, do certify that, the within and foregoing, contains a true and correct transcript from the records of this office, the same being recorded in Marraige book # 4, page 479.

Given under my hand and seal of office.

This 29th day of September, 1916

G.G. Robinson

Ordinary Gwinnett County, Georgia

MARRIAGE LICENSE

OF

AND

Issued 19

and Recorded on Page Book

of Marriage Licenses.

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.

Georgia Gwinnett County.

I, G.G.Robinson, Ordinary for said County, do certify that, the within and foregoing, contains a true and correct transcript from the records of this office, the same being recorded in Marraige book # 4, page 479.

Given under my hand and seal of office.

This 29th day of September, 1916

G. G. Robinson

Ordinary Gwinnett County, Georgia

MARRIAGE LICENSE

OF

AND

Issued 19

and Recorded on Page Book

of Marriage Licenses.

Ordinary.

the within and foregoing, contains a true and correct transcript from the records of this office, the same being recorded in Marraige book # 4, page 479.

Given under my hand and seal of office.

This 29th day of September, 1916

G. G. Blackmon

Ordinary Gwinnett County, Georgia

MARRIAGE LICENSE

OF

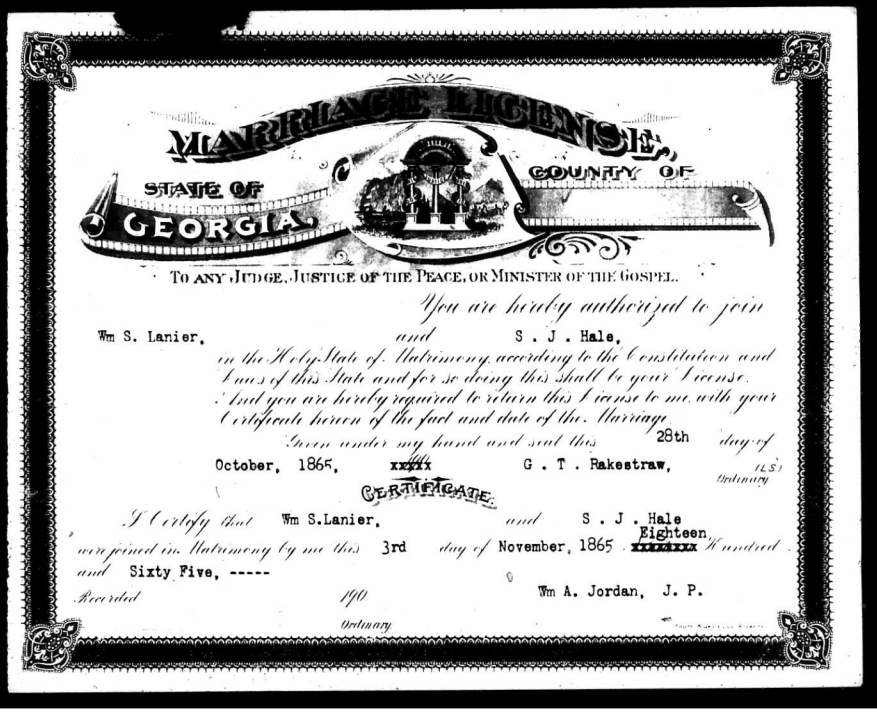
AND

Issued 19

and Recorded on Page Book

of Marriage Licenses.

Ordinary.



MARRIAGE LICENSE

STATE OF GEORGIA

COUNTY OF

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

You are hereby authorized to join

Wm S. Lanier, *and* S . J . Hale,

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 28th *day of*

October, 1865, xxxxx G . T . Rakestraw, (L.S.)

Ordinary

CERTIFICATE

I Certify that Wm S.Lanier, *and* S . J . Hale

were joined in Matrimony by me this 3rd *day of* November, 1865 - Eighteen xxxxxxx Hundred and Sixty Five, -----

Recorded 190

Wm A. Jordan, J. P.

Ordinary

MARRIAGE LICENSE

STATE OF GEORGIA, COUNTY OF

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

You are hereby authorized to join

Wm S. Lanier, *and* S . J . Hale,

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 28th *day of* October, 1865. xxxxx G . T . Rakestraw, (L.S.) *Ordinary*

CERTIFICATE.

I Certify that Wm S.Lanier, *and* S . J . Hale *were joined in Matrimony by me this* 3rd *day of* November, 1865 Eighteen xxxxxxx *Hundred and* Sixty Five, -----

Recorded 190 *Ordinary*

Wm A. Jordan, J. P.

Lanier W. S.
Dekalb Co.
Ol Jr. 1917

No.

INDIGENT PENSION.

1906

Name W. S. Lanier

County Dekalb

Co. K 36 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.

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

Feb 30 06

POWER OF ATTORNEY.

STATE OF GEORGIA, }
COUNTY. }

I, _____ of _____ 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 _____ 190__

Executed in presence of

_____ [L. S.]

Approved _____ 190__

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

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

F B 06

TORNEY.

hereby authorize

of

t he remit same to

by

day of 190

[L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA, }
_____ COUNTY. }

I, _____ hereby authorize

_____ of _____

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

_____ at _____ by _____

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

_____ [L. S.]

Executed in presence of

_____

_____

INDIGENT PENSION. 1906

No. _____

Name W. J. Lanier

County DeKalb

Co. K 36 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.

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

F B 06

QUESTIONS FOR APPLICANT.

Every Question MUST Be Answered.

STATE OF GEORGIA, }
DeKalb COUNTY. }

I, W. J. Lanier 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.)
Wallace P. O. DeKalb Co Ga

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

3. When and where were you born? Gwinnett County Ga

4. When and where and in what company and regiment did you enlist or serve? Co K 36 Ga Inf May 1861 enlisted in Gwinnett County

5. How long did you remain in such company and regiment? until Surrender of our Army

6. When and where was your company and regiment surrendered and discharged? High Pt N C Moore Greensboro N C I Surrendered same Johnston

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? Was present

9. How much can you earn (gross) per annum by your own exertions or labor? 150.00

10. What has been your occupation since 1865? Farmer

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

12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight?
Have been for the last four years gradually failing - & have Catarah & Heart & Rheumatism -

13. What property, real and personal, or income, do you possess, and its gross value? Nothing in property

14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904 and 1905, and what disposition, if any, by sale or gift, have you made of same? None

15. In what County did you reside during those years, and what property did you then return for taxation? DeKalb Co Nothing for taxation

16. How were you supported during the years 1901, 1902, 1903, 1904 and 1905? By members of my family

17. How much did your support cost for each of those years, and what amount did you contribute thereto by your own labor or income? 50 to 100 - Contributed Nothing

18. What was your employment during 1901, 1902, 1903, 1904 and 1905? What pay did you receive in each year? Farmed - had a few dollars

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? My Wife named Sidelia 58 yrs William Stanford aged 17 - have no Home Stock or other proper of much Value

20. Are you receiving any pension? If so, what amount and for what disability? None

21. Have you ever made an application for pension before? None Accepted

22. How many applications have you ever made and under what class? None Dont n/c

Sworn to and subscribed before me this the 19 day of Sept 1905

James R. George Ordinary of DeKalb County.

W. J. Lanier
Applicant.

INDIGENT PENSION.

1906

No. 1

Name W. J. Lanier

County DeKalb

Co. R. 36 Dist. 42 Regt. 100

Approved

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. Harris, Agt., Atlanta, Ga. 1906

Every Question Must Be Answered.

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

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

Have been for the last four years Maryally disabled - & have Catarach up head & Rheumatism -

13. What property, real and personal, or income, do you posses, and its gross value? Nothing in property

14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904 and 1905, and what disposition, if any, by sale or gift, have you made of same? None

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

DeKalb Co nothing for taxation

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

Members of my family

17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? 50 to 100 - Contributed Nothing

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

farmer - had a few Dollars -

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 Nancy Selah 50 J. William Sampson age 12 - have no Home stead - or other proper of much Value

20. Are you receiving any pension? If so, what amount and for what disability? - None -

21. Have you ever made an application for pension before? - None applied.

22. How many applications have you ever made and under what class? None

Sworn to and subscribed before me this the 19 day of Sept 1905

James R George Ordinary of DeKalb County.

W. J. Lanier Applicant.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA, DeKalb COUNTY.

Dr. W. S. Arnold of said State and County, having been presented as a witness in support of the application of Wm S Lanier 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. S. Arnold Wallace P.O. DeKalb Co Ga

2. Are you acquainted with W. S. Lanier the applicant: if so how long have you known him? am - Know him - for 60 years

3. Who does he reside, and how long and since when has he been a resident of this State?

in DeKalb County Ga. resident - for last years

4. When, where and in what company and regiment did he enlist, and how do you know?

In Commonwealth Ga - Co B, 42nd Ga Regt - 1862 - in march

5. Were you a member of the same company and regiment? Not with the Consolidation - which took place in 1865

6. How long did he perform regular military duty? - from March 1862 to the Surrender

7. When and where was his command surrendered? - at Neigh P.O. N.C. - Means Greensboro N.C. At that being Consolidated with the 42nd Ga Regt

8. Were you present when it surrendered? - I was -

9. Was applicant present? - He was

10. If he was not present where was he? - was present

When did he leave his command? — For what cause? —

By what authority he left? — How do you know all of this?

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

None - I Know None Else

12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904 and 1905, and what disposition, if any, did he make of same? - None of same

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

None

14. What is the applicant's occupation and physical condition? farmer - From age & general debility & gradual decline in health

15. Is the applicant unable to support himself by labor of any sort; if so, why? - unable answered in No 14 -

16. How was he supported during the years 1901, 1902, 1903, 1904 and 1905? - by his family -

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

About fifty Dollars - not over

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code from Rheumatism - Catarrah of the head with also a Kidney trouble -

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

Selah J. - William Sampson - 12 years - No property except Small amt Home Hold goods

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

Sworn to and subscribed before me, this the 19 day of Sept 1905

James R George Ordinary

W. S. Arnold his Witness.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA, DeKalb COUNTY.

Personally came before me Tilley McCleskey and [illegible], both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully W. S. Lanier, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

[illegible]

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

Sworn to and subscribed, before me, this the 19 day of Sept 1905

James R George Ordinary. — J. M. Goss, M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, DeKalb COUNTY.

I, James R. George Ordinary, in and for said County, hereby certify that the applicant W. S. Lanier resides in said County, and has been a bona fide resident of this State since the 15 day of Feb 1841 and that the witnesses, viz: W. S. Arnold 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 County shows that applicant returned for taxation in his name in 1901 Nothing Dollars of property, and in 1902 Dollars of property; in 1903 Dollars of property; in 1904 Dollars of property; in 1905 Dollars of property.

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

Witness my hand and seal of office, this 19 day of Sept 1905

James R George Ordinary of DeKalb 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.

2. Are you acquainted with W S Lanier, the applicant; if so how long have you known him? all - Known him - for 60 years

3. Where does he reside, and how long and since when has he been a resident of this State? in DeKalb County Ga. resident - for 64 years

4. When, where and in what company and regiment did he enlist, and how do you know? In Lamars Ga - Co B, 42nd Ga Regt - 1862 - in March

5. Were you a member of the same company and regiment? Not until the Consolidation - which took 1865

6. How long did he perform regular military duty? - from March 1862 to the Surrender

7. When and where was his command surrendered? - at Raleigh N.C. - Near Greensboro N.C. - It then being Consolidated with the 42nd Ga Regt

8. Were you present when it surrendered? - I was -

9. Was applicant present? - He was

10. If he was not present, where was he? - I was present

When did he leave his command? — For what cause? —

By what authority he left? — How do you know all of this?

11. What property, effects or income has the applicant? (Give your means of knowledge.) None - I live near him

12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904 and 1905, and what disposition, if any, did he make of same? - None of them

13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? None

14. What is the applicant's occupation and physical condition? Farmer - From age & general debility & gradual decline in health

15. Is the applicant unable to support himself by labor of any sort; if so, why? - Unable answered in 11 - 14 -

16. How was he supported during the years 1901, 1902, 1903, 1904 and 1905? - By his family -

17. What portion of his support for these four years was derived from his own labor or income? About fifty Dollars - Not over

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code. From Rheumatism - Catarrah of the Head - with also a Kidney trouble -

19. Who composes family? What property have they? Children's ages and their earning capacity? Selah J. - William Sampson - 12 years - No property except small amt Farm Tools good

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

Sworn to and subscribed before me, this the 19 day of Sept 1905

James R George Ordinary.

W. O. Arnold Witness.

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

Chronic Nervous Condition Rheumatism Catarrh of Head Kidney trouble Enlarged Prostate Gland Unable to Labor & Living on my Farm

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

Sworn to and subscribed before me, this the 19 day of Sept 1905

James R George Ordinary.

W. O. Arnold Witness.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, DeKalb COUNTY.

I, James R George Ordinary, in and for said County, hereby certify that the applicant W. S. Lanier resides in said County, and has been a bona fide resident of this State since the 15 day of Feb 1841 and that the witnesses, viz: W. O. Arnold

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 DeKalb County shows that applicant returned for taxation in his name in 1901 Nothing Dollars of property, and in 1902 Dollars of property; in 1903 Dollars of property; in 1904 Dollars of property; in 1905 Dollars of property.

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

Witness my hand and seal of office, this 19 day of Sept 1905

James R George Ordinary of DeKalb 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.

Lanier, W.S.
DeKalb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED)

No. 7411

INDIGENT SOLDIER'S PENSION 1907.

Name W. S. Lanier

County DeKalb

Co. K Regiment 36th Ga Inf

WARRANT ISSUED

1/3 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

POWER OF ATTORNEY.

STATE OF GEORGIA, COUNTY.

I, [illegible], of [illegible], hereby authorize [illegible] to receive and receipt for the pension allowed, and request that he remit same to [illegible] at [illegible]

Witness my hand and seal, this [illegible] day of [illegible] 1907.

by [illegible] [L. S.]

Executed in presence of

[illegible]

Co. K Regiment 36th Ga Inf

WARRANT ISSUED

1/3 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

no date

day of 1907.

[L. S.]

red, and request that be remit same to

, hereby authorize

TTORNEY.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Decatur County.

Personally appears W. S. Lanier of Dec[illegible] 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 Feby 1841; that he is 65 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 K, of 36th Regiment of Ga Inf; that his physical condition is as follows: Paralysis and Rheumatism

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 Dec[illegible] County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 4 day of Jany 1907.

W S Lanier

James R George Ordinary.

State of Georgia,

Dec[illegible] County.

I, James R George Ordinary of said County, do certify that I am well acquainted with W. S. Lanier the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1907.

James R George

Ordinary Dec[illegible] County.

Affix your seal here

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

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 4 day of July 1907. W S Lanier

James R George Ordinary.

State of Georgia,

_____ **County.**

I, James R George Ordinary of said County, do certify that I am well acquainted with W S Lanier the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 July 1907.

James R George

Ordinary _____ County.

Affix your seal here

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

NAME Lanier, W.S. YEAR 1907 COUNTY DeKalb

WHEN AND WHERE BORN? Gwinett County, Georgia. (Resident of Ga. 64 years)

ENLISTED WHEN AND WHERE? May 1862, Gwinett County, Ga.

RANK.

COMPANY AND REGIMENT? Co.K. 36th.Ga. Regt. (consolidated) Co.B. 42nd. Ga.Regt.
(Witness states- March 1865. Co.K. 36th. Regt. consolidated with)

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED? High Point,N.C. near Greensboro,N.C. Surrendered under orders Gen.J.E.Johnson.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. W.P. Arnold, Co.B. 42nd.Ga.Regt.-Same Command- No data. (after the consolidation)

mh.

WHEN AND WHERE BORN? Gwinett County, Georgia.
(Resident of Ga. 64 years)

ENLISTED WHEN AND WHERE? May 1862, Gwinett County, Ga.

RANK.

COMPANY AND REGIMENT? Co.K. 36th.Ga. Regt.
(consolidated)
(Witness states- Co.B. 42nd. Ga.Regt.
March 1865. Co.K. 36th.
Regt. consolidated with)

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED? High Point,N.C. near Greensboro,N.C.
Surrendered under orders Gen.J.E.Johnson.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. W.P. Arnold, Co.B. 42nd.Ga.Regt.-Same Command- No data.
(after the consolidation)

mh.

Lankford N. M.
DeKalb Co.

No. C.H. Jan 1910

INDIGENT PENSION.

1908

Name N.M Lankford

County DeKalb

Co. E=12 Ga Batt Regt.

Approved 190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

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

9/29/08

Pension office 11/18/08 From whom and when did wife get this house and lot and in what way was this purchase price paid and by whom? Did husband pay any part of the purchased price, state fully and prove statements to be true.

J.W. Lindsey, Com. of Pens.

POWER OF ATTORNEY.

STATE OF GEORGIA, } COUNTY. }

I, _____ of _____ hereby authorize

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

at _____ by _____

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

Executed in presence of

_____ [L. S.]

Approved _____ 190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

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

9/29/08

Pension office 11/18/08 From whom and when did wife get this house and lot and in what way was this purchase price paid, and by whom? Did husband pay any part of the purchased price, state fully and prove statements to be true.

ATTORNEY.

_____ hereby authorize

_____ of _____

it be remit same to _____

_____ by _____

_____ of _____ 190

[L. S.]

INDIGENT PENSION.

No. _____

190 8

Name N.M. Lankford

County DeKalb

Co. B 1st Ga Batt Regt.

Approved _____ 190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

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

9/29/08

Lankford N.M.
DeKalb Co.
Ord. Jan 1910

Pension office 11/18/08 From whom and when did wife get this house and lot and in what way was this purchase price paid, and by whom? Did husband pay any part of the purchased price, state fully and prove statements to be true. J.W. Lindsey, Com. of Pens.

POWER OF ATTORNEY.

STATE OF GEORGIA,
COUNTY.

I, _____ of _____ hereby authorize

to receive and receipt for the pension allowed and request that be 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, }
DeKalb COUNTY }

N.M. Lankford 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 Postoffice.)
N.M. Lankford DeKalb Co Ga Clarkston Ga

2. How long and since when have you been a resident of this State?
64 years April 22nd 1843

3. When and where were you born? April 22nd 1843 = Gwinnett Co Ga

4. When and where and in what company and regiment did you enlist or serve?
April 1862 = Stonemountain Ga Company C
12 Ga Batalion

5. How long did you remain in such company and regiment? about 3 years

6. When and where was your company and regiment surrendered and discharged?
1865 = Appomattox Va

7. Were you present with your company and regiment when it was surrendered? I was not

8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? Savannah Ga November 1864. I was Sick sent to Milledgeville Ga Hospital in confinement discharge but little

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

10. What has been your occupation since 1865? Farming

11. Upon which of the following grounds do you base your application for pension, viz: first, age and poverty; second, "infirmity and poverty," or third, "blindness and poverty"? Infirmity & Poverty

12. If upon the first ground, state how long you have been in such condition that you could not earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind and when and where you lost your sight. My Physical Condition is very poor I am truffled many indigestion going on I am not able to work strictly at any kind of labor

13. What property, real and personal, or income, do you possess, and its gross value?
Nothing

14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift, have you made of same? nothing had none to dispose of

15. In what County did you reside during those years, and what property did you then return for taxation?
DeKalb Co None had none to return

16. How were you supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907?
by wife & 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? about $125 - 00 about $150 00

18. What was your employment during 1901, 1902, 1903, 1904, 1905, 1906 and 1907? What pay did you receive in each year? had none none

19. Have you a family? If so, who composes such family? Give their means of support. Have they a homestead, or other property? Their ages and how employed?
I have a wife my wife has a small home in Town of Clarkston DeKalb Co Ga

20. Are you receiving any pension? If so, what amount and for what disability? I am not

21. Have you ever made an application for pension before? I have not

22. How many applications have you ever made and under what class? none

Every Question Must Be Answered.

Sworn to and subscribed before me this the 18 day of Sept 1908

James R Gleaves Ordinary, of DeKalb County.

N.M. Lankford Applicant.

I was in the army from the time I was able to return to my command, I was in the army from the time I was able to return to my command, I was in the army from the time I was able to return to my command,

Every Question Should Be Answered.

11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? Infirmity & Poverty

12. If upon the first ground, state how long you have been in such condition that you could not earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you were totally blind and when and where you lost your sight. My Physical condition is very poor, I am crippled many indicates, being bed fast I am not able to make a living at any kind of labor

13. What property, real and personal, or income, do you possess, and its gross value? nothing

14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift, have you made of same? nothing had none to dispose of

15. In what County did you reside during those years, and what property did you then return for taxation? DeKalb Co none had none to return

16. How were you supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? By wife & 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? about $125 00 about $150 00

18. What was your employment during 1901, 1902, 1903, 1904, 1905, 1906 and 1907? What pay did you receive in each year? had none none

19. Have you a family? If so, who composes such family? Give their means of support. Have they a homestead, or other property? Their ages and how employed? have a wife my wife has a small home in town of Clarkston DeKalb Co Ga

20. Are you receiving any pension? If so, what amount and for what disability? I am not

21. Have you ever made an application for pension before? have not

22. How many applications have you ever made and under what class? none

Sworn to and subscribed before me this the 18 day of Sept 1908 — N. M. Lankford, Applicant.

James R George, Ordinary, of DeKalb County.

I was born in Jones County Ga and was raised in Jasper County Ga I was 18 years old when I went to the war I was in the Army of Northern Virginia I was in the Battle of Gettysburg and was wounded there on the 3rd day of July 1863 I was wounded in the left thigh I was in the hospital about 3 months I was then furloughed home for 60 days I was then ordered back to my command I was in the Battle of the Wilderness and was wounded there on the 6th day of May 1864 I was wounded in the left arm I was in the hospital about 3 months I was then furloughed home for 60 days I was then ordered back to my command I was in the Battle of Petersburg and was wounded there on the 16th day of June 1864 I was wounded in the left leg I was in the hospital about 3 months I was then furloughed home for 60 days I was then ordered back to my command I was in the Battle of Appomattox Court House and was surrendered there on the 9th day of April 1865 I was then paroled and returned home I have been a resident of DeKalb County Ga ever since the war I have been a farmer all my life I have been married twice my first wife died in 1900 I married my present wife in 1902 I have no children living I have been a member of the Methodist Church for about 30 years I have been a member of the Masonic Order for about 20 years I have been a member of the Confederate Veterans Association for about 10 years I have been a member of the Confederate Veterans Association for about 10 years

---

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

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA, DeKalb COUNTY.

Personally came before me W S Angley and C S Branyon, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully N M Lankford, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows: Rupture Piles Indigestion Epilepsy & general breakdown of system which renders him unable to do any strenuous labor or any other kind of labor to support himself and that we have no interest in said pension being allowed. C S Branyon M.D.

Sworn to and subscribed before me, this the 22 day of Sept 1908 — James R George, Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, DeKalb COUNTY.

I, James R George, Ordinary, in and for said County, hereby certify that the applicant N M Lankford resides in said County, and has been a bona fide resident of this State since the war all his life 189_ and that the witnesses, viz: W P Brown

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 DeKalb County shows that applicant returned for taxation in his name in 1901 $750.00 Dollars of property, and in 1902 $850.00 Dollars of property; in 1903 $850.00 Dollars of property; in 1904 _____ Dollars of property; in 1905 _____ Dollars of property; in 1906 _____ Dollars of property; in 1907 _____ Dollars of property.

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

Witness my hand and seal of office, this 22 day of Sept 1908 — James R George, Ordinary, of DeKalb 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, DeKalb COUNTY.

W P Brown of said State and County having been presented as a witness in support of the application of N. M. Lankford 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 P Brown Clarkston Ga DeKalb county
2. Are you acquainted with N M Lankford, the applicant; if so, how long have you known him? Fifty years
3. Where does he reside, and how long and since when has he been a resident of this State? Clarkston DeKalb Co Ga
4. When, where and in what company and regiment did he enlist, and how do you know? April 1862 Stonemountain Ga Company C 12 Ga Batt
5. Were you a member of the same company and regiment? Yes
6. How long did he perform regular military duty? 3 years
7. When and where was his command surrendered? April 1865 Appomattox C.H. Va
8. Were you present when it surrendered? I was
9. Was applicant present? He was not
10. If he was not present, where was he? Home on Sick fu When did he leave his command? September 64 For what cause? Sick By what authority he left? by Physicians Certificate How do you know all of this? was present & know it & My own knowledge and he was never able to return to his command
11. What property, effects or income has the applicant? (Give your means of knowledge.) Nothing no income I am his neighbor
12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, did he make of same? No Property had none to dispose of
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? had none to convey
14. What is the applicant's occupation and physical condition? has no occupation Physical condition is very feeble
15. Is the applicant unable to support himself by labor of any sort; if so, why? I think he is on account of his Physical Condition he is not able to make a living
16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? By his wife & Children
17. What portion of his support for these four years was derived from his own labor or income? 50 or 60 Dollars
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code. His Physical Condition is very feable and renders him unable to make a living
19. Who composes family? What property have they? Children's ages and their earning capacity? His wife wife has a small home & lot in town of Clarkston Ga
20. What interest have you in the recovery of a pension by this applicant? Nothing

Sworn to and subscribed before me, this the 22 day of Sept 1908 — W R Brown, Witness. James R George, Ordinary.

Sworn to and subscribed before me, this the 22 day of Sept 1908
James R George Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, DeKalb COUNTY.

I, James R George Ordinary, in and for said County, hereby certify that the applicant N M Lankford resides in said County, and has been a bona fide resident of this State since the Civil War all his life 189 and that the witnesses, viz.: W P Brown

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 DeKalb County shows that applicant returned for taxation in his name in 1901 $750.00 Dollars of property, and in 1902 $850.00 Dollars of property; in 1903 $850.00 Dollars of property; in 1904 Dollars of property; in 1905 Dollars of property; in 1906 Dollars of property; in 1907 Dollars of property.

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

Witness my hand and seal of office, this 22 day of Sept 1908
James R George Ordinary.
of DeKalb 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.

7. When and where was his command surrendered? April 1865 Appomattox C H Va
8. Were you present when it surrendered? I was
9. Was applicant present? He was not
10. If he was not present, where was he? Home on Sick fu
When did he leave his command? September 186[illegible] For what cause? Sick
By what authority he left? by Physicians in Comman How do you know all of this? was present & know it & W P Brown Knowledge and he was never able to return to his command
11. What property, effects or income has the applicant? (Give your means of knowledge.) Nothing no income I am his neighbor
12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, did he make of same? No Property had none to dispose of
13. Has he conveyed away any of his property in the last four years: if so, what was it, and to whom? had none to convey
14. What is the applicant's occupation and physical condition? has no occupation Physical condition is very feable
15. Is the applicant unable to support himself by labor of any sort; if so, why? I think on account of age & his Physical condition he is not able to make a living
16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? by his wife & Children
17. What portion of his support for these four years was derived from his own labor or income? 50 or 60 Dollars
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code. His Physical condition is very feable and renders him unable to make a living
19. Who composes family? What property have they? Children's ages and their earning capacity? His wife wife has a Small house & lot in Town of Clarkston Ga
20. What interest have you in the recovery of a pension by this applicant? Nothing

Sworn to and subscribed before me, this the 22 day of Sept 1908
James R George Ordinary.
W P Brown Witness.

Georgia, DeKalb County.

In person appeared before me, the undersigned, N. M. Lankford and W. P. Lankford, and after each being duly sworn, depose and say:

That N. M. Lankford has no real estate in the State of Georgia, nor in any other State, but that his wife, Mary E. Lankford, does own a house and lot in DeKalb County, Georgia, bought from J. W. Kirkpatrick, aministrater that the purchase price paid therefor was $800.00 and that the whole amount of the purchase price was paid by said Mary E. Lankford, and that N. M. Lankford paid no part of the purchase price at all.

Sworn to and subscribed before me, this 16th day of December, 1908.
N M Lankford
W P Lankford
James R George Ordinary.

Georgia, DeKalb County.

Personally appeared before me, the undersigned, W.P.Lankford, who being duly sworn, says on oath, that his brother, N. M. Lankford, was sent home on furlough in November, 1864, with chills and fever, and never recovered from his sickeness until the fall of 1866, and that his condition was such that he was unable to return to his command.

Sworn to and subscribed before me, this the 28th day of Sept., 1908.
W P Lankford
James R George Ordinary.

Georgia, DeKalb County.

In person appeared before me, the undersigned, N. M. Langford, who being duly sworn, says on oath, that the property returned by him for taxation during the years 1901, 1902, and 1903, should have been returned in the name of his wife, and not in his name. That he did not then and does not now own any property.

Sworn to and subscribed before me, this the 22nd day of September, 1908.
N M Lankford
James R George Ordinary.

Georgia, DeKalb County.

In person appeared before me, the undersigned, W. M. Brown, who being duly sworn, says on oath, that the property returned by him for taxation during the years 1901, 1902 and 1903, should have been returned in the name of his wife, as she was the owner. That he did not then and does not now own any property.

Sworn to and subscribed before me, this the 22nd day of September, 1908.
W P Brown
James R George Ordinary.

amount of the purchase price was paid by [illegible]

N. M. Lankford paid no part of the purchase price at all.

Sworn to and subscribed before me, this 16th day of December, 1908.

N M Lankford
W P Lankford

James R George
Ordinary.

this the 28th day of Sept., 1908.

James R George
Ordinary.

Georgia, DeKalb County.

In person appeared before me, the undersigned, W.P. Brown [illegible], who being duly sworn, says on oath, that the property returned by him for taxation during the years 1901, 1902 and 1903, should have been returned in the name of his wife, as she was the owner. That he did not then and does not now own any property.

Sworn to and subscribed before me, this the 22nd day of September, 1908.

W P Brown

James R George
Ordinary.

Georgia, DeKalb County.

In person appeared before me, the undersigned, N. M. Langford, who being duly sworn, says on oath, that the property returned by him for taxation during the years 1901, 1902, and 1903, should have been returned in t e name of his wife, and not in his name. That he did not then and does not now own any property.

Sworn to and subscribed before me, this t e 22nd day of September, 1908.

N M Lankford

James R George
Ordinary.

NAME Lankford, N.M. YEAR 1910 COUNTY DeKalb

[illegible] April 22,1843- Gwinnett County, Georgia.

[illegible] April 1/62,- Stone Mountain, Georgia.

[illegible]

[illegible] Co.C. 12th.Ga. Batln.

[illegible]

[illegible] Nov. 1864, Savannah, Ga., Sick & sent to Hospital by Physician in Command.

[illegible]

[illegible]

[illegible] Command surrendered: 1-65 April, Appomattox Court House, Virginia.

[illegible] Sick, furloughed home, by Physician in Command, Never able to return to his Command. Furloughed in Jan. 1865. Nev r got well until 1866.

[illegible]

[illegible] W.P. Brown,- Same Command- No date.
W.P. Lankford,- Personal Knowledge-

mh.

April 22,1843- Gwinnett County, Georgia.

April 1862,- Stone Mountain, Georgia.

Co.C. 12th.Ga. Battn.

Nov. 1864, Savannah, Ga., Sick & sent to Hospital by Physician in Command.

Command surrendered: 1865 April, Appomattox Court House, Virginia.

Sick, furloughed home, by Physician in Command.Never able to return to his Command. Furloughed in Jan. 1865. Never got well until 1866.

W.P. Brown,- Same Command- No date.
W.P. Lenkuore,- Personal Knowledge-

mh.

Lathrop, Edward S.
F. Kirkland's Co.

G & F Ry 1917
Ga. Land Grants
3/7-1917

Confederate Soldier's Application.

UNDER ACT 1910.

County DeKalb

Name Edward S. Lathrop

Company Volunteer Guards

Regiment 1st Ga

Approved

J. W. LINDSEY,
Commissioner of Pensions.

CHAS. P. BYRD, State Printer, Atlanta.

Pension Office, Nov. 17th, 1917.

Applicant asked to file affidavit as to his own property. There is no testimony to show that his tax returns were improperly made and the property was not all that belonged to him. Must prove statements by some one who knows it as fact.

J. W. Lindsey, Com. of Pensions.

Name [illegible]

Company Volunteer Guards

Regiment 1st Ga

Approved

J. W. LINDSEY,
Commissioner of Pensions.

CHAS. P. BYRD, State Printer, Atlanta.

Applicant swears to Tax returns as his own property. There is no testimony to show that the tax returns were improperly made and this property was not his but belonged to his wife. Must prove statements by some one who knows it is true.

Pension Office, Nov. 17th. 1916.

Applicant swears to Tax returns as his own property. There is no testimony to show that the tax returns were improperly made and this property was not his but belonged to his wife. Must prove statements by some one who knows it is true.

J. W. Lindsey, Com. of Pensions.

Confederate Soldier's Application.

UNDER ACT 1910.

County DeKalb

Name Edward S. Lathrop

Company Volunteer Guards

Regiment 1st Ga

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

Co. A 18th Battalion Ga Vol - 1st

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

DeKalb County.

Edward S. Lathrop 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) Edward S. Lathrop, Decatur Ga, DeKalb County, Decatur Ga.

2. How long and since when have you been a continuous resident citizen of this State? Born in this State, Have resided in this State continuously since my birth

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

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) In 1861, Savannah Ga, Savannah Volunteer Guards, 1st Ga

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? In May 1865, Greensboro 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 [illegible]

a. Where was your Command when you left it? At Greensboro, N. C.

b. When did you leave the Command? Did not leave

c. For what cause did you leave? Did not leave

d. By whose authority did you leave? Did not leave

e. For how long was your leave granted? In what way? Did not leave

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? Never Captured

9. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value.) My self Nothing, My wife owned property of the value of about One Thousand dollars

10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov. 1908. To whom and for what price? 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 itemised list). Owns Nothing, My Wife owns the above mentioned property worth about $ 5000.00

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

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

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? Never

Sworn to and subscribed before me, this the 3rd day of February 1916.

James R. Gleaton Ordinary

of DeKalb County.

Edward S. Lathrop

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

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? Never Captured

9. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value.) My self Real Estate, My wife owned property of the value of about Five Thousand dollars

10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov. 1908. To whom and for what price? 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). Home Nothing, My Wife owns the above mentioned property worth about Four Thousand

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

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

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? Never

Sworn to and subscribed before me, this the 3rd day of February 1916.

Edward S. Lathrop

James R. George Ordinary

of DeKalb County.

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,

DeKalb County.

W. E. G. Baker of said State and County is hereby presented as a witness in support of the application of Edward S. Lathrop for the pension provided by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded answers as follows:

1. What is your name and where do you reside? W. E. G. Baker Jimmy Cofferett's Mill Dist. Ga.

2. How long and since when have you known Edward S. Lathrop the applicant? Since 1895

3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? In Decatur Ga since 1888

4. When, where and in what Company and Regiment did Edward S. Lathrop enlist during war from 1861 to 1865? (Give date and place) In 1861, in Newnan Ga

5. How did you obtain your information of this Service? I know it of my own personal knowledge

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) From 1861 to Surrender

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

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

9. If not, where were you and how came you there? Was in Greensboro N. C. when Surrendered and my Command

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

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

12. When did he leave his Command? At Surrender Where was his Command when he left it? At Greensboro for what cause did he leave? Was Paroled and Dismissed 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) Of My own personal knowledge

13. In what way was he prevented from returning to his Command? Was Paroled How do you know? Of My personal knowledge

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

15. Was applicant captured as a prisoner Not to My Knowledge If so, when and where? — — — In what prison was he held? — — — and when released

Sworn to and subscribed before me, this the 3rd day of Feby 1916

W. E. G. Baker

James R. George Ordinary

of DeKalb County

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

DeKalb County.

Personally before me comes P. L. Weekes and C. L. Weekes who on oath says that they are freeholders residing in said County and we know Edward S. Lathrop 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.) House and Lot in Decatur (owned by his wife), of the value of $5000.00

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov 1908? (State it fully by items.) None sold

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

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

4. What relation is the party to applicant?

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

6. Was the disposition of this property made in good faith and full values? or was it made to obtain a pension?

Sworn to and subscribed before me, this the 4th day of Feb'y 1916

P. L. Weekes

C. L. Weekes

James R. George Ordinary.

of DeKalb County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

DeKalb County.

I, James R. George Ordinary of said County, certify that I know the applicant Edward S. Lathrop for Pension is the person he represents himself to be and resides in said County. That I also know W. E. G. Baker the witness swearing to the service and Peterson Rutledge & C. L. Weekes 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 DeKalb County shows that his wife value for tax is in 1908 $ 2320.00 (1/10 Return in 1908) for 1910 $ 2660.00 for 1911 $ 2800.00 for 1912 $ 2240.00 for 1913 $ 1800.00 for 1914 $ 1511.00 — 1915 7600.00

Sworn under my hand and official seal of office this 3rd day of Feby 1916.

James R. George Ordinary.

of DeKalb 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.

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) June 1861 to December

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

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

9. If not, where were you and how came you there? I was at Greensboro N C when Surrendered and my Command

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

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

12. When did he leave his Command? at Surrender Where was his Command when he left it? at Greensboro for what cause did he leave? at Surrender and Disbanded

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) Of My own personal Knowledge

13. In what way was he prevented from returning to his Command? War Ended How do you know? of My personal Knowledge

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

15. Was applicant captured as a prisoner of War? If so, when and where? In what prison was he held? and when released

Sworn to and subscribed before me, this the 3rd day of February 1916

James R George Ordinary.

of DeKalb County

E. S. Lathrop

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
DeKalb County.

I, James R George Ordinary of said County, certify that I know the applicant Edward S Lathrop for Person is the person he represents himself to be and resides in said County. That I also know Old Ed Baker the witness swearing to the service and Benson Roberts & Ed Weeks 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 DeKalb County shows that his and wife value for tax is in 1908 No Return in 1908 for 1910 $ 2605.20 for 1911 $ 2800.00 for 1912 $ 2267.00 for 1913 $ 1800.00 for 1914 $ 1900.00 — 1915 $ 1600.00

Sworn under my hand and official seal of office this 3rd day of Feby 1916.

James R George Ordinary,

of DeKalb 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.

Lathrop, Edward S.
DeKalb Co.

1918

Application for Pension Due Deceased Pensioner

Under Act 1904

James R. George Ordinary.

For Funeral Expenses

of DeKalb County

of Co. Regiment

Approved and ordered paid

1918.

J. W. LINDSEY,
Commissioner of Pensions.

H. M. PATTERSON & SON

FUNERAL DIRECTORS

96 NORTH FORSYTH STREET

ADJOINING CARNEGIE LIBRARY

Atlanta, Ga. Jan, 17, 1918:

Sold to Funeral Expenses of Mr. Edward S. Lathrop:

	Casket and box		
	Transfer to office		
	Transfer to Terminal Station		
	Embalming and dressing	88	65
3	Railway tickets		
	Long distance		

State of Georgia
County of Fulton

Personally appeared before me, F. W. Patterson, who being duly sworn, states upon oath that the above account is correct, just and unpaid:

H. M. Patterson

J. R. Patterson

Georgia, DeKalb County.

Personally appeared before me, the undersigned, James R. George, Ordinary in and for said county, who being duly sworn, says on oath: That in the application of E. S. Lathrop for a pension, it appears from the answers to questions in regard to the taxable property of said applicant that he is the owner of real estate, but upon a re-examination of the digests, it shows that said E. S. Lathrop returned real estate for taxation as Trustee only, and none in his own name.

James R George

Sworn to and subscribed before me,
This 22nd day of December, 1916

E R Mason Notary Public
DeKalb County, Georgia

Georgia, DeKalb County.

Personally appeared before me, the undersigned, E. H. [illegible], and being duly sworn, says on oath: That he has known E. S. Lathrop for the past thirty years, that said E. S. Lathrop has owned no real estate during that time within the knowledge of affiant, and does not now own any.

E R Mason

Sworn to and subscribed before me,
This 22nd, day of December, 1916

James R George
Ordinary DeKalb County, Georgia.

Personally appeared before me, F. W. Patterson, who being duly sworn, states upon oath that the above account is correct, just and unpaid: F. W. Patterson

Sworn to and subscribed before me, This 2nd day of December, 1916 — E. K. Mason, Notary Public, DeKalb County, Georgia

Georgia, DeKalb County.

Personally appeared before me, the undersigned, James R. George, Ordinary in and for said county, who being duly sworn, says on oath: That in the application of E. S. Lathrop for a pension, it appears from the answers to questions in regard to the taxable property of said applicant that he is the owner of real estate; but upon a re-examination of the digests, it shows that said E. S. Lathrop returned real estate for taxation as Trustee only, and none in his own name.

Sworn to and subscribed before me, This 2nd day of December, 1916 — James R. George

E. K. Mason Notary Public, DeKalb County, Georgia

Georgia, DeKalb County.

Personally appeared before me, the undersigned, E. H. [illegible], and being duly sworn, says on oath: That he has known E. S. Lathrop for the past thirty years, that said E. S. Lathrop has not owned any real estate during that time within the knowledge of affiant, and does not now own any.

Sworn to and subscribed before me, This 2nd, day of December, 1916 — E. K. Mason

James R. George, Ordinary DeKalb County, Georgia.

NAME Lathrop, Edward S. YEAR 1917 COUNTY DeKalb

[illegible] Born in Georgia and a continued resident of this State for nearly sixty years.

ENLISTED WHEN AND WHERE? In 1861 - Savannah, Georgia.

RANK.

COMPANY AND REGIMENT? Company A, 18th Battn. Ga. Vols. Inf.

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED?

WHEN AND WHERE SURRENDERED? In May 1865 - Greensboro, N. C.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED?

WITNESSES. W. E. [illegible] Baker - in service with applicant -- No data.

SB

H. M. PATTERSON — ESTABLISHED 1880 — FRED W. PATTERSON

Application for Pension Due to a Deceased Pensioner

Under the Act of August 15, 1904.

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

GEORGIA, DEKALB County.

Personally before me, the Ordinary of said County, comes Miss Louise Lathrop of said County, who, after being sworn, on oath says that she knew Edward S. Lathrop of said County, and that he was on the Indigent Pension Roll DeKalb County at the time of his death, which occurred in DeKalb County, in this State, on the 17th day of January 1918, and that a Pension of Eighty ($80.00) Dollars was due him and unpaid at the time of his death. That he left no widow or dependent children surviving him, and no estate of any value sufficient to pay his funeral expenses, which amounted to the sum of $88.65 Dollars, as per sworn statement, itemized, hereto attached.

Sworn to and subscribed before me this 7th day of March 1918. James R. George Ordinary DeKalb County. — Miss Louise Lathrop

GEORGIA, DeKalb County.

I, James R. George Ordinary of said County, do certify that I personally know Miss Louise Lathrop, who is a resident citizen of said County, and that he is of a truthful and trustworthy character, entitled to full faith and credit.

I also knew Edward S. Lathrop while in life; that he was the same person whose name appears on the Indigent Pension Roll of DeKalb County, and was paid a Pension of Seventy ($70.00) Dollars in said County for 1917, and I now believe him to be dead.

Given under my hand and official seal, this 7th day of March 1918.

James R. George Ordinary, DeKalb County.

NAME Lathrop, Edward S. YEAR 1917 COUNTY DeKalb

WHERE BORN? Born in Georgia and a continued resident of this State for nearly sixty years.

ENLISTED WHEN AND WHERE? In 1861 - Savannah, Georgia.

RANK.

COMPANY AND REGIMENT? Company A, 18th Battn. Ga. Vols. Inf.

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED?

WHEN AND WHERE SURRENDERED? In May 1865 - Greensboro, N. C.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED?

WITNESSES. W. E. Q. Baker - in service with applicant -- No data.

SB

GEORGIA, DEKALB County.

Personally before me, the Ordinary of said County, comes Miss Louise Lathrop of said County, who, after being sworn, on oath says that she knew Edward S. Lathrop of said County, and that he was on the Indigent Pension Roll DeKalb County at the time of his death, which occurred in DeKalb County, in this State, on the 17th day of January 1918, and that a Pension of Eighty ($80.00 Dollars was due him and unpaid at the time of his death. That he left no widow or dependent children surviving him, and no estate of any value sufficient to pay his funeral expenses, which amounted to the sum of $88.65 Dollars, as per sworn statement, itemized, hereto attached.

Sworn to and subscribed before me this 7th day of March 1918. James R. George Ordinary DeKalb County. } Miss Louise Lathrop

GEORGIA, DeKalb County.

I, James R. George Ordinary of said County, do certify that I personally know Miss Louise Lathrop, who is a resident citizen of said County, and that he is of a truthful and trustworthy character, entitled to full faith and credit.

I also knew Edward S. Lathrop while in life; that he was the same person whose name appears on the Indigent Pension Roll of DeKalb County, and was paid a Pension of Seventy ($70.00) Dollars in said County for 1917, and I now believe him to be dead.

Given under my hand and official seal, this 7th day of March 1918.

James R. George Ordinary.

DeKalb County.

POWER OF ATTORNEY.

Form 5.

STATE OF GEORGIA,

DeKalb County.

KNOW ALL MEN BY THESE PRESENTS, That I, P. W. Sawyer DeKalb of Chas. B. Edwards

County, in said State, do hereby appoint

of DeKalb 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 afore-said.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 26th day of May 1891.

J. J. London [L S]

Executed in the presence of us:

S. W. Cochran

Wm. M. Rogers

Ed. Brown

DIRECTION

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

NOTES.

Form 6.

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

1. If an applicant has been wounded, the description of the wounds 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 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.

5. 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.

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

7. No payments can be made for any past year.

W. H. HARRISON,
Clerk Ex. Department.

DeKalb Co. 1891.

3066

APPLICATION FOR ALLOWANCE

Applicant P. W. Sawyer

County DeKalb

Amount $50

Entered on Record May 27 1891.

W. H. H.

Jno. C. Stewart

Applicant, J. J. Lawhorn

County, DeKalb

Amount, 50

Entered on Record May 27 1891.

W. H. H.

SIGNATURE OF OFFICIAL

WARRANT, PAYABLE TO

Jno. B. Stewart

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

ATTORNEY. Form 5.

at I, [illegible]

of [illegible]

my true and lawful attorney in fact, for

for whatever amount of money I may be entitled to

injury received as aforesaid in the military service of

stated in the foregoing affidavit; hereby authorizing

my Warrant that may be issued by the Governor, or

to me for the reason aforesaid.

set my hand and seal, this

day of [illegible] 1891.

J. J. Lawhorn [L. S.]

DIRECTION

to

and oblige,

OTES. Form 6.

avoid unnecessary delays to applicants, and to enable

ws granting allowances to disabled soldiers, as well as

ng the payments provided, the following suggestions

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ny past year.

W. H. HARRISON,
Clerk Ex. Department.

POWER OF ATTORNEY. Form 5.

STATE OF GEORGIA,

De Kalb County.

KNOW ALL MEN BY THESE PRESENTS, That I, J. J. Lawhorn of De Kalb County, in said State, do hereby appoint Jno B Stewart of De Kalb 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 26" day of May 1891.

J. J. Lawhorn [L. S.]

Executed in the presence of us:

S. H. Cochran

W. Mitchell

DIRECTION

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

NOTES. Form 6.

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

1. If an applicant has been wounded, the description of the wounds 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 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.

5. 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.

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

7. No payments can be made for any past year.

W. H. HARRISON,
Clerk Ex. Department.

1891.

No. 2066

APPLICATION FOR ALLOWANCE

Applicant, J. J. Lawhorn

County, DeKalb

Amount, 50

Entered on Record May 27 1891.

W. H. H.

SIGNATURE OF OFFICIAL

WARRANT, PAYABLE TO

Jno. B. Stewart

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

Form 1.

For Use of Applicants Who Have Not Heretofore Drawn.

STATE OF GEORGIA,

De Kalb County.

PERSONALLY appears J. J. Lawhorn of De Kalb 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 continuously since the day of April 1837 that he enlisted in the military service of the Confederate States (or of the State of Ga during the war between the States, and served as a Private in Company D of 38 th Regiment of Georgia Volunteers Lawtons Brigade, that whilst engaged in such military service, at the battle of Rappahannock in the State of Va on the 13th day of Dec 1863, he was disabled as follows: Wounded in left side with minnie ball disabling the nerves of the small of the back causing great pain and suffering and disabling and was also shot in the arm in the battle of Rappahannock Va. on the 10th 1864 which caused a disabling of the muscles of the arm rendering the arm substantially and essentially useless and rendered him unable to perform manual labor, and from said last wound he was discharged from service.

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 26, 1891.

Sworn to and subscribed before me, this the 26" day of May 1891.

J. J. Lawhorn

W. H. H. Ordinary.

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

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

1. If an applicant has been wounded, the description of the wounds 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 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.

5. 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.

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

7. No payments can be made for any past year.

W. H. HARRISON,
Clerk Ex. Department.

1891.

No. 3066

APPLICATION FOR ALLOWANCE

Applicant, J. J. Lawhorn

County, DeKalb

Amount, $50

Entered on Record May 27 1891. W.P.K.

JESSE D. BRANCH, State Printer, Atlanta, Ga.

WM. H. HARRISON, State Printer, Atlanta, Ga.

Laboring and was also shot in the left arm in the battle of Newtown, Va. on the 10th day of Aug 1864, which caused a contracting of the muscles of the arm rendering the arm substantially and essentially useless and renders him unable to perform manual labor. said from said last wound he was discharged from service.

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 26, 1891.

Sworn to and subscribed before me, this 26th day of May 1891.

J. J. Lawhorn

W. H. Ragsdale
Ordinary.

NOTE.—State fully nature of wound or character of disease which causes the disability, and also *from what* 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.

AFFIDAVIT FOR WITNESSES.

Form 2.

STATE OF GEORGIA,
County of DeKalb

PERSONALLY appears before me, the undersigned Ordinary in and for said County, John Baxter, S. W. Cochran and E. F. Leavell, each of whom, being duly sworn according to law, severally say, under oath, that they are personally well acquainted with J. J. Lawhorn, 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.*)

He was wounded at the battle of Fredricksburg on the 13th day of Dec 1862, with musket ball in the right arm which ranged to the rear that he ever recovered perfect use of said arm. He was also wounded in the right arm which caused a contraction of the muscles and renders the same substantially and essentially useless and renders him unable to perform manual labor. Said wound received at the battle of Newtown Va Aug 10th

Our opportunities for knowing that his condition results from the service are as follows: We were in the war with applicant and have lived near them since the war, know personally of his wounds, his discharge on account of same, and his disabilities since.

Applicant is permanently disabled, and has been so to our certain knowledge ever since 1862.

We have no interest in the recovery of a pension by him.

Sworn to and subscribed before me, this 26th day of May 1891.

John Baxter
S. W. Cochran
E. F. Leavell

W. H. Ragsdale
ORDINARY.

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.

PHYSICIANS' AFFIDAVIT.

Form 3.

STATE OF GEORGIA,
DeKalb County.

PERSONALLY comes before me W. H. Ragsdale Ordinary of said County, Dr. Chas. L. Sweney and Dr. Z. F. Jones, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have carefully examined J. J. Lawhorn and after such examination, say that the applicant has been injured as follows:

Was shot through the right fore arm with minie Ball during the late war while in the service of the Confederate States, said wound has caused a contraction of the Muscles of the Arm and partial Anchylosis of wrist joint of same arm which renders it substantially and essentially useless and he also received a gunshot wound of the Abdomen which has disturbed the Nerve of the left side which causes the applicant great pain & suffering & renders him & arm almost useless and very seriously interferes with applicant when he tries to perform manual labor.

We have treated applicant professionally for ____ years.

Sworn to and subscribed before me, this 26th day of May 1891.

Chas. L. Sweney M.D.

W. H. Ragsdale
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.

Form 4

STATE OF GEORGIA,
DeKalb County.

I, W. H. Ragsdale, Ordinary of said County, do certify that I am well acquainted with J. J. Lawhorn the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, *and he is disabled, as he claims*, and I know he is the individual he represents himself to be, and that he resides in this County. I also certify that the foregoing witnesses are persons of respectability, and that their statements are worthy of full credit and belief.

I further certify that ____ before 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 27th day of May 1891.

W. H. Ragsdale
Ordinary ____ County.

...right arm which causes a contraction of the muscles and renders the same substantially and essentially useless, and renders him unable to perform manual labor such as he was accustomed to do at the battle of Newtown Va Aug 1[illegible]

Our opportunities for knowing that his condition results from the service are as follows:

We were in the war with applicant and have lived near him since the war, know personally of his wounds, his discharge on account of same, and his disabilities since.

Applicant is permanently disabled, and has been so to our certain knowledge ever since 18 62.

We have no interest in the recovery of a pension by him.

Sworn to and subscribed before me, this 26" day of May 1891.
W. M. Ragsdale, Ordinary.

John Baxter
S W Cochran
E F Leavell

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.

When he begs to perform Manual Labor

We have treated applicant professionally for [illegible] years.

Sworn to and subscribed before me, this 26th day of May 1891.
W. M. Ragsdale, Ordinary.

Chas. R. Summer M.D.

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.

Form 4

STATE OF GEORGIA,

De Kalb County.

I, W. M. Ragsdale, Ordinary of said County, do certify that I am well acquainted with J. C. Lastinger the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, *and he is disabled, as he claims*, and I know he is the individual he represents himself to be, and that he resides in this County. I also certify that the foregoing witnesses are persons of respectability, and that their statements are worthy of full credit and belief.

I further certify that [illegible] before before whom the foregoing affidavits were made and power of attorney was signed, is a [illegible] of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 27th day of May 1891.

W. M. Ragsdale
Ordinary [illegible] County.

STATE OF GEORGIA,

[illegible] County.

I, [illegible] Ordinary of said county, do certify that I am well acquainted with [illegible] 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 [illegible] day of [illegible] 1891.

Ordinary [illegible] County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
[illegible] County.

Know all Men by these Presents, That I [illegible] of [illegible] County, State of Georgia, do hereby appoint [illegible] of [illegible] 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 [illegible] day of [illegible] 1893.

[L. S.]

Executed in the presence of us:

[illegible]

DIRECTION.

Send money to me as follows, by [illegible] P. O. [illegible] to [illegible] County, Georgia.

No. 5[illegible]

Application for Allowance

For the Year Ending October 24, 1892.

FOR

Applicant [illegible]
County [illegible]
Amount [illegible]
Date of Warrant [illegible]
Entered on record [illegible] 1893.

Secretary Executive Department.

WARRANT HANDED TO

[illegible]

1893.

No. 3[illegible]

SOLDIERS PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 24, 1892

Name [illegible]
County [illegible]
Disability [illegible]
Amount $ [illegible]
Entered on record [illegible] 1892.

W. H. HARRISON,
Secretary of State. By [illegible] Assistant.

AGENT.

[illegible]

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

No. 3578

SOLDIERS' PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 26, 1892.

Name [illegible]

County DeKalb

Disability [illegible]

Amount $ 50

Entered on record [illegible] 1892.

W. H. HARRISON,
Secretary Executive Department.

AGENT.

[illegible]

1893.

No. 966

Application for Allowance

For the Year Ending October 26, 1893.

FOR

Applicant L. L. Lawhorn

County DeKalb

Amount, $50

Date of Warrant, [illegible]

Entered on record, [illegible] 1893.

Secretary Executive Department.

WARRANT HANDED TO

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

County.

Personally appears [illegible] of [illegible] County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of Georgia, and has been such continuously since the [illegible] day of [illegible] 1837; that he enlisted in the military service of the Confederate States (or of the State of [illegible]) during the war between the States, and served as a Private in Company D, of 28th Regiment of [illegible] Volunteers [illegible]'s Brigade; that whilst engaged in such military service at the battle of [illegible] in the State of [illegible], on the [illegible] day of [illegible] 1864, he was wounded as follows: [illegible]

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 [illegible] Dollars, for [illegible]

Sworn to and subscribed before me this the [illegible] day of [illegible] 1892

[illegible]

Ordinary.

Note.—State fully nature of wound or character of disease which causes the disability, and [illegible] the extent of the disability.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

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

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

[L. S.]

Executed in the presence of us:

[illegible]

[illegible]

DIRECTION.

Send money to me as follows, by [illegible]

to [illegible] P. O.

[illegible] County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

DeKalb County.

Personally appears L. L. Lawhorn of DeKalb 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 1837; that he enlisted in the military service of the Confederate States (or of the State of Ga.) during the war between the States, and served as a Private in Company D, of 28 th Regiment of Ga Volunteers Lawton's Brigade; that whilst engaged in such military service at the battle of Ft. Sanders in the State of Tenn., on the 29th day of Nov 1864, he was wounded as follows: Shot with a minnie ball in the right arm fracturing the bone and causing permanent disability, thereby rendering the disabled arm 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 [illegible] dollars, for [illegible]

Sworn to and subscribed before me, this, the [illegible] day of [illegible] 1893. L. L. Lawhorn

[illegible]

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,

DeKalb County.

I, [illegible] Ordinary of said County, do certify that I am well acquainted with L. L. Lawhorn 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 [illegible] before whom the foregoing affidavits were made and power of attorney was signed, is a [illegible] of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 18th day of March 1893.

[illegible]

Ordinary DeKalb County.

Sworn to and subscribed before me this the day of 1892.

Ordinary.

Note.—State fully nature of wound or character of disease which causes the disability and ... extent of the disability.

POWER OF ATTORNEY.

STATE OF GEORGIA, County.

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

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

Executed in the presence of us

DIRECTION.

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

dollars, for

Sworn to and subscribed before me, this the day of 1893.

Ordinary.

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

STATE OF GEORGIA, 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 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 day of 1893.

Ordinary County.

POWER OF ATTORNEY.

STATE OF GEORGIA, County.

Know all Men by these Presents. That I, of County, State of Georgia, do hereby appoint of my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said Attorneys 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. [L. S.]

Executed in the presence of us

DIRECTIONS.

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

(For Those Already Enrolled.)

No. 8103

Soldier's Pension. 1894.

Name Lawhorn, J. C.
County De Kalb
Disability Disabled Arm.
Amount, $ 37 50
1894.
W. H. HARRISON, Secretary Executive Department.
WARRANT HANDED TO
Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA, County.

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

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

Executed in presence of us

DIRECTIONS.

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

(For Those Already Enrolled.)

No. 2435

SOLDIER'S PENSION. 1895.

Name
County
Disability
Amount, $
1895.
RICHARD JOHNSON, Secretary Executive Department.
WARRANT HANDED TO
Geo. W. Harrison, State Printer, Atlanta

to

P. O.

County, Georgia.

(For Those Already Enrolled.)

No. 2403

Soldier's Pension.

1894.

Name Lawhorn L.L.

County De Kalb

Disability Disabled Arm.

Amount, $ 37.50

1894.

W. H. HARRISON,
Secretary Executive Department.

WARRANT HANDED TO

Gen. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
De Kalb County.

PERSONALLY appears L.L. Lawhorn of De Kalb 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 1887; 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 38th Regiment of Ga Volunteers, Clayton's Brigade; that whilst engaged in such military service at the battle of Near Dalton in the State of Ga on the 16th day of Aug 1864, he was wounded as follows: Shot with minnie ball in the right arm near elbow & shattering bone rendering arm useless.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the act 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 Sixty dollars, for the year 1893.

Sworn to and subscribed before me, this, the 2nd day of March 1894. L.L. Lawhorn

W.H. Logsdon 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,
De Kalb County.

I, W.H. Logsdon Ordinary of said County, do certify that I am well acquainted with L.L. Lawhorn the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1894.

Affix your seal here.

W.H. Logsdon
Ordinary De Kalb County.

County, Georgia.

(For Those Already Enrolled.)

Lawhorn L.L.
De Kalb Co

No. 243

SOLDIER'S PENSION.

1895.

Name L.L. Lawhorn.

County De Kalb

Disability Disabled Arm.

Amount, $ 37.50

1895.

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO

Gen. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
De Kalb County.

Personally appears L.L. Lawhorn of De Kalb 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 1887; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company D, of 38th Regiment of Ga Volunteers, Clayton's Brigade; that whilst engaged in such military service at the battle of Near Dalton in the State of Ga. on the 16th day of Aug 1864, he was wounded as follows: Shot with minnie ball through the right arm, fracturing the bone and rendering the arm substantially and practically 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 26th, 1895. I have heretofore been allowed a pension of Sixty dollars, for the year 1894.

Sworn to and subscribed before me, this, the 18th day of Oct 1895. L.L. Lawhorn

W.H. Logsdon 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,
De Kalb County.

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

Given under my official signature and seal, this 18th day of Oct 1895.

Affix your seal here.

Ordinary County.

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 Eight dollars, for the year 1893.

Sworn to and subscribed before me, this, the 2nd day of March 1894. } D J Lawhon

W M Ragsdale 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, }
De Kalb County. }

I, W M Ragsdale Ordinary of said County, do certify that I am well acquainted with D J Lawhon the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1894.

Affix your seal here

W M Ragsdale
Ordinary De Kalb County.

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 Eight dollars, for the year 1894.

Sworn to and subscribed before me, this, the 18th day of Feb 1895. } D J Lawhon

W M Ragsdale 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,
DeKalb County. }

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

Given under my official signature and seal, this [illegible] day of Feb 1895.

Affix your seal here

[illegible]
Ordinary [illegible] County.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
County. }

I, hereby authorize

of

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

by

at

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

day of 1896.

[L. S.]

Executed in presence of us)
)

(For Those Already Enrolled.)

No. 457

SOLDIER'S PENSION.

1896.

Name [illegible]

County [illegible]

Disability [illegible]

Amount, $ 24

1896

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO

[illegible]

[illegible] W. Harrison, State Printer, Atlanta.

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)
)

[illegible]

ACT OF 24TH, 18[illegible]

(For Those Already Enrolled.)

No. 281

INVALID
SOLDIER'S PENSION.

1897.

Name [illegible]

County DeKalb

Disability [illegible]

Amount, $ 24

2/16 1897

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

[illegible]

[illegible] W. HARRISON, STATE PRINTER, ATLANTA

(For Those Already Enrolled.)

No. 457

SOLDIER'S PENSION.

1896.

Name [illegible]

County [illegible]

Disability [illegible]

Amount, $ 72

1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

[illegible]

[illegible] Harrison, State Printer, Atlanta.

(For Those Already Enrolled.)

No. 241

INVALID SOLDIER'S PENSION.

1897.

Name W. J. Lawhorn

County DeKalb

Disability Gun

Amount, $ 2/16 1897.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

[illegible]

[illegible] HARRISON, STATE PRINTER, ATLANTA.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
DeKalb County.

Personally appears W. J. Lawhorn of DeKalb 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 1897; that he enlisted in the military service of the Confederate States (or of the State of Ga.) during the war between the States, and served as a Private in Company D, of 38 th Regiment of Ga Volunteers, Lawton's Brigade; that whilst engaged in such military service in the State of Va, on the 10th day of Aug 1864, he was wounded, injured or diseased as follows: was shot with minnie ball in right upper the battle of Newtown Va, fractured bone and cut the muscle hindering the right arm substantially and essentially useless

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1896. I have heretofore as a resident of DeKalb county been allowed a pension of 50.00 dollars, for the year 1895.

Sworn to and subscribed before me, this the 24th day of Oct 1896. J. J. Lawhorn

POST OFFICE

W. H. Rogers, 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,
DeKalb County.

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

Given under my official signature and seal, this 24th day of Oct 1896.

Affix your seal here.

W. H. Rogers

Ordinary DeKalb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
DeKalb County.

Personally appears W. J. Lawhorn of DeKalb 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 1897; that he enlisted in the military service of the Confederate States (or of the State of Ga.) during the war between the States, and served as a Private in Company D, of 38 th Regiment of Ga Volunteers, Lawton's Brigade; that whilst engaged in such military service in the State of Va, on the 10th day of Aug 1864, he was wounded, injured or diseased of follows: was wounded at the battle of Newtown Va in the right fracturing the bone causing loss of bone recovering the arm substantially and essentially useless.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1897. I have heretofore under said law as a resident of DeKalb county been allowed an invalid pension of [illegible] Dollars, for the year 1896.

Sworn to and subscribed before me, this the 8th day of Feb 1897. J. J. Lawhorn

POST OFFICE

W. H. Rogers, 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,
DeKalb County.

I, W. H. Rogers, Ordinary of said County, do certify that I am well acquainted with W. J. Lawhorn the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 Feb 1897.

Affix your seal here.

W. H. Rogers

Ordinary DeKalb County.

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 DeKalb county been allowed a pension of 50.00 dollars, for the year 1895.

Sworn to and subscribed before me, this, the 24th day of Oct 1896. } J J Lawhorn

Wm. Rogers 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, DeKalb County.

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

Given under my official signature and seal, this 24th day of Oct 1896.

Affix your seal here.

Wm. Rogers

Ordinary DeKalb County.

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 DeKalb county been allowed an invalid pension of $50.00 Dollars, for the year 1896.

Sworn to and subscribed before me, this, the 8th day of Oct 1897. } POST OFFICE J J Lawhorn

Wm. Rogers 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, DeKalb County.

I, Wm. Rogers Ordinary of said County, do certify that I am well acquainted with J. J. Lawhorn the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 Oct 1897.

Affix your seal here.

Wm. Rogers

Ordinary DeKalb 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 AUG'T, 1886 (For Those Already Enrolled.) No. 1668

INVALID SOLDIER'S PENSION. 1898.

Name J. J. Lawhorn
County DeKalb
Disability Arm
Amount, $ 50.
1898.

RICHARD JOHNSON, Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA

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

UNDER SECTION 12th (For Those Already Enrolled.) No. 2157

INVALID SOLDIER'S PENSION. 1899.

Name J. J. Lawhorn
County DeKalb
Disability Arm
Amount, $ 50.
2/13 1899.

RICHARD JOHNSON, Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA

ACT OF 1897, 138
(For Those Already Enrolled.)

No. 1668

INVALID SOLDIER'S PENSION. 1898.

Name J.J. Lawhorn
County DeKalb
Disability Arm Wound
Amount, $ 50.00 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA

CODE SECTION 120.
(For Those Already Enrolled.)

No. 2157

INVALID SOLDIER'S PENSION. 1899.

Name J.J. Lawhorn
County DeKalb
Disability Arm
Amount, $ 50. 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
DeKalb County.

Personally appears J. J. Lawhorn of DeKalb 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 1897; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company D, of 38th Regiment of Ga Volunteers, Gordon 's Brigade; that whilst engaged in such military service in the State of Va, on the 10 day of May 1864, he was wounded, injured or diseased as follows: Was wounded at the battle of Spotsylvania Va in the right arm rendering the bone and muscle of the arm to be entirely useless and essentially useless

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

Sworn to and subscribed before me, this the 11th day of Oct 1898. J.J. Lawhorn POST-OFFICE Decatur Ga

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

STATE OF GEORGIA,
DeKalb County.

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

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

Affix your seal here

Wm. Ragsdale
Ordinary DeKalb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
DeKalb County.

Personally appears J. J. Lawhorn of DeKalb 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 1897; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company D, of 38th Regiment of Ga Volunteers, Gordon 's Brigade; that whilst engaged in such military service in the State of Va, on the 10 day of May 1864, he was wounded, injured or diseased as follows: Was wounded at the battle of Spotsylvania Va in the right arm rendering bone and muscle entirely useless and essentially useless

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 DeKalb County been allowed an invalid pension of Fifty Dollars, for the year 1898.

Sworn to and subscribed before me, this the 31st day of Oct 1899. J.J. Lawhorn POST OFFICE Woodrow Ga Route 2

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,
DeKalb County.

I, Wm. Ragsdale Ordinary of said County, do certify that I am well acquainted with J. J. Lawhorn the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 Oct 1899.

Affix your seal here

Wm. Ragsdale
Ordinary DeKalb County.

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 DeKalb county been allowed an invalid pension of [illegible] Dollars, for the year 1897.

Sworn to and subscribed before me, this the 11th day of Oct 1898. J J Lawhon POST-OFFICE [illegible]

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

STATE OF GEORGIA, DeKalb County.

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

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

Affix seal here

[illegible] Ordinary DeKalb County.

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 DeKalb County been allowed an invalid pension of Fifty Dollars, for the year 1898.

Sworn to and subscribed before me, this the 31st day of Oct 1899. J J Lawhon POST OFFICE Stonecrest 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, DeKalb County.

I, [illegible] Ordinary of said County, do certify that I am well acquainted with J J Lawhon the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 Oct 1899.

Affix seal here

[illegible] Ordinary DeKalb 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

_____

CODE SECTION 1260 (For Those Already Enrolled.) No. 1617

INVALID SOLDIER'S PENSION. 1900.

Name J J Lawhon
County DeKalb
Disability _____
Amount, $ 50.
Warrant issued March 6 1900.

JOHN W. LINDSEY, *Commissioner of Pensions.*

WARRANT HANDED TO [illegible]

Geo. W. Harrison, State Printer, Atlanta.

Likely Lawhon, J J

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 _____ 1901.

_____ [L. S.]

Executed in presence of

_____

CODE SECTION 1260 (For Those Already Enrolled.) No. 2230

DISABLED SOLDIER'S PENSION. 1901.

Name J J Lawhon
County DeKalb
Disability Arm
Amount, $ 50.
January 31 1901.

JOHN W. LINDSEY, *Commissioner of Pensions.*

WARRANT HANDED TO [illegible]

Geo. W. Harrison, State Printer, Atlanta.

CODE SECTION 1250
(For Those Already Enrolled.)
No. 1617

INVALID SOLDIER'S PENSION. 1900.

Name J. J. Lawhorn
County DeKalb
Disability ---
Amount, $ 50
Warrant issued June 6 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

CODE SECTION 1250
(For Those Already Enrolled.)
No. 2252

DISABLED SOLDIER'S PENSION. 1901.

Name J. J. Lawhorn
County DeKalb
Disability Arm
Amount, $ 50.
Jan 31 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
DeKalb County.

Personally appears J. J. Lawhorn of DeKalb 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 1837; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company D, of 38 th Regiment of Volunteers, Gordon's Brigade; that whilst engaged in such military service in the State of Va, on the 10 day of Aug 1864, he was wounded, injured or diseased as follows:

Was wounded at battle of Newtown Va through right arm fracturing bone rendering same substantially and essentially useless

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 DeKalb County been allowed an invalid pension of Dollars, for the year 1899.

Sworn to and subscribed before me, this the 13 day of Jan 1900. POST OFFICE J. J. Lawhorn Decatur Ga

W. W. Ragsdale 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,
DeKalb County.

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

Given under my official signature and seal, this 13 day of Jan 1900.

Affix your seal here.

W. W. Ragsdale
Ordinary DeKalb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
DeKalb County.

Personally appears J. J. Lawhorn of DeKalb 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 1837; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company D, of 38 th Regiment of Ga Volunteers, Gordon's Brigade; that whilst engaged in such military service in the State of Va, on the 10th day of Aug 1864, he was wounded, injured or diseased as follows:

Was wounded at battle of Newtown Va through right arm fracturing bone rendering same substantially and essentially useless

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 DeKalb County been allowed an invalid pension of Dollars, for the year 1900.

Sworn to and subscribed before me, this the 2nd day of Jan 1901. Postoffice J. J. Lawhorn Decatur Ga

W. W. Ragsdale Ordinary.

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

STATE OF GEORGIA,
DeKalb County.

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

Given under my official signature and seal, this 12 day of Jan 1901.

Affix your seal here.

W. W. Ragsdale
Ordinary DeKalb County.

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 DeKalb County been allowed an invalid pension of [illegible] Dollars, for the year 189[illegible].

Sworn to and subscribed before me, this the 15 day of Jan 1900. } POST OFFICE J. J. Lawhorn

W. W. Ragsdale 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, DeKalb **County.**

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

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

Affix your seal here

Ordinary DeKalb County.

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 DeKalb County been allowed an invalid pension of [illegible] Dollars, for the year 1900.

Sworn to and subscribed before me, this the 12th day of Jan 1901. } Postoffice Montreal Ga

W. W. Ragsdale Ordinary.

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

STATE OF GEORGIA, DeKalb **County.**

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

Given under my official signature and seal, this 12 day of Jan 1901.

Affix your seal here

W. W. Ragsdale
Ordinary DeKalb 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 1902.

[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 1903.

[L. S.]

Executed in presence of

Lawhorn J. J.
DeKalb Co.

COUNTY SECTION 1900
(FOR THOSE ALREADY ENROLLED.)
No. 376

DISABLED
SOLDIER'S PENSION
1902.

Name Lawhorn J. J.
County DeKalb
Co. D Regiment 38"
Disability Arm
Amount, $ 50.
1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

[illegible]

Lawhorn J. J.
DeKalb Co.

COUNTY SECTION 1900
(FOR THOSE ALREADY ENROLLED.)
No. 331

DISABLED
SOLDIER'S PENSION
1903.

Name Lawhorn J. J.
County DeKalb
Co. D Regiment 38"
Disability Arm
Amount, $ 50.
1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

[illegible]

120 Atta

Sawhorn J.J.
De Kalb Co.

(CODE SECTION 720 (FOR THOSE ALREADY ENROLLED.)

No. 376

DISABLED

SOLDIER'S PENSION

1902.

Name Law Horn J.J.
County DeKalb
Co. D Regiment 38"
Disability Arm
Amount, $ 30,
1902.

JOHN W. LINDSEY,
Comptroller of Treasury.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

Lawhorn J.J.
DeKalb Co.

(CODE SECTION 720 (FOR THOSE ALREADY ENROLLED.)

No. 381

DISABLED

SOLDIER'S PENSION

1903.

Name Lawhorn J.J.
County DeKalb
Co. D Regiment 38"
Disability Arm
Amount, $ 30,
1903.

JOHN W. LINDSEY,
Comptroller of Treasury.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

720 data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
De Kalb County.

Personally appears J. J. Lawhorn of De Kalb 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 1837; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company D, of 38 th Regiment of Ga Volunteers, Gordon 's Brigade; that whilst engaged in such military service in the State of Ga, on the 10 day of Aug 1864, he was wounded, injured or diseased as follows: Shot in right arm rendering same entirely useless and amputation necessary at Newton Ga

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 De Kalb County, been allowed an invalid pension of $ 24 Dollars, for the year 1901.

Sworn to and subscribed before me, this the 15 day of Jan 1902. Post-office Winnsboro

W M Rogsdale, Ordinary.

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

J J Lawhorn

STATE OF GEORGIA,
De Kalb County.

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

Given under my official signature and seal, this 15 day of Jan 1902.

W M Rogsdale,
Ordinary De Kalb County.

Affix your seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
De Kalb County.

Personally appears J. J. Lawhorn of De Kalb 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 1837; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Pvt in Company D, of 38 th Regiment of Ga Volunteers, Gordon 's Brigade; that whilst engaged in such military service in the State of Ga, on the 10 day of Aug 1864, he was wounded, injured or diseased as follows: Shot in right arm rendering same entirely useless and amputation necessary at Newton Ga

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 De Kalb County, been allowed an invalid pension of $ 24 Dollars, for the year 1902.

Sworn to and subscribed before me, this the 10 day of Jan 1903. Post-office Winnsboro Ga,

W M Rogsdale, Ordinary

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

J J Lawhorn

STATE OF GEORGIA,
De Kalb County.

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

W M Rogsdale
Ordinary De Kalb County.

Affix your seal here

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