Pierce, J. W. De Kalklaung!

Ok for 1911

Confederate

Soldier's Application.

County Dekalls
Name J. W. Pierce
Company H

Regiment Junga,

Approved

J. W. LINDSEY,
Commissioner of Pensio

CHAS. P. BYRD, State Printer, Atla

40

Confederate
Confederate
Soldier's Application.
UNDER ACT 1910.

Company of Commissions of Presions
Approved

Approved

1. W. LINDSEY.
Commissions of Presions

Other I Will State Printer, Atlanta

Staff

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910. Questions for Applicants to Answer. STATE OF GEORGIA. Rikall 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 your name and where do you reside? (Give County and Post-office W. Flare Detallico How long and since when have you been a continuous resident citizen of this State? 68 grass Dec 25-14/84 3. Did you enlist in the Army of the Confederate States of of the Organized Militia of this State from 1861 to 1865? 4. When and where and intensit Company and Regiment did you enlist? (Give the arm and class of Service) 5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge). 6. When and where was your Company and Regiment surrendered or discharged from the Service? 7. Were you actually present with your command when it was surrendered or discharged? Was S. If you were not actually present, state specifically and clearly where you we Where was your Command when you left it? ... A Livery Clane Commone b. When did you leave the Command? I Die 710 Gove Comment 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?..... Why did you not return to your Command after leave expired? Aid not liasu Comman In what way were you prevented?..... What effort did you make to return?.... i. Were you captured during the war? I was na 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 Jand who and its cash value on the 4. Nov. 1908? (Make list by items and value.) 33 across gland on the 134 of Delkalle of Allen & Good of the State Goods \$5000 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? Mone Janeth 150 Co Total Val & Too Co and the source derived have you? Love 10 June 14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? I have not

Laure Note

perty, if any, has been sold or given away by the applicant or his wie since 4 Nov.

2. When and to whom was it sold or given to? Sold none

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

4. What relation is the party to applicant? Nove

What disposition was made of the proceeds of the sale? 210 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

ORDINARY'S CERTIFICATE.

TATE OF GEORGIA. Ordinary of said County, certify that I know the applicant J. Direct. for Pension is the person be represents himself to be and resides in said County. That I also know W. B. Mules & W. Liebby the witness swearing to the service and W.B. mutalft www.Circles. who are free holders, that they are all residents of said county and were duly sworn by me before signing the foregoing afficiavit and they are all truthful and trustworthy and their statements are entitled to full faith, and credit. That the Tax Results of shows that full full and wife and wife value for tax is in 1908 \$ \$20.1 ** for 1909 \$ 5.7.5 ** for 1910 \$ 6.25 ** O 25 day of Augo 1910

Before any questions are answered the Ordinary shall awear applicant and all witnesses in the following words "You do solemnly awear that you will true answers make to each question asked you and the evidence you Additional affidavits may be attached if blank spaces are insufficient.

All affidavits must be made before the Ordinary and certified by him. If applicant has no property at all in his possession, use or control of self and wife, affidavits of Free holders unnecessary.

WWR EI AND WHERE BORN? Resident of Georgia since December 25th, 1842.

(68 years)

ENGLISHED WHEN AND WHERE? Merch 1st 1868, Doraville, Georgie.

BANK

COMPANY AND REGIMENT? Company I, 2nd Georgia Reserves.

AL CF CAPTAIN AND COLONEL?

'CPL FD?

CAD MIRED. WHEN AND WHERE?

PELEASED.

WEEN AND WHERE SURRENDERED? April 87th 1865, Albany, Georgia.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

DURIED,

WI INESSES. T. M. Waldrop- Same comman W. F. Metcalf-

No dete

innell John	masion Office -9-13-1908.
De Kalta	No military service is proven r any discharge therefrom to of enlistment and discharge at be clearly proven.
7 - 14	JaWebantnoy,
NDIGENT PENSION,	Com. Of Pensions.
Name Pinnell Jno, County De Kalb Co. B. 8th Ga Reg'n't Approved 1902. JOHN W. LINDSKY, Commissioner of Pensions.	Pension Office, 9/22/03. Applicant will a wont and state when he sold property, what price was paid him for it, was it full and fair value of land, and to whom he paid out honey, and how inch and for what. Who is in pos- session and control of property how, does applicant reside en, use and control it now? Prove all to be true. J.W.bindaey, com. of Pensions.
-	Pension Office, 7/22/04.
WARRANT HANDED TO Ordinary will, write Name of Applicant, Company and Regiment on back as indicated above.	Mist submit some testimony of actual value of this land at time son was prevented to pay off mortgage and take title. This was worth more than the mortgage act. Cannot give away valuable property and remain in use and control of it and then obtain Indigent Pension. This must be fully shown as suggested.

STATE OF GEORGIA, POWER OF ATTORNEY

J. W. Lindsey, com. of Pensions.

POWER OF ATTORNEY.	Questions for Applicant.
STATE OF GEORGIA,	STATE OF GEORGIA,
	Le County
COUNTY.)	In Finnel of the Pension Act (Section 1954 Code) hereby submits his proofs and offer being duly agree
I,hereby authorize	And this 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, Coupsy and post office) The Company of the Com
to receive and receipt for the pension allowed, and request that he remit same to	pro Pinnell De Kell County, Decation Sa.
atbv	2. How long and since when have you been a resident of this State?
Witness my hand and seal, this day of 1902.	Since 1835. 3. When and where were you born? In April 1825, In Hall Lagla.
[L. S.]	In Decame Ha Company and regiment did you enlist or serve Ala Mar 1862,
Executed in presence of	In Decamor Da 200 D. om, Ba.
	5. How long did you remain in such company and regiment? Liny Munths.
	6. When and where was your company and regiment surrendered and discharged? In May 1865
	0. When and where was your company and regiment surremered and discharged 1924 2 2 Case 7 9 0
	j -
	7. Were you present with your company and regiment when it was surrendered? Was 8. If not present, state specifically and clearly where you were, when you left your command, for what cause
	and by whose authority?
	9. How much can you carn (gross) per annum by your own exertions or labor 125 03/130
	9. How much can you care (gross) per annum by your own exertions or labor 35 0 530 10. What has been your occupation since 1805? The state of the following grounds do you base your application for personnels; these, "age and powerty."
	9 second, "infirmity and poverty," or third, "blindness and poverty"?
the second secon	second, "infirmity and poverty," or third, "blindness and poverty"? Infirmity and poverty 12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third,
10 1 20	to state whether you are totally blind and when and where you lost your sight? How feel do
The same of the sa	b for host three or four years could
to all assignment assi	I not work hay of my time
Be gettred and a second a second and a second a second and a second and a second and a second and a second an	A 13. What property, real or personal, or income, do you possess, and its gross value?
discharge of the training of training of the training of training of the training of t	14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900 and 1901,
	and what disposition, if any, by sale or gift, have you made of same? And Secretly news
nerviore the spectal part and	10 0 land Deed & Mingland to my sen four
THE STANGE OF THE PROPERTY OF	The state of the s
Trible of Co.	In He kay barrin land up hery gea.
The state of the s	16. How were you supported during the years 1899, 1900 and 1901? My work out the
The part of the pa	M. How much did your support of the reach of those years and what portion did your contribute thereto by your own labor or income? Say In Severally Dollars.
Sept Aggardage	your own labor or income? Six 18 Value 1901? What pay and you receive in each year?
一· · · · · · · · · · · · · · · · · · ·	19. Have you a family? If to, who composes such family? Give their means of support? Have they a
	homestead? Wife and two daughters They keep
5/1/4 2 - 31 Bata 1 - 5	- Bows and work in plants factory
3 1 1 1 1 1 1 1 1 1 1 1 1 2 1 1 1 1 1 1	20. Age you receiving any pension? It so, what amount and for what disability?
PENSION PENSION JAO JAO JAO JAO JAO JAO JAO J	<u>Ja</u>
PENSI OD2. OD2. ORO LAND AND. ORO HANDED TO HANDED TO	21. Have you ever made an application for pension before? 22. How many applications have you ever made and under what class? (A) Sworn to and subscribe P before me this the
	Low many approximate mave you ever made and under what chees . The Pinnell
Set / O JOHN JOHN SET / O JOHN JOHN JOHN JOHN JOHN JOHN JOHN JO	
	Applicant.
DIGENT PORCH P	MM (o gs dace) Ordinary,
	of Selland County,
7 3 8 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

1900 and 1901, acres

QUESTIONS FOR WITNESS.	
STATE OF GEORGIA,)	
× Wolfer	
mil B COUNTY.)	
AM Gawilling of said State and County, having been presented	
for pension funder Section 1254, Code, and after being poly sworm the answers to make to the following questions, deposes and answers as follows:	
1. What is your name and where do you reside MI Hawkins In De Kalh	
County, for Poisson	
2. Are you acquainted with the mine of the applicant; if so, how long have you known him? Ils, Tithtalive aleas	
Where does he reside, and now long and since when has he light a resident of this State?	
4. When where and in what company and regiment aid he enlist, and how do you know?	
In Mar 1862 in lee B. 8th Ja Regnery	
5. Were you a member of the same company and regiment? I was	
6. How long did he perform regular military duty?	
7. When and where was his command surrendered?	
8. Were you present when it surrendered? I was not	
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?)	
16dr. H. Houles Survey Same None Pina Sheeting	
12. What property, enecus or income did the approximat possess in 1896, 1897, 1898, 1899, 1990 and 1901, and	1
what displayion if any, did he make of same? He had something or colling to the stand but in way sheavily mortal god and in	
13. Has he conveyed away any of his proporty in the last four years, if so, what wor it, port to shom?	
- toxic except the dace made above to satisfy morting	
11. What is the applicant's occupation and physical condition? He is a flas successful the)
armid bally cripped from a hotely	
15. Is the applicant unable to support himself by labor of any sort, if so, why he is on account	
1/3000 a gre and the weath Condition of	
11111 1 10111	
this arm	
16. How was he supported during the years 1898, 1999, 1900 and 1901, 13 of the suelf of his	
16. How was he supported during the years 1898, 1999, 1900 and 1901? Together Such and Support for these lower years was derived from his own labor or income? 17. What portion of his support for these lower years was derived from his own labor or income?	
16. How was he supported during the years 1898, 1999, 1900 and 1901, 13 of the suelf of his	
16. How was he supported during the years 1898, 1999, 1900 and 1901? Day the Muly of his what portion of his support for these day years was derived from his own labor or income? 18. Give a full and complete statement of the applicant's physical condition that charles a lim to a pension under Section 1254, gode?	
16. How was he supported during the years 1898, 1999, 1900 and 1901? Doy the Melfs of his 17. What portion of his support for these day years was derived from his own labor or income? 18. Give a tull and complete statement of the applicant's physical condition that of the same of the statement of the applicant's physical condition that of the same of	
16. How was he supported during the years 1898, 1999, 1900 and 1902? Doy the Mulp of his 17. What portion of his support for these buy years was derived from his own labor or income? 18. Give a full and complete statement of the applicant's physical condition that shuffles him to a pension under Section 1254, 190de? A condition of and the during a support of the section 1254 and th	
16. How was he supported during the years 1898, 1999, 1900 and 1901? Doy the Melfs of his 17. What portion of his support for these day years was derived from his own labor or income? 18. Give a tull and complete statement of the applicant's physical condition that of the same of the statement of the applicant's physical condition that of the same of	
16. How was he supported during the years 1898, 1999, 1900 and 1901? The Mily of his what portion of his support for these buy years was derived from his own labor or income? 18. Give a full and complete statement of the applicant's physical condition that shuftles aim to a pension under Section 1254, 190de? 19. What interest have you in the recovery of a pension by this applicant? Dorse	

AFFIDAVIT OF PHYSICIANS

STATE OF GEORGIA,
DE 11. 11.
5, 0,
7102 -
of said County, who, being severally sworn, say on oath that they have examined carefully Mr
Connect , applicant for pension under Section 1254, Code, and after
such personal examination say that his precise physical condition is as follows:
" Ald age and informaties, 77 years old partially
blind, auttired and right mist broken a akilose
almost totally dup both and
and that we have as fetured to all the little by the littl
Sworn to and subscribed before me, this the 3/" play of such 1902.
Sworn to and subscribed before me, this the WA Facuston M. D.
Umbassace Ordinary.
Orimary.
ORDINARY'S CERTIFICATE.
STATE OF GEORGIA,
De Kalh COUNTY
· Min Mr
that the applicant In Converted regides in said County, hereby certify
been a bona fide resident of this Stays since the day of Mile 1825
and that the witnesses, viz .: I A fores and the Bautin
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 withess took the oath
hereon prescribed, and that the full text of the affidavits was read to the applicant and witness before same was signed.
0 311 0
I further certify that the tax digest of the Call County show that applicant
I further certify that the tax digest of the Call County show that applicant returned for taxation in his name in 1899 1022 Dollars of
Aure 1
returned for taxation in his name in 1899 1022 Dollars of property, and in 1900 Dollars of property. In my opinion the foregoing claim is made in good faith.
returned for taxation in his name in 1899 1022 Dollars of property, and in 1900 1000 Dollars of property.
property, and in 1900

^{1.} Before any questions are answered, the ordinary shall swear applicant and the witnesses in the following the whole truth, so help you God."

2. Additional afficiations pe 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

	Ι,	County.)		hereby authorize
* *		of		
o receive a	nd receipt for the	pension allowed	l, and request th	at he remit same to
		at		
ру				
WITN	ess my hand and se	al, this	day of	1906.
		<u> </u>		[L. s.]
Execu	ted in the presence	of		
	•			
	•			
 Sl				
ē)				
			&	
	ION			
OLLED.)	ISION .		7 1906.	Pravions.
NROLLED.)	ENSION	and the state of t	2 2 1906.	of Pensions. TO
THOSE ALREADY ENFOLLED) No S & S	S PENSION	Pinnell Park Ask	WARRANT ISSUED //2 \times 1906. JOHN W. LINDSEY.	Commissioner of Pensions. ARRANT HANDED TO CHANGE Co. Gto. W. internet. Man.

POWER OF ATTORNEY.

STA	I, January and	CORGIA,	COUNTY.	lowed, an	all request	0	hereby a	de
Oby_	WITNESS	my hand and se		16	day of	Sun	y Coll	
3	Pannis	ted in presence	of organization					
	NROLLED)	NSION	660	od En 1	12, 1907.	X, rer of Pensions.	D TO	ully
3	CODE SECTION 1254. SE ALREADY EI (0. 60)	ER'S PE	F. Pini	Regiment	VARRANT ISSUE	₩.	RRANT HANDE	1. Month of the Parties
12 Ch. Co.	OR THOSE ALREADY ENROLLED No. FUL	LDIER'S PENSI	Ju Pinicell	y-B. Regiment of &	WARRANT ISSUED	JOHN W. LINDSEY, Commissioner of Pen	WARRANT HANDED TO	A 12 Ault

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

~ Tin	all County.
	Coancy.)
	illy appears from Princell of De Kalb
	of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
	of said County and State, and has resided in said State continuously ever
since the	3 day of april 1820; that he is 80 years old and
by occupation	
federate States	s (or of the State of) during the war between the
States, and ser	ved for the term ofin Company 13, of Sth Regiment
of year	gra ; that his physical condition is as
follows:	Infirmity & poverty
that his prope	erty consists of the following items:

of the value o	fDollars. I am now earning
by my labor,	
1 1 1	
labor, and tha	ition and poverty he is unable to support himself by his own exertion or at he receives no pension but the one herein applied for.
Depone 1894, and the is entitled for	at he receives no pension but the one herein applied for. ent desires to participate in the benefits of the Act approved December 15th, Acts amendatory thereof, and makes application for the pension to which he re the year 1906. I have heretofore, as a resident of
labor, and the Depone 1894, and the is entitled for County, been Sworn	at he receives no pension but the one herein applied for. In the desires to participate in the benefits of the Act approved December 15th, Acts amendatory thereof, and makes application for the pension to which here the year 1906. I have heretofore, as a resident of allowed a pension for the year 1905. It and subscribed before me, this the
labor, and the Depone 1894, and the is entitled for County, been Sworn	at he receives no pension but the one herein applied for. Ent desires to participate in the benefits of the Act approved December 15th, Acts amendatory thereof, and makes application for the pension to which he re the year 1906. I have heretofore, as a resident of the pension for the year 1905. To and subscribed before me, this the day of parameters 1906.
labor, and the Depone 1894, and the is entitled for County, been Sworn	at he receives no pension but the one herein applied for. In the desires to participate in the benefits of the Act approved December 15th, Acts amendatory thereof, and makes application for the pension to which here the year 1906. I have heretofore, as a resident of allowed a pension for the year 1905. It and subscribed before me, this the
labor, and the Depone 1894, and the is entitled for County, been Sworn	at he receives no pension but the one herein applied for. Ent desires to participate in the benefits of the Act approved December 15th, Acts amendatory thereof, and makes application for the pension to which he re the year 1906. I have heretofore, as a resident of the pension for the year 1905. allowed a pension for the year 1905. to and subscribed before me, this the day of famury 1906. Ordinary.
labor, and the Depone 1894, and the is entitled for County, been Sworn	at he receives no pension but the one herein applied for. Ent desires to participate in the benefits of the Act approved December 15th, Acts amendatory thereof, and makes application for the pension to which he re the year 1906. I have heretofore, as a resident of the pension for the year 1905. To and subscribed before me, this the day of parameters 1906.
labor, and the Depone 1894, and the is entitled for County, been Sworn Jamus State	at he receives no pension but the one herein applied for. In the desires to participate in the benefits of the Act approved December 15th, Acts amendatory thereof, and makes application for the pension to which here the year 1906. I have heretofore, as a resident of allowed a pension for the year 1905. It and subscribed before me, this the day of participation of the year 1906. Ordinary. Of Georgia, County.
labor, and the Depone 1894, and the is entitled for County, been Sworn Jamus State	at he receives no pension but the one herein applied for. In the desires to participate in the benefits of the Act approved December 15th, Acts amendatory thereof, and makes application for the pension to which here the year 1906. I have heretofore, as a resident of allowed a pension for the year 1905. It and subscribed before me, this the day of plumary 1906. Ordinary. Ordinary. Ordinary of said County,
labor, and the Depone 1894, and the is entitled for County, been Sworn State	at he receives no pension but the one herein applied for. In the desires to participate in the benefits of the Act approved December 15th, Acts amendatory thereof, and makes application for the pension to which here the year 1906. I have heretofore, as a resident of the pension for the year 1905. It and subscribed before me, this the day of participated before me, the day of participated before
labor, and the Depone 1894, and the is entitled for County, been Sworn State I, feed do certify the the applicant	at he receives no pension but the one herein applied for. In the desires to participate in the benefits of the Act approved December 15th, Acts amendatory thereof, and makes application for the pension to which here the year 1906. I have heretofore, as a resident of the year 1906. I have heretofore, as a resident of the year 1905. To and subscribed before me, this the day of year 1906. Ordinary. Ordinary. Ordinary of said County, at I am well acquainted with the foregoing affidavit, and am well satisfied that the statements made
labor, and the Depone 1894, and the is entitled for County, been Sworn State County, been Sworn I Lamus The County of the Applicant by him in his	at he receives no pension but the one herein applied for. In the desires to participate in the benefits of the Act approved December 15th, Acts amendatory thereof, and makes application for the pension to which here the year 1906. I have heretofore, as a resident of the year 1906. I have heretofore, as a resident of the year 1905. To and subscribed before me, this the day of participation of the year 1906. Ordinary. Ordinary. Ordinary of said County, at I am well acquainted with properties of the the statements made in the foregoing affidavit, and am well satisfied that the statements made is said affidavit are true, and I know he is the individual he represents himself
labor, and the Depone 1894, and the is entitled for County, been Sworn State County, been Sworn I Lamus The County of the Applicant by him in his	of Georgia, at I am well acquainted with in the foregoing affidavit, and am well satisfied that the statements made said affidavit are true, and I know he is the individual he represents himself the receives no pension but the one herein applied for. Acts amendatory thereof, and makes application for the pension to which he received and makes application for the pension to which he received and makes application for the pension to which he received and makes application for the pension to which he received and makes application for the pension to which he received needs a resident of the pension to which he received needs a resident of the pension to which he received needs a resident of the pension to which he received needs a resident of the pension to which he received needs a resident of the pension to which he received needs a resident of the pension to which he received needs a resident of the pension to which he received needs a resident of the pension to which he received needs a resident of the pension to which he received needs a resident of the pension to which he received needs a resident of the pension to which he received needs a resident of the pension to which he received needs a received n
labor, and the Depone 1894, and the is entitled for County, been Sworn State County, been Sworn I Lamus The County of the Applicant by him in his	of Georgia, County. Ordinary of said County, at I am well acquainted with first the foregoing affidavit, and am well satisfied that the statements made is said affidavit are true, and I know he is the individual he represents himself at the resides in this County. Given under my official signature and seal, this
labor, and the Depone 1894, and the is entitled for County, been Sworn State County, been Sworn I Lamus The County of the Applicant by him in his	of Georgia, at I am well acquainted with in the foregoing affidavit, and am well satisfied that the statements made said affidavit are true, and I know he is the individual he represents himself the receives no pension but the one herein applied for. Acts amendatory thereof, and makes application for the pension to which he received and makes application for the pension to which he received and makes application for the pension to which he received and makes application for the pension to which he received and makes application for the pension to which he received needs a resident of the pension to which he received needs a resident of the pension to which he received needs a resident of the pension to which he received needs a resident of the pension to which he received needs a resident of the pension to which he received needs a resident of the pension to which he received needs a resident of the pension to which he received needs a resident of the pension to which he received needs a resident of the pension to which he received needs a resident of the pension to which he received needs a resident of the pension to which he received needs a resident of the pension to which he received needs a received n
labor, and the Depone 1894, and the is entitled for County, been Sworn State County, been Sworn I Lamus The County of the Applicant by him in his	at he receives no pension but the one herein applied for. International desires to participate in the benefits of the Act approved December 15th, Acts amendatory thereof, and makes application for the pension to which here the year 1906. I have heretofore, as a resident of the year 1906. I have heretofore, as a resident of the pension to which here the year 1905. I have heretofore, as a resident of the year 1905. The day of the year 1906. Ordinary. Ordinary. Ordinary of said County, at I am well acquainted with the property of the foregoing affidavit, and am well satisfied that the statements made is said affidavit are true, and I know he is the individual he represents himself at he resides in this County. Given under my official signature and seal, this
labor, and the Depone 1894, and the is entitled for County, been Sworn State County, been Sworn I Lamus The County of the Applicant by him in his	of Georgia, To all am well acquainted with in the foregoing affidavit, and am well satisfied that the statements made is said affidavit are true, and I know he is the individual he represents himself at the resides in this County. Given under my official signature and seal, this

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,	
DeKAIS Coun	
Personally appears Juo	
County, State of Georgia, who, being du	ly 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 theday of	; that he isyears old
and by occupation a	, that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served for the term of	in Company B, of & th Regiment
follows: Infirmity.	and poverty
	The state of the s
that his property consists of the followi	
	Dollars. I am now earning
by my labor,	Dollars per month. That by reason of his
1894, and the Acts amendatory thereof, a	the benefits of the Act approved December 15th, and makes approcation for the pension to which he
is entitled for the year 1907. I have her	
Sworn to and subscribed before me day of	e, this the 1907.
State of Georgia,	
I, Janus R. &	ty.) 7. or 198 Ordinary of said County,
do certify that I am well acquainted wi	ich Ino Connece
he applicant in the foregoing affidavit,	and am well satisfied that the statements made
	I know 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	1907.
	Allice Control

Affix your aral here

Nove.—The blank spaces must be filled.

_County.

DeKalb County.

In person comes L.J. Steele, who be-

L. J. Steeles

ing duly sworn says that in 1899 he had for collection and foreclosure one mortgage against Jno. Pinnell and in favor of Mrs. Georgia A. Durham for the sum of some six hundred dollars. Judgment was taken against said Pinnell, xxx execution issued and levied on some sity or seventy acres of land in said county. An adjustment of said debt was effected and said land was sold to one Henry Pinnell for enough to pay principal interest and costs of the above fifa. The amount of money paid was a something over six hundred dollars and was paid by said H. R. Pinnell to Mrs. Georgia A. Durham in said satisfaction tax of the above named debt. The sum paid was the full worth of said land, and the plaintiff if in fifa was satisfied and gratisfied at the turn the collection of her debt took.

My understanding, belief and opinion is that said H.R. Pinnell is in control and possession of said land. The applicant resides on the land with his son H.R. Pinnell, but only as a father it in his old age living with his son.

The sale of the land to said H.R. Pinnell was a bona fide transaction, said H.R. Pinnell having to mortgage other property to raise the money to pay for said land.

Sworn to and subscribed before me this 4th day of December, 1903.

Ordinary DeKalb County.

estation Georgias
State of Georgias I It & Center
1 / Maid state and for
· County and well arguainted with
. Jaw Finnell. The Said fro Timell
· performed regular Withtany duty
18 Manths in intisted at Breatur
· Georgia March 1862 In Company B
8 Gengra Regenent he was
10 With his command when discharge
in Man, 1865
18 Sworm to and Suppended W. H. Carter
" before me this 3 day of }
1 247 1903
Jas. R. George Ordinary.
ordinan,
18
10
so Georgia & I fas R George ardinary
21 Setall Co of Said County do certife
" That W. Y Cavier appidavit it worth
2 of full faith and endix
" Supr 377903
gas R George Ordinang
20

G brgin.

D Kalb County.

In preson com s Jam s Hunt r who on oath says that h is a r sid nt of said county and has b n for many y ars, and that h is familiar with the property , of H. R. Pinn 11 in said county, form rly owned by his father Jonathan Pinn II and that he is acquaint d with the value of said property and of the value of the same in 1899, and that the sum of six hundr d and thirty (630) dollars paid by the said H. R. Pinn 11 for said land in 1899 was a fair valu for th sam .

Subscrib d and sworn to b for Janus Aunzten m this 20thday, 1904.

Georgia, Fulton County.

In person came James W. Austin.

who being duly sworn says:

Deponent knows Jonathon Pinnell, who sold his farm to his son Henry R. Pinnell about the year 1899. Deponent knew of said transaction, being the attorney representing the purchaser. The sale was in all respects bona fide and the price paid fair and reasonable. If Jonathon Pinhell had not sold, he would have been sold out by the sheriff and the land would not, in deponent's opinion, have brought more than the file, amounted to. Since the sale Henry R. Pinnell has been in the possession and control of the land, and Jonathon Pinnell resides thereon merely through the permission of the purchaser and through no claim of legal right. Deponent negotiated the loan to secure the money to buy this land, and the purchaser had to mortgage this land, and two other tracts he owned, to secure the sum needed to buy this land.

Sworn to and subscribed before me, this Dec. 20th, 1904.

WHEN AND WHERE BORN? April 1825, Hall County, Georgia

ENLISTED WHEN AND WHERE? March 1862, Decatur, Georgia

RANK.

COMPANY AND REGIMENT? Co. B. 8th Ga. Regt.

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURKENDERED? May 1865, Applicant does not sta te

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHIRE?

BURIED,

J. M. Hawkins -WITNESSES. Cattantones Same Command- No data

W.H. Carter- Personal knowledgemh.

APPLICATION FOR

FOR COMPRIDERATE SOLDIER.

County A Cast O

Limb OMM Gt Com Clam

Amount A HO

Date of Warrant Asset 1985

APPLICATION FOR

APPLICATION FOR

FOR CONSTITUTES.

OPPON M. PLOMMAN.

CORRESPONDENTS SUMMER.

OPPON M. PLOMM CLOMM

Limb ONAM GLOWN CLOMM

Amount A LANG UN

A LANG

STATE OF GEORGIA.

1. Kall

County.)

Personally appeared before me. William M. Finnell of
the county of State of Georgia, who, being duly sworn, deposes and says that he was on the 20th day of September, 1879, a bona fide resident of this State; that he
enlisted in the military service of the Confederate States, or of this State, as a 12
in Company 18 36 th Regiment of Gelt 1964 Wolunteers
that while engaged in such military service, to wit; at the battle or engagement of On. The March in the State of Jetters of the day of
Rololor 1863, he was wounded in the little and and
that the same was amputated. A literate that he has not received the payment allowed him for such limb under an Act entitled an Act to carry into effect the last clause of Paragraph I, Section 1, Article 7 of the Constitution of 1877, approved September
20th, 1879; that he has
Sworn to and subscribed before me this
(18) James 18 d. S.
Note: The above allidavit must be made before some officer authorized to administer outle, a Judge of the Superior of County Court, Justice of the Peace, Clerk of the Superior Court, or Ordinary.
COMMISSIONED OFFICER'S AFFIDAVIT
STATE OF GEORGIA.
Detralle County.
Personally came before me. George 13. 16 cedsory of
the county of
and says that he was the Feetilesiant in Company 7 36 th Regiment
and that Milliam the Pinnell the above deponent, was a Private
in said Company, and that this deponent knows that said. Milli M. Pinnell
lost a hartiful Grans in the military service as said in the above affidavit.
Sworn to and subscribed before me this
(Z. day of makes as a 18 mm.)
Norm.—If the additavit of the commissioned officer is not obtainable, the following addavit of three responsible citizens must be furnished.

AN ACT

To carry into effect the last clause of Paragraph 1, Section 1, Article 7 of the Constitu ion of 1877.

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

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

SEC. 111. Be it further enacted by the said authority, That no applicant shall receive the sum allowed under this Act oftener than once in five years.

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

Hesey R. Goscomus, Secretary House Representatives, WM. A. HARRIS, Secretary Senate, Approved, Saptember 10th, 1879.

A. O. BACON,
Speaker House Representatives.
RUFUS E. LESTER,
President Senate,

ALFRED H. COLQUITT, Governor

STATE OF GEORGIA,

County.)
Personally came.
who, being duly sworn, depose and say they are acquainted with
and know that he lost ain the military service during the late war ;
hat said; that he is a bona fide
citizen of this State, and we are well satisfied that the facts stated by him in the above affidavit are true.
Sworn to and subscribed before me this
day of
STATE OF GEORGIA,
We Kalls County,
1 H V Bayou Ordinary of Del Calls
ounty, do certify that I am well acquainted with William M. Penerell
ae applicant for a Allant and am well satisfied that the facts stated by him in the foregoing
Alldavit are true, and that I am well acquainted with General B. Henrich Lines.
Calletin af Lormhamy 1. 1. 16 Hea Registrated
Given under my hand and official seal, this June the 19th
day of
H. V. Bayore ordinary

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

the laws granting allowances (redisabled soldiers, as well is the rules adopted by the Governor touching the payments provided, the following suggestions are submitted:

1. It an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physicians and followed by a plain statement of facts showing the extent of the disability. It 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 fiscless 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. 4f the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."

that the egg is not substituting and essentially asserts.

2. 5. It papers are returned for correction, and amendments are added to any of the affidavits, the amendments must be made under outh before an officer, and the proofs must show that the amendments have

6. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.

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

. For Use of Applicants Who Have not Heretofore Drawn.

The second of th
STATE OF GEORGIA,
De hall county.
PERSONALLY appears / Militime Conf. of De Mall county, State of Georgia, who, being duly sworn, says on oath that he is a hona fide citizen and
resident of said State, and has been such since the day of
184/; that he enlisted in the military service of the Con-
federate States (or of the State of Georgian) during the war between the
States, and served as a fricat, in Company 6, of 36 th Regiment
of Leng in Volunteers - Cummings Brigade; that whilst engaged
in such military service, at the battle of Mac Could in the State
wounded as follows: With it a min wife he was
wounded as follows: With a mirrie ball
all four of fingers
July July Comment
Deponent desires to participate in the benefits of the Act, approved October 24, 1887,
and the Act amendatory thereof approved Daniel 1999

ory thereof, approved December 24, 1888, and makes application for the allowance to which he is entitled thereunder for the year ending October 26, 1889.

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

Commissioned Officer's Affidavit.
STATE OF GEORGIA, County. PERSONALLY came before me MM. Collact of the county
De Kall County. S
Personally came before me Will Coll rain of the county
of Average State of Georgia, who, being duly sworn says that he was
a commissioned officer in Company , of 36 Regiment of Ca
a commissioned officer in Company f, of 36" Regiment of Wolunteers, and that deponent knows Wolunteers, and that deponent knows Wolunteers, 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 1000 livered
Months stated by him in said affidavit. Deponent further states that said is a bona fide citizen of this State and resides
in Allaff county.
Mikagsdace Hill toefran
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 efficers should be found in the following affidavit of three responsible efficers should be found in the following affidavit of three responsible efficiency is not obtained by the following affidavit of three responsible efficiency is not obtained by the following affidavit of three responsible efficiency is not obtained by the facts are not obtained by the

L'adinary Reliell Co.

STATE OF GEORGIA,
Re latt. County.
PERSONALLY came A.M. Cookern
in the state of th
citizens of
who, being duly sworn, say that they are acquainted with AM. Firmell
and know that he received the wounds (or contracted the
disease) in the military service, as stated by him in the foregoing affidavit; that said wounds
for disease) permanently disables applicant, as stated by him; that said applicant is a bona fide citizen of this State, and resides in the Hall county, and we
are well satisfied that all the statements in his affidavit are true.
Sworn to and subscribed before me, this day of 188 H. H. Gookran
Note. Above addavit must be made by three citizens of the county of applicant's residence.
STATE OF GEORGIA,
De Side Po County.
PERSONALLY comes before me hule Magedocl Ordinary of said county,
Mayrow and It breen both known to
me as reputable physicians of said county, who, being severally sworn, say on oath that
they have carefully examined It. 14 de viell and after such
examination say that the applicant has been injured as follows: Leve Shot
Hound in left hand with intere los
If four fingers and bee hoff of I whoogopal
wow wich the enders him pragtically
incompetent to herform to
Ordinary Manual decotions x
ife:
Sworn to and subscribed before me, this) L & Marko 100
12 day of felowed & Affreen m.D.

day of He 1889 Street M. J., ORDINARY.

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

STATE OF GEORGIA,
No Kall County
I, Manual County S I, Manual County S do certify that I am well acquainted with Manual County the
do certify that I am well acquainted with MM Prinnell the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be,
and that he resides in this county. I also certify that the foregoing witnesses are persons
of respectability, and that their statements are worthy of full credit and belief.
I further certify thatbefore
whom the foregoing affidavits were made and power of attorney was signed, is a
of said county, and the said affidavits and signa-
tures thereto are genuine.
Given under my official signature and seal, this /2" day of Color 1889
1 Mankage ding
Ordinary County.
Power of Attorney.
STATE OF GEORGIA,
County.
Know all Men by these Presents, That I,
of .
county, in said State, do hereby appoint
of my true and lawful attorney in fact, for
me and in my name, to receive and receipt for whatever amount of money I may be entitled
to from the State of Georgia by reason of the injury received as aforesaid in the military ser-
vice of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby
authorizing my sald 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

In witness whereof I have hereunto set my hand and seal, this

day of 188

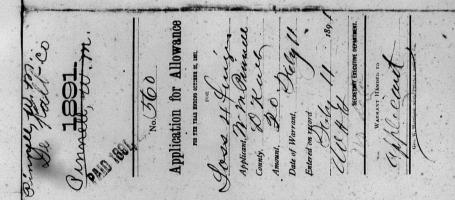
Executed in the presence of us:

a.s.

	STATE OF GEORGIA,
	The Hall County.
000000	1, MM. Rogsdale, Ordinary of said county
	do certify that I am well acquainted with MM Prinnell 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 6 day of 1896
	Mount 1
	1. M. Cagsaale
	Ordinary De Kall; County

1 7	MAINE.	
Pennach, W. M.	No. 10 14 No. 10 14 RPLGATION FOR ALLOWANCE. REAL OF FINITY HULY & Applicani, Mr. M. Caving & Amenin, 2.0. Rely E, Date of warrani, Hely E, Entered on record Colly 1.2. 1890 U. 18. 18	Apple Car
A and	No. 1 LCATION TO WASTAN DE VICEO DE VIC	WALL
3	Applie Count Amon Applie Count	la .

STATE OF GEORGIA,
Die Kall Conniy.
I, M. Rogs dale, Ordinary of said County,
do certify that I am well acquainted with IIII. Prinnelf 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. If further certify that
before whom the foregoing affidavits were made and power of attorney was signed, is a
of said County, and the said amdavits and
signatures thereto are genuine.
Given under my official signature and seal, this // day of // 1891.
Min Orgsdaler
Milliogradale, Se Halls, County.



For Applicants Heretofore Allowed Pensions. For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA, STATE OF GEORGIA. De Kach County of De Kall County. PERSONALLY appears 1111 Prince, of he Hall County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has been such continually since the resident of said State, and has resided therein continuously ever since the 18 44; that he enlisted in the military service of the Con-1844; that he enlisted in the military service of the Con-La during the war between the federate States (or of the State of () during the war between the federate States (or of the State of States, and served as a Private in Company F, of 36 th Regiment of Leogia Volunteers learning's Brigade; that whilst engaged States, and served as a Private in Company F, of 3/2th Regiment of Ga Volunteers Currening's Brigade; that whilst engaged in such military service, at the battle of Mass level? in such military service at the battle of Moss Coreek in the State of Lenn on the day of Oct 1863, he wounded as follows: Shot with a minning ball wounded as follows: Afrot with a minume Bay in the fingers of said a los of all in the left hand cousing a lose all the pringers 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 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 for the year ending October 26, 1891. I have heretofore been allowed a pension ofentitled for the year guiding October 26, 1890. I have heretofore been allowed a pension dollars, for Sworn to and subscribed before me, this, the day of The 1891. Millogsda Q. Oldring, 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. POWER OF ATTORNEY. STATE OF GEORGIA STATE OF GEORGIA County. KNOW ALL MEN BY THESE PRESENTS. That I Know all Men by these Presents, That I, County, State of Georgia, do hereby appoint county, in said State, do hereby appoint my true and lawful attorney in fact, for 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 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 to from the State of Georgia by reason of the injury received as aforesaid in the military service service of the Confederate States (or of this State), as stated in the foregoing affidavit; of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizhereby authorizing my said attorney to receipt in my name for any Warrant that may be ing my said attorney to receipt in my name for any Warrant that may be issued by the Goverissued by the Governor, or tor any sum of money which may be coming to me for the reason nor, 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 IN WITNESS WHEREOF, I have hereunto set my haud and seal, this L. S. Executed in the presence of us: Executed in the presence of us: DIRECTION. DIRECTION Send money to me as follows, by Send money to me as follows, by P.O.

County, Georgia.

[L. S.]

County, Georgia.

STATE OF GEORGIA.

A.o. No ll County,

1. Will Regardale. do certify that I am well acquainted with WM Pinnell 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 2d day of March 1892. SOLDIER'S PENSION

For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA.

	of Given under my official signature and read of	County, State of Georg	ia, do hereby appoi
*	in and in any manter to receive and receipt for from the State of Georgia by reason of the inj the Confederate States (or of this State), as stand, and attorney to receipt in my name for an for any sum of money which may be coming to INN IN TIMES WHEREOF, I had	my true and lave whatever amount of mone ury received as aforesaid in ated in the foregoing affidate. Warrant that may be issued to the received as a foresaid in the foregoing affidate.	the military service wit; hereby authorizing and by the Governor, aid.
	dividual he represents highelpto be, and that h	e resides an this County.	hand and seal, th
	said affidavit are true, and that he is disabled, to		and the state of
	Executed in the presence of us:	the extent he Garais, and	T know he is the is
	applicant in the iletter dive affidavitatind am well	satisfied that the stateme	ts made by him in h
	do coulfy that I am well acquainted with		
			hours of such Could
		CTION.	
	Send money to me as follows, by		
	STATE OF GLOKOLA, 7 to	and the same of th	Р. С
	finepully confine from the world or queen. County,	Georgia.	
	Note - State fully manage of second or character of discovery	Alich vassas is the distribute, mut salva-	Agriculture extent of it.
		Contract to the second	
anne hager	day of		
	Swarn to and subscribed beare me, it Rith	54 11 1 2	5 12 11- 14
	8 (3)	300	
2	the year ending October 26, 153. I have hear	topi gleen allowed a pen	
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	II on the	A Clarket H H	1 110, 1111
	such military service at the battle of		in the star
	Volunteers Volunteers		hat walke engaged in
	States, and served as a	in Company	of th Reginica
	rederate States (or of the State of		the war between the
	day of 18-7 : that	he enlisted in the indicar,	service of the Con
	resident of said State, and has resided therein co	entingually ever since the	
	County, State of Georgia, who, being duly swor resident of said State, and has resided therein co		. bona fide citizen an

POWER OF ATTORNEY.

For Applicants Heretofore Allowed Pensions.
STATE OF GEORGIA,
. Ne Ralf County.
Personally appears County. Personally appears County, State of Georgia, who, being duly sworn, says
of Market 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 theday of18 44; that he enlisted
in the military service of the Confederate States (or of the State of Lenz gid
during the war between the States, and served as a Private in Company E, of 36 th Regiment of Leargia Volunteers Gumming's
of 34 th Regiment of Lecratia Volunteers - Gamming's
Brigade; that whilst engaged in such military service at the battle of Moss of levech
in the State of action, on the day of
Colors 1862, he was wounded as follows: Shed with
and the tall in left light
en ing it is no me jungers.
Control and the Control of the Contr
Management of the control of the con
Commence of the commence of th
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
Dollars for Tools 11 4 his sees
Sworn to and subscribed before me this the
2 day of Rits el 1892.
- 1002Mag Add Co, 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
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, 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
lay of1892.
Executed in the presence of us:
Executed in the presence of us.
DIRECTION.
Send money to me as follows, by
P. O.
County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF					
- Le Call	The V	10	11	9.7	1 10
	pears			1/2/0	
County, State of Geresident of said State	orgia, who, being	d therein conti-	ays on oath th	at he is a bond	fide citizen and
day of	e, and has reside	844 that he	enlisted in the	ce the	A A
federate States (or o		Da	cimpeer in the	during the	war between the
States, and served a	1)	ale	in Comps	inv F of	th Regiment
of Sa		rs Cum	wing's B	rigade : that v	hilst engaged in
such military service					in the State
of Terror	, on the		day of		186.2, he was
wounded as follows:	Shin	with a	allin	mie l	ace
The The	les	hand	anis	ing I	the loss
If all	fores.	af The	1222	cal	1 1 1 1 1 1 1 1 1
m	1 3 5		A 10 3	4-7	<u> </u>
W.					
U.	144 8	S 7 4			
W	= =	4	1.		
the acts amendatory	thereof, and ma	kes application	for the allowa	nce to which	r 24th, 1887, and he is entitled for
the year ending Oct					
Sworn to and s	bscribed before	me, this, the		02:	1961
11/	v of Mara	12 5.	mul.	Plu	quel
Man a	1.0	A January Marie			
- Mellenty	MACC. GI	encheschenden bestellt in der Greit		1.5	
Nors-State fully natu disability, resulting from th	ire of wound or character wound or disease,	conutil' (***)	auses the disability,	and enflain partice	slarly the extent of the
STATE OF	GEORGIA	.).			1. 1. 1. 1. 1. 1. 1.
De voulfe	Time as Count	pi E			
. ///	111 0	Bolace.	rom.	0.12	
1,	. /	1.	111 19.		of said County,
do certify that I am	well acquainted	with	111.122	22666	the
applicant in the fore	going affidavit, a	nd am well sati	sfied that the s	tatements ma	de by him in his
said affidavit are tru	e, and that he is	disabled, to the	extent he claim	s, and I kno	w he is the in-
dividual he represen	ts himself to be,	and that he resi	des in this Co	inty.	
I further certify	that WATENTO	P. I have	bereinin set	, m) N4 -	and a the this
before whom the fo	regoing affidavit	commit to me	and power of	f attorney	vas signed is a
the Coolederate St.	restor of this 5	(a't.) as stated	of said Cou	nty, and the s	aid affidavits and
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01	All to make the line of		117/16	of Mar	eli .
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A now Miles	so but the ?	Ordinary	De 1	all-	County.
STATE OF				15	1 1 1 1
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POWER OF ATTORNEY.

STATE OF GEORGIA, COUNTY. Know all Men by these Presents. That I, County, State of Georgia, do hereby appoint ... my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid. IN WITNESS WHEREOF, I have bereunto set my hand and seal, this ... [L. s.] Executed in the presence of us DIRECTIONS. Send money to me as follows, by County, Georgia. Soldier's Pension.

	County.)	* * *
KNOW ALL MEN BY T	HESE PRESENTS, That I,	
•	ong para mindon mananananananananan of.	
County, State of Georgia, do	hereby appoint.	
Of making a contract of the co	my true and lawful atte	orney in fact,
in my name for any Warrrant	ed in the foregoing affidavit; hereby authorizing my said A that may be issued by the Governor, or for any sum of a	ttorney to rece noney which n
in my name for any Warrrant be coming to me for the reason IN WITNESS WHERI day of	that may be issued by the Governor, or for any sum of a aforesaid. 2OF, I have hereunto set my hand and seal, this 1895.	ttorney to rece
in my name for any Warrrant be coming to me for the reason IN WITNESS WHERI	that may be issued by the Governor, or for any sum of a aforesaid. 2OF, I have hereunto set my hand and seal, this 1895.	noney which m
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in my name for any Warrrant be coming to me for the reason IN WITNESS WHERI day of	that may be issued by the Governor, or for any sum of a aforesaid. 20F, J have hereunto set my hand and seal, this 1895. of us DIRECTIONS.	noney which m

SOLDIER'S PENSIO

for Applicants heretolore allowed reusions.
STATE OF GEORGIA.)
De Kall County.
PERSONALLY appears AM Pinenell of De Nath
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
and resident of said State, and has resided therein continuously ever since the
day of 1844; that he enlisted in the military service of the Con-
federate States (or of the State of La) during the war between the
States, and served as a Private in Company 7, of 36 th Regiment
of La Volunteers Gumning's Brigade; that whilst engaged in such military service at the battle of Mark Greek in the State
such military service at the battle of Mada work and the State
of Jeune on the day of Oct 1863, he was wounded as follows: Shot in left haced causing
lost of four fingers
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
Owenty dollars, for the year 1898.
Sworn to and subscribed before me, this, the W. Mr. Pinnele
3 od day of March 1894.
Ambandale Ordinasy,
Note-State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent
of the disability, resulting from the wound or disease.
STATE OF GEORGIA, County.
De Nell County.
1, Ordinary of said County, do certify that I am well acquainted with MMP in excell the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County. Given under my official signature and seal, this
7
day of March 1894.
Ans Mary Magsobale.
0 20

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
De half- County.
Lettade County.)
personally appears M.M. Linnell of De Math
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
and resident of said State, and has resided therein continuously ever since the
day of 1844; that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served as a Orival in Company F, of 36 th Regiment
of La Volunteers, Community 's Brigade; that whilst engaged in
such military service at the battle of Mosz Creek in the State
of Lenn pon the day of Olt 1863, he was
wounded as follows: Shor with a min nice ball throng
. the left hand causing loss of all
four of the progers
De Carlos Contractor Contractor
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 Cheenty dollars, for the year 1894
Sworn to and subscribed before me, this, the 11 11 11 Pigneral
Norz-State fully the nature of wound or character of dissess which causes the disability, and explain particularly the extent
of the disability, resulting from the wound or disease.
STATE OF GEORGIA,
Detall, County.
I, M. Ragseldle, Ordinary of said County,
do certify that I am well acquainted with MM Pine mell the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this
day of March, 1895.
CATE All A
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0 11 7
Ordinary N. C. County

POWED OF ATTORNEY

		COF ALL	JKNE I.	
STATE OF GE		` }		
Ι,	County,	hereby au	thorize	
to receive and rec	eipt for the pe	ension paid hereon	9	hat he remit same to
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	S WHEREOF,	I have hereunto set	w hand and	scal. this
day of		1896,		
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POWER OF ATTORNEY.

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ACT OF 24 OCT., 1867.	20	A	50	0	22/4	2	0 .	5	8°.	HAN	X	NATE !
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For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Redall County.
personally appears Il Me Princell of De Call
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 1840; that he enlisted in the military service of the Con-
federate States (or of the State of Ja) during the war between the
States, and served as a Private in Company F, of th Regiment of Volunteers, Leurnmery's Brigade; that whilst engaged
in such military service in the State of Jew, on the day
of (CC) 1863, he was wounded, injured or diseased as follows:
- It the battle of moss brock the un was
alion with a minnie base through the
left hand couring loss of the four
fingers
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
Le fall county been allowed a pension of Iwenty
dollars, for the year 189 3.
Sworn to and subscribed before me, this, the
26th day of the 1896.
My aged ace Ordinary,
May of Color 1896.) May a god acc Ordinary. Nore-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 Kall County.
I, MM-Ragnelace, 1 Ordinary of said County,
do certify that I am well acquainted with The finnelly the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this 25 7h
day of
day of_ Med
no and and
Anx Jour M. M. Ragadace

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	
Do Lach County.	2
Dersonally appears Il Pinnell	8.11.16
County, State of Georgia, who being duly sworn, say and resident of said State, and has resided therein co	s on oath that he is a bona fide citizen
day of 1814; that he enliste	of in the military of the
federate States (or of the State of	during the military service of the Con-
federate States (or of the State of States, and served as a Private in	n Company of 36 th Design
of La Volunteers, Canagare	's Brigade: that whilst angered
in such military service in the State of Meil	on the
of Cer 1863, he was wounded, inj	ured or diseased of follows:
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of ace the fingers fill	
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and the acts amendatory thereof, and makes applied entitled for the year ending October 26th, 1897. I resident of Communication Dollars, for the year Sworn to and subscribed before me, this, the 1897. Fee	have heretofore under said law as a ty been allowed an invalid pension of ear 1896. Child Jan, well out of our office.
Note-State fully the nature of wound or character of disease which cause of the disability, resulting from the wound or disease.	
	ye disamity, and explain particularly the extent
STATE OF GEORGIA,	
Detack County.	
1, MM Regidea,	
1, I M agreed, for	Ordinary of said County,
lo certify that I am well acquainted with	the
applicant in the foregoing affidavit, and am well satisfi	ied that the statements made by him
n his said affidavit are true, and I know he is the in and that he resides in this County.	dividual he represents himself to be
	137
Given under my official signatur	
day of	1897.
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Ordinary 200	Nach County.

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CFer Those Aiready Enrolled.)		DIER'S PENSION.	1899.	County De Talb	\$ 70, 4	RICHARD JOHNSON,	

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Dellath County.
personally appears M. Prince of A. Melh
personally appears//// Orway of Machine
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
and resident of said State, and has resided therein continuously ever since the
day of 1844; that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served as a Chille in Company F, of th Regiment
of Volunteers, Curry 's Brigade; that whilst engaged
in such military service in the State of Letter, on the day
of CC., 1864, he was wounded, injured or diseased as follows:
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henn in the lift hand causing
-with of - wilthe gingers
And the second s
entitled for the year anding October 26th, 1898. I have heretofore under said law as a resident of county been allowed an invalid pension of Dollars, for the year 189 7.
Sworn to and subscribed before me, this, the 110 de Pin nell
The state of the s
13011 day of 1.2 1898. POST-OFFICE
111111 instain 105 di vara.
Nork-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,
0 . 1
12
I, Inthe Regarder, Ordinary of said Country
do certify that I am well acquainted with Ill Jinnel the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know 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 Hick 1898.
(m) (12226) 0
your \ Magsdale.
Ordinary Belack County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Le Kall County.
Dersonally appears M.M. Pinnell of Achalh
County, State of Georgia, who being duly sworn, says on oath that he is a bond fide citizen
and resident of said State, and has resided therein continuously ever since the
day of 18/4; that he enlisted in the military service of the Con
federate States (or of the State of January the war hat war had been a large w
States and served as a Orivace in Company F, of 36 th Regiment
Ol Ca Volunteers Commenced la Dain 1 11 111
in such military service in the State of Vern, on the day
of 1864, he was wounded, injured or diseased as follows:
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of a frequence
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Deponent makes analysis ()
Deponent makes application for the pension to which he is entitled for the year end-
ing October 26th 1899. I have heretofore under said law as a resident of
County been allowed an invalid pension of Dollars, for the year 189 8
County been allowed an invalid pension of Dollars, for the year 189 8
County been allowed an invalid pension of Dollars, for the year 189 8. Sworn to and subscriped before me, this, the 16 collar frames of
County been allowed an invalid pension of Dollars, for the year 189 8. Sworn to and subscribed before me, this, the 111 M. Pinnell day of the post
County been allowed an invalid pension of Dollars, for the year 189 8. Sworn to and subscribed before me, this, the 111 Manager Level 1899. Post-office Leveltus La
County been allowed an invalid pension of Dollars, for the year 189 8. Sworn to and subscribed before me, this, the 111 M. Pinnell day of the post
County been allowed an invalid pension of Dollars, for the year 189 8. Sworn to and subscribed before me, this, the 111 Manager Level 1899. Post-office Leveltus La
County been allowed an invalid pension of Dollars, for the year 189 8. Sworn to and subscribed before me, this, the day of 1899. POST OFFICE Decative to Nork-State fully the nature of wound or character of disease which cadded the disability resulting from the wound or disease. STATE OF GEORGIA,
County been allowed an invalid pension of Dollars, for the year 189 8. Sworn to and subscribed before me, this, the day of 1899. POST OFFICE Decative a Norman State fully the nature of wound or character of disease which cadded the disability resulting from the wound or disease. STATE OF GEORGIA,
County been allowed an invalid pension of Dollars, for the year 189 8. Sworn to and subscribed before me, this, the 11 11 11 11 11 11 11 11 11 11 11 11 11
County been allowed an invalid pension of Dollars, for the year 189 8. Sworn to and subscribed before me, this, the 11 11 11 11 11 11 11 11 11 11 11 11 11
County been allowed an invalid pension of Dollars, for the year 189 8. Sworn to and subscribed before me, this, the life of Dinine of Agy of Life of Life Dinine of Life of Life of Life Dinine of Life
County been allowed an invalid pension of Dollars, for the year 189 8. Sworn to and subscribed before me, this, the life of Donne Color of Lawrence of disease which cades the lisability, and explain particularly the state of the disability resulting from the wound or disease. STATE OF GEORGIA, County. County. I, County. I, County. Ordinary of said County, do certify that I am well acquainted with IIII. Pinnell the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be
County been allowed an invalid pension of Dollars, for the year 189 8. Sworn to and subscribed before me, this, the Management of the Prince of Sworn to and subscribed before me, this, the Management of the Prince of Sworn to a subscribed before me, this, the Management of the Management of Sworn to the Management of Sworn to the Management of Sworn to the Management of Sworn the wound or disease which cades the Management of State of Sworn to the Management of Sworn to and Sworn to the Management of
County been allowed an invalid pension of Dollars, for the year 189 8. Sworn to and subscribed before me, this, the life of Donne Color of Lawrence of disease which cades the lisability, and explain particularly the state of the disability resulting from the wound or disease. STATE OF GEORGIA, County. County. I, County. I, County. Ordinary of said County, do certify that I am well acquainted with IIII. Pinnell the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be
County been allowed an invalid pension of Dollars, for the year 189 8. Sworn to and subscribed before me, this, the May of Language of 1899. POST OFFICE Decation of 1899. Post office Decation of the disability resulting from the wound or disease which cades the disability, and explain particularly the state of the disability resulting from the wound or disease. STATE OF GEORGIA, County. I, May Decate of disease which cades the disability, and explain particularly the the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 Lan 1899.
County been allowed an invalid pension of Dollars, for the year 189 8. Sworn to and subscribed before me, this, the land of the Pannell of 1899. POST OFFICE Decation of 1899. Post of the Management of disease which cades the liability and explain particularly the extent of the disability resulting from the wound or disease. STATE OF GEORGIA, County. I, County. Ordinary of said County, do certify that I am well acquainted with perfect the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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.

STATE OF GEORGIA, County. I,hereby authorize of to receive and receipt for the pension paid hereon and request of at IN WITNESS WHEREOF, I have hereunto set my harday of Executed in presence of	est that he remit same to
I,	nest that he remit same to
to receive and receipt for the pension paid hereon and requests. at	nest that he remit same to
to receive and receipt for the pension paid hereon and required by the second of the pension paid hereon and required by the second of the pension paid hereon and required by the second of the pension paid hereon and required by the second of the pension paid hereon and required by the second of the pension paid hereon and required by the second of the pension paid hereon and required by the second of the pension paid hereon and required by the second of the pension paid hereon and required by the second of the pension paid hereon and required by the second of the pension paid hereon and required by the second of the second	est that he remit same to
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IN WITNESS WHEREOF, I have hereunto set my has day of1900.	nd and seal, this
day of1900.	nd and seal, this
Executed in presence of	
Executed in presence of	[L. s.]
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	OHN W. LINDSEY, Commissioner of WARRANT HANDED TO H. HARTRON, Blues Frinter, Atlanta
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Name W.M. Pinnell County De Kalb Disability Hand

1901.

SOLDIER'S PENSIO (For Those Aiready Enrolled. No. 1954 DISABLED Pinnell W.M.

WARRANT HANDED TO

JOHN W. LINDSEY.

Amount, \$ 20.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
he talk County.
- And the state of
personally appears the Chickett of De Kalle
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 1844; that he enlisted in the military service of
the Confederate States (or of the State of) during the war between the States, and served as a in Company f, of 36 th
Regiment of Volunteers, Curring 's Brigade; that whilst engaged in such military service in the State of Jerry, on the
day of CC/ 1864, he was wounded, injured or diseased as follows:
The was wounded, inflicted of diseased as follows.
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County been allowed an invalid pension of Dollars, for the year 1897. Sworn to and subscribed before me, this, the day of 1900. POST OFFICE Noge. State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.
STATE OF GEORGIA,
County.
I, 11 M. May of acc. Ordinary of said County, do certify that I am well acquainted with Will Out 1400 the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.
Given under my official signature and seal, this
Ann day of 1900.
lore.
Ordinary De Halle County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
De Kall County.
Personally appears W. M. Pinnelf of De Kalh
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
lay of 1844; that he enlisted in the military service of the Con-
ederate States (or of the State of July) during the war between the
States, and served as a Private in Company 7, of 36 th Regiment
of Volunteers, Community's Brigade; that whilst engaged
in such military service in the State of Clenn, on the day
of 1864, he was wounded, injured or diseased as follows:
as wounded in lest hand at battle.
Allow Creek danding bers of
four fingers,
Marie Committee
October 26th, 1901. I have heretofore under said law as a resident of County been allowed an invalid pension of Dollars, for the year 1900.
Sworn to and subscribed before me, this the
12th day of line 1901. Postoffice Decatrus
Tombe (a la) !
Magsdale Ushmasy.
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,
he Kath County. Holl gim Cl
1. M.M. Rass Cace Ordinary of said County
n
do certify that I am well acquinted with M. Proveelf the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
n his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this 12th
day of 1901,
Tem Ilm Regadie
1
Ordinary W.C.Z.C.C. County.

POWER OF ATTORNEY.

STATE OF GEORGIA, hereby authorize_ to receive and receipt for the pension paid hereon and request that he remit same to IN WITNESS WHEREOF, I have hereunto set my hand and seal this day of_ Executed in presence of 4.37 DIER'S PENSI JOHN W. LINDSEY, DISABLED

POWER OF ATTORNEY

***************************************	Со	unty.					
Ι,			her	eby author	rize	•	
to receive and	receipt for the	e pendion					
	receipt for th				uest in	ат не ген	nit sam
at				J	× 11		
IN WITN	ESS WHERE	OF, I hav	e hereunto	set my ha	nd and	seal this	4
lay of		1903.					25
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Executed	in presence of			•	1		
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por activities of the control become activities and							
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		1	Ji	1 1	88		
(i)			j	1	1903.	Pensions.	
MOLLED.)	NOISI				1903.	X, uer of Pensions.	
ENROLLED.)	ENSION	*	W.M.	196"	1303.	SEY,	0 TO
DY EMPOLLED.)	PENSION	8	I.W.M.	ment 36"	1303.	INDSEY, Commissioner of Pensions.	ODED TO
CODE SECTION 1796. THOSE ALREADY EMBOLLED.) No. 337	ER'S PENSION	03.	alk 3	Regiment 26"	1/2 1908.	W. LINDSEY,	Warrant Handed to

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
De Kalh County.
/ 11
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
and resident of said State, and has resided therein continuously ever since the
day of 1844; that he enlisted in the military service of the Con-
federate States (or of the State of Ad) during the war between the
States, and served as a Crivate in Company F, of 36 th Regiment of A Volunteers, Crymning 's Brigade; that whilst engaged
of 1864, he was wounded, injured or diseased as follows:
Has wounded at Mass Cleek Ten
if an inventory more controller,
consing with floringers

We will be a second of the sec
The state of the s
* * * * * * * * * * * * * * * * * * *
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
County, been allowed an invalid pension of
Juculy Dollars, for the year 1901.
Sworn to and subscribed before me, this the 12 cle June 2
13 day of Son 1902. Post-office Acoustus
Mogsdace Ordinary,
Note.—State fully the nature of the wound or character of deease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.
STATE OF GEORGIA,
Le Kalh County.
I, MM Rogelace Ordinary of said County
do certify that I am well acquainted with MM Pinnell
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know 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 AM 1902.
(Ann)
here
Ordinary De Mall County. Nors.—Fill all blanks and of Company and Regiment.
Norg.—Fill all olants and of Company and Regiment. Norg.—All vouchers and affidavits must bear date after January 1, 1902.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF CEORGIA
STATE OF GEORGIA,
Le Malle County.
Personally appears I. M. Prince Cof Soc With
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
, that he christed in the mintary service of the Con-
federate States (or of the State of) during the war between the States and served as a Drivate in Company F, of 36 th Regiment
of da. Volunteers, Cumuning 's Brigade; that whilst engaged
in such military service in the State of Scan , on the day
of Cet 1864 he was wounded, injured or diseased as follows:
has wounded as battle I Moss Corcet Vein
in left land Couring loss of fory Lingers
and the state of t
No. of the contract of the con
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
Sie Kalh County, been allowed an invalid pension of
Dollars, for the year 1902.
Sworn to and subscribed before me, this the \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
15 day of an 1903. Post-office Secrettly 1/4,
Milloge dace, Osdinary
Note.—State fully the nature of the wound or characler of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.
STATE OF GEORGIA,
The Mall County.)
I, MIM . Augustace , Ordinary of said County,
do certify that I am well acquainted with MM / mines
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know he is the individual he represents himself to
be and that he resides in this County.
Given under my official signature and seal, this.
day of 1903,
Affix your soul soul
I here Ordinary No Valle 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.

		of		he	reby authorize
-receive and receipt for t				at he re	emit same to
(* * *					
IN WITNESS WHEREOF,		et my hand a	nd seal, this		
y of	1904		1		[L. S.]
Executed in presence of					
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FENS	. 3	18 3	4	LINDSEY.	O. Clauta.
2 5 4 5	13	2 # 3	1 1/4	JOHN W. LINDSEY, Commissioner	WARRANT HANDED TO
1 10 H		V A. P		Z	NA LE
THOSE ALREADY ENHOLLED. No. 2.50 & DISABLED . DIER'S PENSIO	0 637	egiment focul	10	3.8	H 1112

POWER OF ATTORNEY.

BIAIL	OF GEORGIA,	}		
		County.)		
	I,		hereby a	uthoriz
		of		
to receive	and receipt for t	he pension paid hereon,	, and request that he remit	same t
		by		<u> </u>
at			子的特殊符号	
In W	ITNESS WHEREOF,	I have hereunto set my	hand and seal, this.	1
day of		1905.		
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Ex	ecuted in the pro	esence of		
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ALREADY	DISABLEI IER'S PE	15	S. 30 UUU JOHN V	Prince of Prince of Participated Co.
ALREADY	DISABLEI LDIER'S PE	15	Mount, s. 2 0000	The Paintin Printing and Political Co.

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FOR APPLICANTS HERETOFORE ALLOWED DENGLONG

TOR ATTEROANTS HERETOFO	THE PRINCIPLE LEUSIANS.
STATE OF GEORGIA,	
DEHall County.	
Personally appears Will Lin	nell of DEMall
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 therei	n continuously ever since the
day of 1844; that he en	nlisted in the military service of the Con-
federate States (or of the State of States, and served as a in	during the war between the
of You Volunteers Con	n Company F, of 36th Regiment
in such military service in the State of	
// a h	younded, injured or diseased as follows:
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·	y eyer names,
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* * * * * * * * * * * * * * * * * * *	
surry	nty, been allowed an invalid pension of ollars, for the year 1903.
Sworn to and subscribed before me, this the	1 Wa es D: - 010
day of January 1904.	Post-office wallace &
Was Regerge Ordinay	
Note.—State fully the nature of the wound or character particularly the extent of the disability resulting from the wound	er of disease which causes the disability, and explain or disease.
STATE OF GEORGIA.	
DERall County	
i, Janus P Leon	C. e
	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 h to be, and that he resides in this County.	e is the individual he represents himself
Given under my official signature	and seal, this
day of January	1904.
	us R George
Seal	18 02.00
Ordinar	y County.
Nork.—Fill all blanks and of (Nork.—All vouchers and allid:	Company and Regiment.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Kullall COUNTY.
Personally appears 10.111. Personallos Dettall
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
and resident of said State, and has resided therein continuously ever since the
day of 18; that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served as ain Company J, of 36 th Regiment
of Volunteers 's Brigade; that whilst engaged
in such military service in the State of, on theday
Sasta finger Mars Cours Some 1864
the state of the s
12.00
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
County, been allowed an invalid pension of
July Dollars, for the year 1904.
Sworn to and subscribed before me, this the
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.
STATE OF GEORGIA, Well princelle
I, Jumes of Runge Ordinary of said County,
do certify that I am well acquainted with El. 117, Remiel
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know 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 // // // // // // // // // // // // //
(AMX PROPER) - Harris R. George
hare. Ordinary AM Lead County.
Norg.—Filt all blanks and of Company and Regiment!

POWER OF ATTORNEY.

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STATE OF GEO	RGIA,)		
94	Kall-COUNTY	}		
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to receive and rec	insull	by		
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	WHEREOF, I have he	reunto set my han	d and seal, this_	
day of farm	1906.	Wing	D. moll	r3
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Executed in	the presence of			
Luis	Lywry	_		
0	Ordina	in		
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13	<u> </u>	2 / 6 3	(/2.1.) W. LINDSEY. Commissioner of Pension	2 7
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CONS SECTION 1200 SSE ALREADY E No. 33.24	IER'S PE	Regiment 3	JOHN W. LINDSEY Commissioner of	RARRANT HANDED TO
One Secretary E	m so	Reg (N ₹ 2	E03
B	S S O R	14 19) H E	RAI
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FOR THOSE ALREADY ENROLLED No. 3324		Bill It	Amount,	# 1
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melle , M. M.

POWER OF ATTORNEY.

	EKALB	COUNTY.		
I,				, hereby
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to receive	and receipt for	r the pension paid	hereon, and rec	uest that he remi
	, · · · · ·	by		
at				
In Wi	TNESS WHEREO	F, I have hereunto s	set my hand and	seal this
day of		1907.	et my nand and	. sear, tills
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1250. Y EN	NEK	N 2 m	Regiment 36	JOHN W. LINDSEY, Commissioner of WARRANT HANDED TO
CODE SECTION 1250.	BI	900 M. Gen DeKALB	in the	IAN
AL B	DISAB	XIJA	Reg	N EN
	% S C S	0 % 0	3 3	JOHN
Cop				10 14
CODE SECTION 1250. (FOR THOSE ALREADY ENROLLED)	* 0	Name M.	Co. A Disability A Amount, &	7

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
County.)
Personally appears M. Pinnell of D. Kall
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
and resident of said State, and has resided therein continuously ever since the
day of 1844; that he enlisted in the military service of the Con-
federate States, (or of the State of) during the war between the
States, and served as drive te in Company 7, of 36 th Regiment
of Georgia Volunteers bu many's Brigade; that whilst engaged
in such military service in the State of Marthuet, on the day
of
Lost 4 fingure on left hand
1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
ending October 26th, 1906. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, for the year 1905.
Sworn to and subscribed before me, this the Why. Prinnell
with Rheore Danier Post-Office Disatur 42
Notz.—State fully the acture 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,
I, James P. B. 1995 Ordinary of said County
do cerrify that I am well acquainted with M. M. Pennell
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, this/4
day of January 1906.
France R George
Ordinary De Rall County.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of	Georgia,	
DeKAL	B County.	
		iniele_of_DeKALB.
County, State of Ge	orgia, who, being duly sw	vorn, says on oath that he is a bona fide citiz
		nerein continuously ever since the
		enlisted in the military service of the Co
federate States (or o	f the State of	during the war between the
States, and served	as a Doldier	in Company F., of 36 th Regime
of Veorgia	Volunteers (1)	Brigade; that whilst engage
	vice in the State of	, on thed
of	186, he	was wounded, injured or diseased as follows
Lost of f	ingers Mos	obreek, Jonn. 1864
/	1	
		· · · · · · · · · · · · · · · · · · ·
	A Section of the Control of the Cont	
WILLA DE	Subscribed before me, this	Dollars, for the year 1906. is the M.U.J. in
Note.—State fully	the nature of the wound or challe disability resulting from the w	lacter of disease which causes the disability, and explosional or disease.
State of (Georgia,	
DeKALB.	County.	
I, Jan		
()		
		W. M. Cinnell
ne applicant in the	foregoing affidavit, and a	m well satisfied that the statements made
		ow he is the individual he represents himse
	sides in this County.	7/
	under my official signat	
day o	s Janery	1007. p
9-1	-	municatora c
your seal	6	Ordinary DallALB County.
nere		

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

Norz.—All vouchers and affidavits must bear date after January 1st, 1907

DeKall. Whall. Maimed Soldiers. Maimed Soldiers. Voucher No. 1014 Voucher No HST Amount \$ 20 Amount. \$ 20, Paid MM Pinnell Paid wom. Pinnell For Lays of Goun For Your of Jour Frigers of Seft hand. Hery Box Included in warrant No. Included in Warrant No: issued to Treasurer. issued to Treasurer. West ginnell

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

applian

WARRANT CLERK.

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

applicant

1891.

Maimed Soldiers.

Voucher No. 560

Amount \$ 20 Novemby Dark,
Paid to MM Paintell.
For Dos 4 Junger,

Othy 11 1891.

Included in warrant No.

issued to Treasurer,

applicant

WARRANT-CLERK.

No. 457	
No. 457 STATE OF GEORGIA, EXECUTIVE DEPARTMENT. & Allanta, Ga Llbry	3 1889
Mr. M. M. Pinnell	of the County
of AKalb having filed his application in	the Executive
Department for an allowance under the Act approved October 24, 1887, as am	
Dec 24, 1888, and the same having been allowed for	
He is entitled to receive the sum of Twenty + oof	4 hund
He is entitled to receive the sum of Juculy + rof	_Dollars
for such disability, the same being the allowance due to the year ending Octob	per 24, 1889.
The Treasurer will pay the same and hold his Treatpt on this voucher, and	return same to
Executive Department for warrant.	don
Control of the contro	GOVERNOR.
By the Governor	
WAMumsin	
CLERK EXECUTIVE DEPARTMENT.	
20:00	
RECEIVED OF STATE TREASURER, R. U. HARDEMAN,	
Christy 400/	Dollars,
per above voucher, this 13 of Febry	1880

W.M. Jinnell

No. 1014
Atlanta, Sa., Feby EXECUTIVE DEPARTMENT. Mr. M. M. Pinnell of the County of DeKalh 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 He is entitled to receive the sum of Woute Dollars for such disability, the same being the allowance dug the year ending October 24, 1890 The Treasurer will pay the same and hold his receipt on this voucher, and return same to Executive Department for warrant. By the Governor, WN Hamison CLERK EXECUTIVE DEPARTMENT. RECEIVED OF STATE TREASURER, R. U. HARDEMAN, Wareaty +001 Dollars, 12 of 2004 per above voucher, this

STATE OF GEORGIA,

Atlanta, Ba. Febry 11 EXECUTIVE DEPARTMENT. Mr. Depart Princell of the County 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. 13, 1889, and the same having been examined and allowed for Lous Il funger Decuty Dollars for such disability, the same being the allowance due for the year ending October 24, 1891. The Treasurer will pay the same and hald his receipt on this voucher and return same to Executive Department for warrant. By the Governor. DE IN IN COLUMN SEC'Y EXECUTIVE DEPARTMENT. RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia.

STATE OF GEORGIA,

Georgia Know all men by these De Wall bounty presents that I William M Pinnell of the Country of Wekall and State of Georgia have authorized and appointed and by virtue of these presents do authorize and affauch g. J. Wright of said County of Dekacts & Sale aforesied my attorney in fach for me and in my name to ask for and demand & receive from the Treasurer of the State of Georgia the sun of Forty dollars due me the same being an amount in money in Lieu of an artificial armunder and by Verlie of act of the General assends of seorgia, approved Seplen bur the 20th 18/9. as will appear by The application accompanying this prairie of attorney, and for me and is my name to sign she cute and deliver all necessary receipts for said seem so collected as might myself Lowferely do: hereby ratifying + Confirming all such Lawful acts as my said altoroug may do, or perform in the premises In witness whereof I have hereunds set my hand & seal august The 1880

J. B. Saword. S. M. Savkhatuck William MX Timel S NAME, Pinnell, Wm. M. YEAR 1880 COUNTY DeKalb
YEAR ADDED TO ROLL: 1880 - Application for artificial arm.
WIEN AND MERGE FORUS

EMMISTED WAR. A.T. ALEXE? Georgia

RATE. Private

CONTANY AND RUCHMETT? Co F 36th Regt. Ga. Vols.

NAME OF CAPTAIN AND COLUMEL? George V Hudson, Lieut.

While on Wounded / March from Athens to Mouse Creek, Tenn. - October 1862, wounded in hand, arm amputated below elbow.

CALTURED, WHAT AND WHIRE!?

RELEASED.

MIER AND MULL OF THE HER ED?

IF NOT PRESENT AT SURR SIDER, WHILE WHAL YOUR

DIED, WHEN AND WILLIES?

BURLED.

WITNESSES. George B Hudson, Lieut.

No data

NAME Pinnell, J.M.

YEAR 1896 COUNTY MeKalb

WHEN AND WHERE BORN? Resident since 1840.

ENLISTED WHEN ALL WHERE?

kANK. Private

COMPANY AND REGISENT? Co. , 30th. Rett. Ga. Vols.

NAME OF CAPTAIN AND COLONEL?

WCUMDED? Moss Creek, October 1863 shot through the left hand.

CAPTURED, WHEN AND JULIE?

RELEASED.

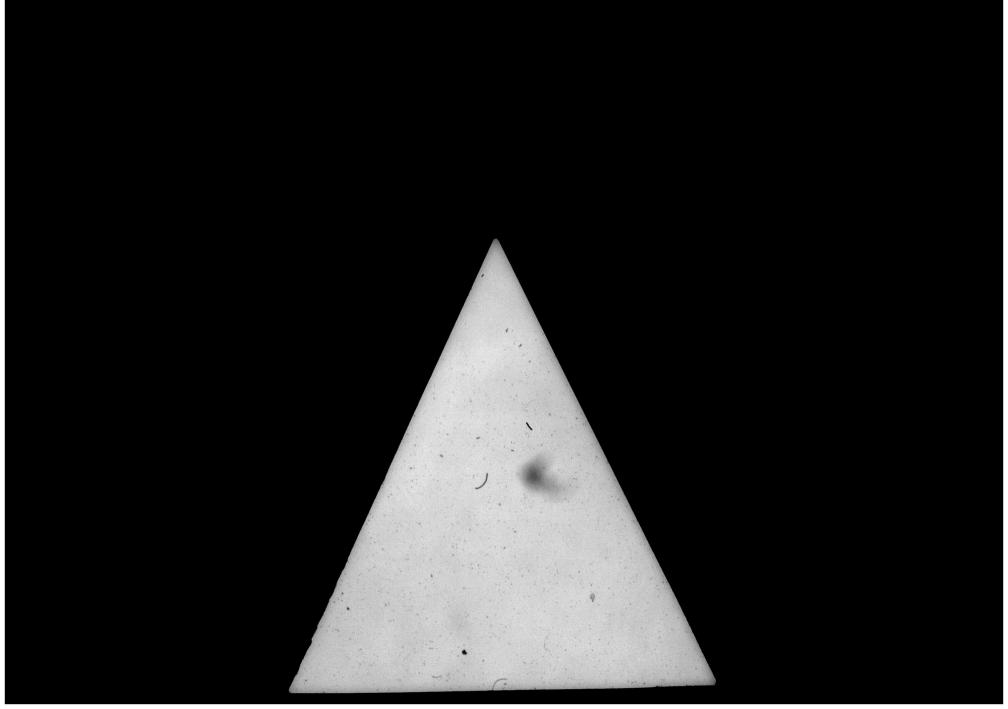
WHEN AND WHERE SURRENDERED?

IF NOT FRESUNT AT SURRENDER, WHITE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. None



Phimmer "	Wat
Plummer,	aunty
OK for 19	4
, No	

Confederate Soldier's Application.

UNDER ACT 1910.

Name W. A. Plususen

J. W. LINDSEY,

Questions for Applicants to An STATE OF GEORGIA. Dekall for the pension provided by Act of 1910, to Confederate Soldiers, and su lets his sworn statement, with his testimony to make out the same, and after being duly sworn true an wers to make to the questions propounded, answers as follows, to wit: What is your name and where do you reside? (Give County of Post-office) 2. How long and since when have you been a continuous resident of 63 years Gray 914/847 Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865?... 2 40 When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) 1 5 4 When and where, and in the actual Military Service with add Company and Regiment?

5. How long did you remain in the actual Military Service with add Company and Regiment? dier's Application (Give date of discharge). One growth of the Service?

6. When and where was your Combiny and Regiment surrendered or discharged from the Service?

May prove the Service? 7. Were you actually present with your Command when it was arrendered or discharged? ... Were 8. If you were not actually present, state specifically and clearly there you were Vinneral a. Where was your Command when you left it? did not leave Conveyed b. When did you leave the Command? Survey c. For what cause did you leave?..... war was over d. By whose authority did you leave?. e. For how long was your leave granted? In what way?..... f. Why did you not return to your Command after leave expir g. In what way were you prevented?. h. What effort did you make to return? 210. i. Were you captured during the war?... j. If so, when, and where? In what prison were you held and were you released? 9. What property of every discription was owned, in the use, procession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by items and salue) 25 cless of Land in land Lat 27 val we one cow \$40,00 one wagen \$100 Hanse Kulo Goods 113 11 10. What property of any kind have you or your wife disposed of an 1908. To whom and for what price? Moule 11. What property of any discription of any kind, and of any view now owned and in the use, possession and control of yourself and wife and its cash value. At the item ad list). 25 a creek and that 700 to the control of the control John Well of the State of South State Good of the source derived have you? Note that Mattering was a mostle on forms 13. Are you drawing a pension of any amount from this State or the United States? 14. Have you ever applied for the Georgia Persion and had it refreed? and for what cause it was Trave not not allowed?. Sworn to and subscribed before me, this the

APPLICATION FOR SOLDIER'S PENSION MINDER ACT 1910.

The state of the s	- 1006: (State it fully by items.)
STATE OF GEORGE.	
DellaVI	2. When and to whom was it sold or given to? Not Sald
County	2 What was it sold or given to?
LINE TO ILLE A MILLER LA LINE	3. What was the price paid or stated to be paid?
as a witness in support of the polication of	4. What relation is the party to applicant?
by the Act of 1910, in said e, and after being sworn true answers to make to the questions propounded,	5. What disposition was made of the proceeds of the sale?
answers as follows:	6. Was the disposition of this property
	8. Was the disposition of this property made in good faith and full values?
What is your name and where do you reside?	or was it made to obtain a pension?
A Wille Direction of the	Sworn to and subscribed before me, this the
2. How long and the when have you known. the applicant?	
46 Jun 100 1864	day of defet 1910) It former en
3. Where does he now exide and since when has he been a bonefide continuing exident in this	Julia (410 to Gordingy a)
3. Where does he now reside, and since when has he been a bonafide, continuing resident in this State and how do you know? Design to the grant of g	of Mikally E
Ne is my neighbor genow of ay my own &	County.
	ORDINARY'S CERTIFICATE.
4. When, where and in what Company and Regiment did W. Lallache enlist during	CADITARI S CERTIFICATE.
war from 1861 to 1865? (Girlate and place) Africal 1864 Strue Mountage 14	STATE OF GEORGIA.
5. How did you obt a vour information of this Service?	Mikalla .
Same Consary & Lynner Structure The Same Consary & Lynner The Same Consary & Lynner The Same The Structure The Same Consary & Lynner & L	County.
6. How long within for own personal knowledge did he perform actual military service with	translet 18 3 1 Miles
	I, January Quaid County, certify that I know
this Company and Regiment? vive date)	the applicant WP Planter for Pension is the person he represents himself to be and resides in
M, 7. When and where we his Command purrendered or discharged (give date and place)	said County. That I also know the witness swearing to the
May fine to Albany y	service and College Heavester to the last sales
Were you personally resent at the Surrender?	service and
	they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the
9. If not, where were you and how came you there?	The Boule of the statements are entitled to full facts and credit. That the
	Tax Results of WV Shows shows that he and wife
10. Was the applicant proposally present with his Command at surrender? We Was	Kalue for tax is in 1908 \$ 3.60 - 50 for 1909 \$ 480 500 1910 \$ 480 00
	Sworn under my hand and official seal of office this day of was 1910
11. If not where was he will how came him there?	famel (1 George Ordinary
3	no Beel !
12. When did he leave he ommand? Aid Med hose Where was his Command	NOTES 1. Before any questions are answered the Ordinary shall away applies and all with access in the following
when he left it? Cid Merican for what cause did he leave? Burnenden	"You do solemnly swear that you will true answers make to each insuition asked you and the evidence you
of what cause did he leave? Standard	shall give shall be the whole truth; so help you God." 2. Additional effections to extend if his head of the shall be a state
By whose authority did he leave Surveyed and how	3. All affidavits must be made before the Ordinary and certified by h
long was he granted leave? How do you know	NOTES 1. Before any questions are answered the Ordinary shall swear applicate 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 insufficie to a standard affidavits must be made before the Ordinary and certified by help the standard of the standard standard true to the standard standard true true to the standard standard true true to the standard true true true true true true true true
all that you bege stated to be true. If of your own knowledge (Tell clearly and specifically).	
"I Succession of the successio	
13. In what way was he were ted from peturning to his Command?	
How do you know? Was furnish	
14. What effort did he make to return to his Command and how do you know?	
3	
21.0	
15. Was applicant captured as a prisoner	
Sworn to and subscribed before me, this the	
sworn to and subscribed before me, this the	
1910 1910	la como de
Values 18 Courses Ordinary	
of County.	
1	
AFFIDAVIT OF TWO FREEHOLDERS.	
STATE OF GEORGIA.	
County. 0 410	
A A A A A A A A A A A A A A A A A A A	
Personally before me cones of the same who on oath	
says that they are free holders, siding in said County and we know (1)	
the applicant for pension and we mow the property that is now in the use, possession and control of himself	
Lana Val & 1000 to one will valles	
one cand to some mile values of	

O UESTICAS FOR WITNESS AS TO SERVICE

. COUNTY DORalb.

WITHEN AND WHERE BORN? Resident of Georgia since Feb. 9th, 1847 (65 years

INLISTED WEEN AND WHERE? April 1864, Stone Mountain, Georgia.

RANK

COMPANY AND REGIMENT? Company K, 2nd Georgia Reserves.

MAND CF CAPTAIN AND COLONEL?

UMDED?

WHEN AND WHERE?

ENLEASED.

WEEN AND WHERE SURRENDERED? May 1st 1865, Albany, Georgia.

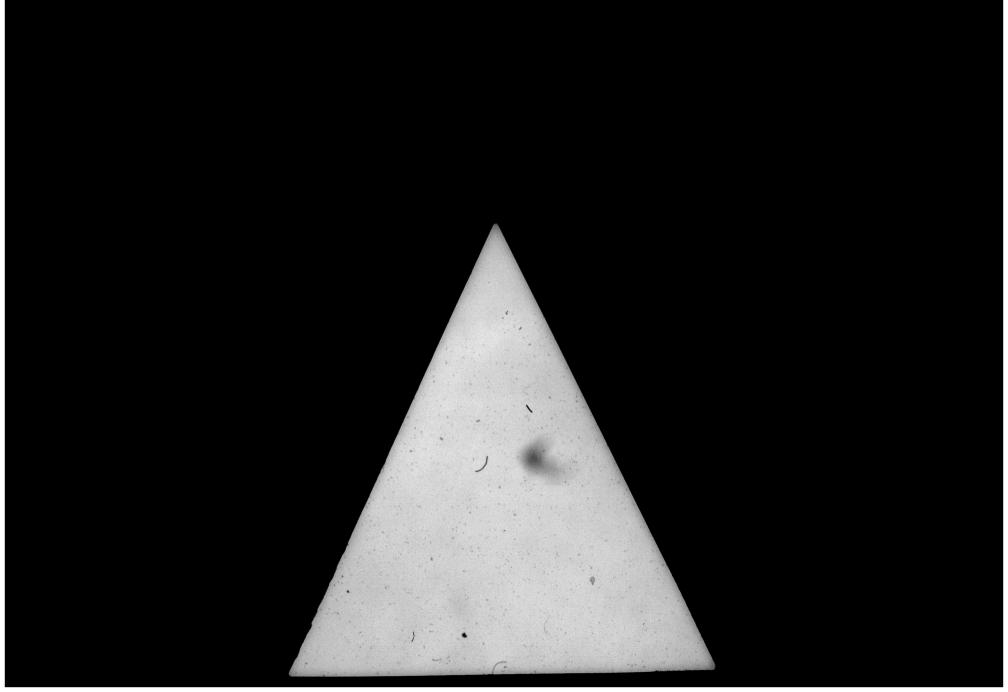
IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WI INESSES. J. A. Wells- Same command

No date



Widow's Application

STATE OF GEORGIA,

Ordinary's

Certificate

DeKalb

W.T. Plumer

elf to

1920; that I also know

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

County_DeK	alb	
Name Mrs.	W. T. P	lummer
Widow of W.	T. Plum	mer
Date of Marria	ge. Juna .	141.890.
Date of Husban	d's Death. S	apt.22 1928
Company.	Fin	~···γ)······
Regiment 2		W. Ricerns
Approved	BEC 27	1937 193
Kill	es. I	Man
		Director.

State Dept' Public Welfare, Atlanta, Nev, 19, 1937.

Wm. T. Plummer enlisted as a private in Co. K, 2d Regt. Ga. Reserves July 7, 1864. Roll for Feb. 1865, last on file, shows him present.

Director Confederate Records

INSTRUCTIONS

(SEAL OF ORDINARY

If not,

AUG 11 1937

AUG 11 1937 Widow 2

Ordinary's Certificate

of DeKalb Cou	inty.
1. D. Margan, Ordi	nary.
this day of August	193.7.
	icy are
sband and/or the marriage; that both of them are now re	esidents
; that I also know See Marriage Certific	ate
be, and that she has been, continuously, a bona fide	resident
applicant for penalo	
Ordinary of said County, de	
INTY.	
) sl	, Ordinary of said County, do the applicant for pension be, and that she has been, continuously, a bona fide that I also know. See Marriage Certific band and/or the marriage; that both of them are now re the before signing the foregoing affidavits, and that the tas are entitled to full faith and credit. this 10 day of August The Marriage of Ordinary of Ordinary of Said County, do the pension of Sai

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 let, 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 erified by such Ordinary.

5. Attach certified copy of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

7. Don't use the bulky formed Marriage Certificate in vogue throughout the State. A short, simply form is easier to handle.

8. Do not take an application from any widow who is already receiving a persion.

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	ANSWE
STATE OF	GEORGIA,				

DRKALBCOUNTY.	-
Personally appears before me, Mrs. W. T. Plumer of said State and County	
and hereby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and the	
Constitutional Amendments of 1920 and 1937, and submits testimony to support the same, and, after	
being duly sworn, true answers to make to the questions propounded, answers as follow, to wit:	
SECTION I.	
What is your name, and where do you reside? (Give Post Office and County)	24
Mrs. W. T. Plummer - Tucker, Dekalb County, Georgia	
2. How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? All her life	
Give date, or year, of your birth. Harch 23, 1860 Age? 77	
3. (1) When, (2) where and (3) to whom were you married? W. T. Plummer - June 14,	100
in Grinnett County	TOR
a. Have you married since the death of first and soldier husband? ao	
b. When and where did your first husband die? Died Sept. 22, 1928 at Tucker, G	
c. Were you residing together when he died? yes	a.,
d. If not, how long had you resided apart?	
e. Are you now a widow?	(4)
f. Have you or your husband heretofore been paid a pension by the State? Husband has	-
g. If so when and for what cause were you or your husband alone to the State?	
g. If so, when and for what cause were you or your husband placed on the roll? Service in Gon SECTION II.	red
Answer the following questions if your husband was not a pensioner:	
When where and in what Community and a pensioner:	
1. When, where and in what Company and Regiment did your husband enlist as a soldier in	
Confederate Army or Georgia Militia. (Give name of Colonel and Captain.) State whether Infan	
try, Cavalry, Artillery, Reserves, State Guards, State Militia or State Troops.	
The second secon	
The same of the sa	
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?	
m what proof was he held and when was he released?	
1	
Sworn to and subscribed before me, this the	
22 day of July 193.7. Mw. W. T. X Vlummer	
(SEAL OF ORDINARY)	

and, for approved to under is in your hands giving you authority to do so, when the money of the state of the

Approved, and ordered paid,

Selling Senders Develor.

State Department of Participation.

DEPARTMENT OF CONFEDERATE PENSIONS AND RECORDS. STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLAITA.

Honorable V. S. Morgan, Ordinary, DeKalb County, Decatur, Georgia.

WHEREAS:

MRS. W. T. PLUMMER, WIDOW OF W. T. PLUMMER,

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 corvice as a Confederate solder and was honorably securated from such service; and that applicant was married to said soldier prior to Jamuary Int. 1920, and that she was not remarried; it is, therefore,

ORDERED:

That said applicant be admitted to the pension roll of the State of Georgia for the nenth of January . 1938 and thereafter; and that a copy of this order be sent to the Ordinary of said County.

This, the 27th day of December 1937.

Director, Confederate Division
State Department of Public
Wolfare

Court of Ordinary

FULTON COUNTY STATE OF GEORGIA

CURTIFIED COPY OF MARRIAGE LICENSE

AND

CERTIFICATE OF MARRIAGE

MR. WILLIAM T. PLUMMER AND

MISS MARTHA E. ROGERS

Recorded in Book G

Ordinary.

See Items1122s and33;

Application for

GEORGIA. DeKalb County:

Payment of Expenses of Last Illness and Funeral

(Under Act of 1919) (To be disbursed by the Ordinary)

Before me, the Ordinary of said County,	comes C. A. Plummer
, 0	f said County, who, after being duly sworn, on oath says
that he knew Mrs. W. T. Flumme	
erate pensioner, and that said person is the	identical person named and described in the attached cer-
tified copy of burial certificate; and that/said	penéigher ZEETXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
BURNEX XIBY XVAX X HOL HOLD RESERVE ROCK ROCK ROCK	еквек жи филек <u>ий коек хоо</u> й хубилем и менану касновных хох хос
/such \$1 \$ -1-1-1-1-1/as/sphowth/by	stoph statements FULLY SAN / COMPRESENT/ PURM
AZZDA/ANNAKA/ANNAHA	
Sworn to and subscribed before me, this the 13 day of January 198.54	I cae luminer
V. A. Margan, Ordinary.	
CERTIFICATE	OF THE ORDINARY
GEORGIA, De Kalb	County.
I certify that C. A. Pl	ummer who subscribed
to the foregoing affidavit is known to me to b	e a person whose statement is entitled to full faith and
	. W. T. Plummer the deceased
pensioner referred to in the foregoing affidavi enrolled as a pensioner on the records of file in is the identical person named and described in	t and that said deceased was at the time of death regularly my office. I further certify that said deceased pensioner a the attached certified copy of burial certificate, was not whigh carfolded the per vive was speak at heat librers and
Given under my hand and seal of office,	this the 13 day of January 198 44
(Seal of Ordinary)	V. A. Margan, Ordinary.
in	STRUCTIONS
/ fift/ figh/account must be sworn to before the	think think in his bish bit was a successive the bish this think is before
	AND AND PARTY OF THE PROPERTY
XXSIGX XXIG (SSIGNIC ROLL AND ADDRESS OF THE ADDRES	CHECOME Se Sent/19/the Confederate Division State Dehavished
Sth. Return this application, motors should be paid out using the same and copy of death cert with a policy of death cert with the sake of this big the same and copy of death cert with the sake of this big the same and copy of death cert with the sake of this big the same and copy of death cert with the sake of this big the same and the same and the sake of this big the same and the sake of the same and th	however the sent to the Confederate Division State Department. The returned to the Confederate Division State Department. The Confederate Division State Department of Capitol, Atlanta unk, when folded, is filled out.
	to you with the funds with which to gay the approved bills. When

Court of Ordinary

FULTON COUNTY

STATE OF GEORGIA

CLETIFIED COPY OF

MARRIAGE LICENSE

AND

CERTIFICATE OF MARRIAGE

OI

MR. WILLIAM T. PLUMMER

AND

MISS MARTHA E. ROGERS

Recorded in Book G Page 189

THOS. H. JEFFRIES

Ordinary.

See Items1122sand33; Sees

Application for

Payment of Expenses of Last Illness and Funeral

(Under Act of 1919) (To be disbursed by the Ordinary)

-	
-	Before me, the Ordinary of said County, comes C. A. Plummer
	of said County, who, after being duly sworn, on oath say
t	nat he knew Mrs. W. T. Flummer late of said County, a Confed
	ate pensioner, and that said person is the identical person named and described in the attached cer
	fied copy of burial certificate; and that/sald tensioner ZEEEE COUNTRICE OF BUILDING SOURCE CONTRIBUTION OF THE COUNTRICE OF
	DNYX XIBX XVAX X HAX KARYAR BERK XXX KARY XXBER ROBER DER XIX A XXXXII ROBER XXXII A XXXII A XXXII A XXXII A XX
	wh his #-1-1-1-1-1-14 as shown by swork statements FULLY had lown fretree yrung
1983	IND Appets Actioned.
1	
.,	Sworn to and subscribed before me, is the 13 day of January 198 44
u	V. A. Margan, Ordinary.
	D.F. L. W. Arthur, Ordinary.
-	
	CERTIFICATE OF THE ORDINARY
G	EORGIA,County
	I certify that who subscribe
to	the foregoing affidavit is known to me to be a person whose statement is entitled to full faith and
	edit. I further certify that I knew Mrs. W. T. Plummer the decease
en is su	nsioner referred to in the foregoing affidavit and that said deceased was at the time of death regularly rolled as a pensioner on the records of file in my office. I further certify that said deceased pensioner the identical person named and described in the attached certified copy of burial certificate, yearnor consistent was the first that the control of the con
	Given under my hand and seal of office, this the 13 day of January 198 4
	(Seal of Ordinary) — V. A. Masaa, Ordinary
_	(Seal of Ordinary)
	INSTRUCTIONS:
A SECTION	
giv	INSTRUCTIONS: 1st. Certified copy of Burial Certificate must accompany this application. 2stl. Partally these philosophy of the philosophy of the philosophy physically physically physically and the same and the state of the same and the
giv	INSTRUCTIONS: Int. Certified copy of Burial Certificate must accompany this application. But Retailed their act and estimate at the Alphaph pand fundably population of the Alphaph pand fundably population and estimate at the analysis of the Alphaph pand fundably population of the Alphaph pand to the Alp
giv	INSTRUCTIONS: Int. Certified copy of Burial Certificate must accompany this application. April Regarder bloom childrings actions by last Almand has Physical polysists by Mark Remain Me Arice Marin and Color of the Series of the Series and Color
giv /	INSTRUCTIONS: Int. Certified copy of Burial Certificate must accompany this application. And Reduley photo childring actions of last Almem and Photophy popularly of the Children's mark arms not arms not arms and the state of the and color desire from Ordinary and by the Loftoying loying loying. At the store and congruent increasing the Confinence of the notion and the arms not arms not arms are also considered from the last arms are the case and congruent increasing the case and congruent increasing the case arms. And all beautiful arms are also are also as a local arms are also as a local arms.
giv / XSG)	INSTRUCTIONS: Int. Certified copy of Burial Certificate must accompany this application. And Regulary photo children's strength of last Almen's at Property paying byt want remains he being home and the enter of it and color date the property paying byt want remains he being home for the figure of the strength of th
giv / XBG/ XIX	INSTRUCTIONS: Int. Certified copy of Burial Certificate must accompany this application. First Paristy Shaw Shahning at some and large Application of the Paristy of the Shaw Shaw Shaw Shaw Shaw Shaw Shaw Shaw
X SECTION AND AND AND AND AND AND AND AND AND AN	INSTRUCTIONS: 1st. Certified copy of Burial Certificate must accompany this application. 2nd Retailed have a fine of the state of the
giv / XSG)	INSTRUCTIONS: Int. Certified copy of Burial Certificate must accompany this application. Int. Active these plantage for the plantage of the plantage plantage population. Int. Certified copy of Burial Certificate must accompany this application. Int. Certified copy of Burial Certificate must accompany this application. Int. Certified copy of Burial Certificate of the plantage population of the plantage population of the certificate of the plantage population of the certificate of the plantage population of the certificate of the plantage population of the Confederate Division State Department with Certificate of Capitol, Atlantage population and copy of death certificate. Int. Return this application, nondecomputation, properly resident of the Confederate Division State Department of the Confederate Division State

MARRIAGE LICENSE

State	of	Georgia	Fulton	County

State of GeorgiaFulton County	
Do any Minister of the Cospel, Indge of Superior Court, Instice of the Peace, or Person authorized to Bolemnixe,	other
You are hereby authorized and permitted to join in	the
nonorable state of Matrimony MR. WILLIAM T. PLUMMER	
and MISS MARTHA E. HOGERS	
According to the Rites of your Church, Provided there be no lawful cause to obstruct the according to the Constitution and Laws of this State; and for so doing this shall be your ient License.	
RETURN THIS LICENSE, WITH YOUR CERTIFICATE THEREON TO MY OFFICE FOR RECORD	
Given under my Hand and Seal this 14th day of JUNE 1890 x	<i>1</i> 5%
W. L. CALHOUN. Ordinary	L. S.
hereby certify that MR. WILLIAM T. PLUMMER	· / = / ·
and MISS MARTHA E. HOBERS	
vere joined together in the HOLY BANS OF MATRIMONY on the 15thday ofJUNE, by me.	
A, J. GOSS, M.C.	
State of Georgia, Ordinary's office	
70° 14 60° 4 B, B.	1937
I, H. T. Kemp, 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	
MR. WILLIAM T. PLUMMER	
and MISS MARTHAE. ROGERS	
as the same appears of record in this office.	
Given under my official Signature and Seal of the Court of Ordina	ry, the
day and year atoresaid.	
Clerk, Coart of Ordina	rv.

CERTIFICATE OF DEATH GEORGIA DEPARTMENT OF PUBLIC HEALTH

(a) County Do Ros Dist. No. 5'/2	(c) State US CT gla (b) County
(b) Town Tucker	City or Tucker
(If Outside City or Town Limits, Write Rural) Name of Hosp.	(If Guide Oily or Youn Limits, Write Bural)
(c) or fastitution_	(d) R.F.D. and Box Ho.
(d) Length of Stay Before Death: Hosp. or In This Community	(c) Foreign Country? (Yes) Il Yes, Mame or He) Country
3. Name Mrs. Lizzie Flummer	Il Voteren Hemo Wer Social Security Humber
PERSONAL AND STATISTICAL PARTICULARS	MEDICAL CERTIFICATION
Kamala White / \	M. Detected 1/3/44 A.B.
Il Married or Widewed 7. Give Name of Spouse W. T. Plummer	D. Dotte of 1/3/44 25. Double 10 Time (Heart Missele) 7. M. 10 (Heart
8. Age Years Months Days If less than 24 hrs	s. 24. I hereby sectly that I attended the deceased who died on the above date. I last as:
Hrs. Mis	
9. Birth Mo. Day Year Georgia	H er Hiro on Jan. 3, 1944 18
Vesqui	Primary Couse of Docth Arteriosclerosis 5 yrs
Usuai 10. Occupation	
Industry 11. or Business	(Floace Underline the Gauss to Which This South Should Se Charged)
John Redgers	Country Inflenza 3 days
12. Name 15. Birthplace Ga.	
	(Including Any Programmy Within Yhree Moddle of Boddle)
Meiden Mary Moon Rodgers 14. Name 15. Birth Place Ga.	Operation NO Dispusade : Clinical Way Autyper
	Oriente NO. Indicate Check Was Autopay Departmen NO. Population Was Autopay Departmen No. Population No. Population 1 25. If don'th was due to external violence plome marrow the following questions:
16. Own Bignature C. A. Plummer	
17. Informants P. O. Address Tucker, Ga.	(a) Accident Suiside NO Date of Construes (b) Construes
Buriol, CramotionBurial (a) Date 1/5/44	(c) Accident
P. O. Address of Pleasant Hill Cemetery	(Girly) (Greatly) (Glade)
Tucker, Ga.	(d) Industry, Public Flore NO While at
20. Burying Body A. S. Turner & Sons	(e) Moreon of NO
P.O. Address of Decatur, Ga. 1/13/44	M. Physiologia. C. L. Allgood, M.D.
Registrar's J. R. Evans	Date Money
22. Own Signature (Check Cortificate Carefully Sefere Signing)	Scottdale, Ga. 1/7/44
	an. 13, 1944

RCA 1103

104

SEAL

DeKalb

POWER OF ATTORNEY, ""

STATE OF GEORGIA.

County.

Know all Men by these Presents, That

true and land 1	ne and in my name, to receive and receipt for whatever amount of money I may be assisted	o from the State of Georgia as a widow of a Confederate Soldier, as stated in the forecoin	iffidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that ma	he issued by the Governor, or for any sum of money which may be coming to me for the reaso	•
	receipt for whatever a	dow of a Confederate	attorney to receipt in	sum of money which n	
	me, to receive and	ol Georgia as a wic	uthorizing my said a	iovernor, or for any	
	and in my nam	rom the State o	davit; hereby au	ssued by the Go	foresaid.



Pool, Francis Befall County 1891.

2710.2933

Widows' Pension

Mrs. Francis Covle

\$100.00.

Warrant Issued

1891

AND HANDED TO

POWER OF ATTORNEY. "

STATE OF GEORGIA.

County.	
O1	
County, in said State, do hereby appoint	- 9
of me and in my name, to receive and receipt for	my true and lawful attorney in fact, 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.	receipt in my name for any Warrant that may
IN WITNESS WHEREOF I have	hereunto set my hand and seal, this
day of	189
	[L. S.]
Executed in the presence of us:	[4. 3.]
DIR BOTI	
If allowed, send amount by	
ne at	and oblige,



Pension Course Issued In 189	AND HANDED TO	Warrant Issued	Medralle cours	Widows' Pension	Respect County 1891.
------------------------------	---------------	----------------	----------------	-----------------	----------------------

, Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA.
In person came before me, the undersigned Ordinary
County of De Half in and for the County of the Roll
Mrs. Thuneix Pool , who being sworn according to law, says under
oath that she is the widow of James Pool, , who was a soldier in .
the service of the Confederate States, and served as a member of Company , of the
13 th Regiment of Levrgia Volunteers; that he enlisted in said
service on or about the day of fine 186/, and was in the
Confederate Army up to Sept 1868 That while in the
Army he was on the day of 186, (See Note No. 1)
Was sent home on sick furlough
with Chronic Diasshoe in Sept
1863. He continued to grow worke
until he died of the disease as
contracted in service on The
13th day of January 1864.
- Land Control of the

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 /3 th day of 1840, and that she has resided in Georgia continuously since the 2 th day of 1822; 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 sul	bscribed before me, this, the	las her
20" day	of April 1891.	Francis X Pool
Mant	gulale.	mark
4	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.

And in case his.

And an approximate the service of the soldier in the Army and not from any other cause.

Ordinary's Certificate is the person she represents herself to be and she is 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 Ordinary, (SEAL) 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 belty you foot.'

'Additional affidavits may be attached if blank spaces are insufficient,
3. Only willows who married prior to January 1st, 181, are entitled,
4. Alt affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.

such Ordinary.

5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general

On t of 1919.	well	ull Tolor			1	SEY.	inte.
Act 1910—as Amended by Act of 1919.	10 10	1 20	3			J. W. LINDSEY.	State Printers, Atlanta
as Amen	County De Kall	Prome 11	Sec.			J.	r Co., State
finder Act 1910	18 24 M	20	egiment 31. M.	oved			Byrd Printing Co
nder	punty am	idow	geimer	pproved			Transport of the state of the s

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

Questions for Applicant

Personally before me comes INTS ENGLISHED LIMITED AND AND AND AND AND AND AND AND AND AN	STATE OF GEODEN KALL COUNTY.	2
and, after being duly aworn, 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 to the State of Georgia? 2. Hose long and since when have you been a continuing resident of the State of Georgia? 3. Wipen, where and to whom are you married? Jacy L. J.	Mars Engage Dune Pl	
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! **Superior **Supe		of said State and County,
the following questions to-wit: 1. What is your name, and where do you reside! *** 2. How long and since when have you been a continuous resident of the State of Georgia? 3. When, where and to whom agre you married? ** 3. When, where and to whom agre you married? ** 4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Geografa Militia? (State the arms and class of Service.) ** 6. What all white did the commands a shall his hald surrenter or discharge from the army? 6. Was forth husband personal present at the time of the surrenter or discharge of this command? 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? c. For how long was he granted leave of absence? c. What was his physical condition when he left his command? g. In what way was he prevented from going back to Command? g. In what way was he prevented from going back to Command? g. In what way was he prevented from going back to Command? g. In what way was he prevented from going back to Command? g. In what way was he prevented from going back to Command? g. In what way was he prevented from going back to Command? g. In what way was he prevented from going back to Command? g. In what way was he prevented from going back to Command? g. In what way was he prevented from going back to Command? g. In what way was he prevented from going back to Command? g. In what way was he prevented from going back to Command? g. In what way was he prevented from going back to Command? g. In what way was he prevented from going back to Command? g. In what way was he prevented from going back to Command? g. In what endore the cause tree cased? j. When and where did your first husband die! J. J		
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Sworn to and subscribed before me this the 15 day of October 19/3 Mars Engine + Pawell Amus Ryange Ordinary	9. Have you or your husband heretofore been paid a pension by the State?	iasi rior
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STATE OF GEORGIA,
Newton COUNTY.
Personally before me comes
being duly sworn, true wers to make to the following questions, answers as follows:
1. What is your name and where do you reside? .I.C. Flowers Covington Nawton Co.Ga
2. How long and since when have you known Mrs Eugenia Powelli applicant!
3. How long and since when has she continuously resided in this State! (Give date.) for more than 50 years
for more than 50 years 4. When and to whom was she married: G.W. Powell Jan 25. How do you know! reputation
5. How long and since when did you know G.V.Powell her
husband? \$1000 May 1864
6. When and where didG_W_Powell
the husband of applicant, dief. Lithonia Ga : Jan 11,1914
7. Were the applicant and her husband living together as husband and wife at the date of his death?
they were
8. If not, how long did they live apart before his death?
Were they divorced!
9. When, where and in what Company and Regiment didG.W.Rowellenlist?
May 19.1864: Convers Ga. Co"R" Roswell Batt.cavalry, Hannon's Brigade after formed into 31 Ga Batt Cavalry; - 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 May 19,1864 to surrender
12. When and where did his Command surrender, and was discharged?
Nay 8,1865 Augusta Ga
13. Were you personally present when it was surrendered?If not, where
were you detailed service and how came you there? by orders of kaj.
J.M.King -carrying stock that had been stolen; - and on my way back to Augusta at surrender, 14. Was the husband of applicant personally present at surrender? he was If not
where was he?When, where and for what
cause did he leave Command? (Give date.)
authority did he leave his Command?
ong was he granted leave?How do you know all this?
I was first seargant and know he was with his command the day before
the command surrendered, of my personal knowledge .
15. For what cause, if you know of your own knowledge, was he prevented from returning to his Com-
16. What effort did he make to return to his Command and how do you know this? Of your own
10. What effort did he make to return to his Command and new do you know this? Of your own

Sworn to and subscribed before me this the

1	day of	Sept 191	919
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of	Newton	<u>C</u>	County.
(SEAL)			"

knowledge or how?

Deralb Co.		
Application for Pension Due Deceased Pensioner Under Act 1904	0	M <u>***</u>
For Mas Engen a & Powell of Described County		110v
of Co. Regiment Died 12 17 Amount \$ 100, 00 (2/3.58)		Per
Approved and ordered paid:		of the
J. W. LINDSEY, Commissioner of Pensions.		s to
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Dekalb Co.

1921

ication for Pension Due eceased Pensioner

(UNDER ACT 1904)

expenses of last illness or funeral)

MBR Kinge Ordinary Dellalt County

Approved and ordered paid.

Dec 20

J. W. LINDSEY, Commissioner of Pensions.

ry: Fill out above in full and send to Pension Office for approval. Do out the money until the approved n your hands giving you authority to end back to the Pension Office with your receipted pay-rolls to be permanently filed with them. Do not keep this application in

Index Printing Co., Atlanta, Ga.

JAMES R. GEORGE ORDINARY AND PROBATE JUDGE DEKALB COUNTY E. H. MASON, CLERK

Enginea & Powell 125 Fine 4 feces 2135 tostate

Given under my hand and official seal, this_s.

NOTE.—Require those claiming accounts for expenses of last illness and for funeral expenses, to make out the account in itemized form, giving value of each item and for what. Running accounts—other than those connected with last illness before death, cannot be paid. All accounts must be made out and sworn to before the Ordinary, in the following form:

"The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the

(Under the Act of August 15, 1904)

To Be Paid to the Ordinary for Funeral Expenses and Expenses of Last Illne

31311	County.	SOD !
Personally before me, the Ordin	of said County, who, aft	er being sworn, on oath says
that he knew Mas Engen	1 1 1	ty, and that said pensioner
was on the New	Pension Roll of Nuttall	County at the
time of death, which occurred in	1.	County, in this
	day of Marine	192/ , and that
a Pension of One hunds	ed went five Doll	ars was due pensioner and
unpaid at the time of pensioner's de	eath. That he left no depend	lent children surviving, and
no estate of any value sufficient to	pay these funeral expenses, which amou	nted to the sum of \$ 2/1
per sworn statement fully and comp	pletely itemized, hereto attached.	is in the second
Sworn to and subscribed before		
11 60	1921 U. F. Pou	inte
yours of Guor	Ordinary.	
Discal	County.	
GEORGIA, TICALLY I, JAMES RELEASE that I personally know Mr	County. Ordinary	of said County, do certify
	d person is of a truthful and trustworth	
citizen of said County, and that said		
	in in	y character, entitled to full
faith and credit.	in	
faith and credit. I also knew Mar &	ngenia & Baux	while in life and that this
faith and credit. I also knew Mar Ea was the same person whose name ar Roll of Allo	yenia E Baux	while in life and that this
faith and credit. I also knew Mar Ea was the same person whose name ar Roll of Allo	yenia E Baux	while in life and that this Pension ty, and was paid a Pension
faith and credit. I also knew Mar Ea was the same passen whose name ar Roll of Suchumdated to	ppears on the Herry Dollars in	while in life and that this Pension ty, and was paid a Pension
faith and credit. I also knew Mar Easwars the same person whose name appropriate of Such August 1. I now believe said pensioner to be designed.	ppears on the New Dollars in Dollars in Idead.	while in life and that this Pension ty, and was paid a Pension
faith and credit. I also knew Mar Ea was the same person whose name ar Roll of Allo	ppears on the New Dollars in Dollars in Idead.	

The Ordinary must see to it that each hill is server by logitimate in a read of the control of the blank, after this blank has been properly completed as indicated.

I nearly to this blank after this blank and the bills, must be sent to the Pension Office for approval and no money and out until it is returned to you as your authority to make the payment.

Accept no bills for nurring the pension and their disburses the money himself and takes receipts a read out until it is returned to you as your authority to make the payment.

Accept no bills for nurring until you write the pension and their disburses the money himself and takes receipts a read out the pension of the complete of the pension of the pension office.

I confidence the pension of the pension of the pension office.

I confidence that the back of this blank, when folded, is filled out.

I confidence that the back of this blank, when folded, is filled out.

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I confidence that the back of this blank, when folded, is filled out.

I confidence that the back of this blank, when folded, is filled out.

I confidence the pension of the pension of the pension of the pension papers of each year.

Lithonia, Ga., 12/11/2/ 19 Lithonia, Ga., IN ACCOUNT WITH IN ACCOUNT WITH IN ACCOUNT WITH DR. J. A. BELL A. J. ALMAND CO. DR. J. A. BELL PROPRIETOR DEALERS IN PROPRIETOR ARA OLIVIA HOSPITAL Groceries, Hardware, Farming Implements, Lumber, Shingles, Lime, Doors ARA OLIVIA HOSPITAL Sash, Undertakers' Goods, Caskets and Coffins and Standard Residence Phone 65 Office 57 **Brands of Fertilizers** Residence Phone 65 Office 57 1200 J. Burial Robe 800 · Casket and L Heave Sewice 813 Vuch self 1200 800 8 00 Vrile 241 8 00 1 Work dell 3:600 800 Personnally appeared before me, C. J. Tucker Storal Georgia. manager for the above firm (& J. Almand do) who Country of Elexally under oathy says that the this is a true statement of the funeral expense of hirs. George Powell and that State of Georgia County of DeKalb Officer duly quellos so to it is just, due, and unpaid. Munister Cale de Signed Coucher may Beec- who after be Personally appeared before the under-sines an efficer duly authorized by law to ad-minister eath, Dr. J. A. Bell, who after being first Sworn and subscribed to before me this 17th day of Desember 1921. duly anthonizating sworn on path says that the Trace arch abeve assount is just, due, and unpate. wern to and subscribed before me, This January 1622 Severy to vece subsc N.P.& Ex off J.P. Dekalb County Ga.

M R George Powell Lithonia Ga IN ACCOUNT WITH CHAS. J. TUCKER I .00 To Medicine 2 .00 I. 00 I. 00 \$ 5. 00 Mrs G. W. Grwell 1921 State of Gay County of Dekalb) DR. THOS. W. STEWART The above is a just and trae account PHYSICIAN & SURGEON of the drug bill of Mrs Geo. W. Powell. Cha fucka 200. 8-1721 Consultation) Id It John Nate at Large C. J. TUCKER Prop Lithonia. Ga., January / 2 192 2 Lithonia, Ga. Dec 19 1921 A. J. ALMAND CO. IN ACCOUNT WITH Groceries, Hardware, Farming Implements, Lumber, Shingles, Lime, Doors Sash, Undertakers' Goods, Caskets and Coffins and Standard DR. THOS. W. STEWART PHYSICIAN & SURGEON May 12 % Costat & Revice 15000 200 (in 21 Consultation " Buriece /colu 1700 This william make The above is a gust and be of min Glo W. Powell Down and Sulscribed to lugge me this 20th and almond co J. St. St John JAK Styr for H. P. State at large

Lithonia, Ga. 1/14 /22

State of Georgia) To any Minister of the Gospel, Judge of Superior Court,

DeKalb County) or Justice of the Peace to Celebrate:

You are hereby authorized and permitted to join in the Honoraable State of Matrimony, George W. Powell and Eugenia E. Prather, according to the Rites of your Church, provided there be no lawful cause to obstruct the same, according to the Constitution and Laws of this State, and for so doing this shall be your sufficient License.

Given under my hand and seal this 25th day of Jan'y 1869.

I hereby certify that George W. Powell and Eugenia E. Prather were joined together in the Holy Bans of Matrimony on the 28th day of Jany 1869, by me.

W. R. Pendley, J. P.

Jas. L. Wilson (Ordinary) (Seal)

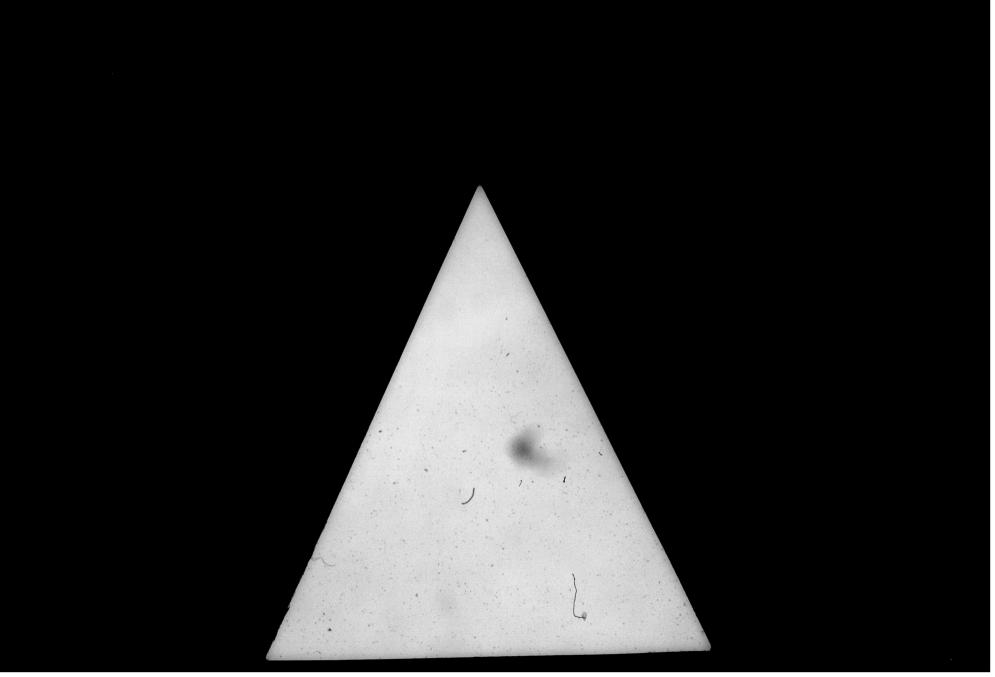
Georgia, DeKalb County.

I, James R. George, Ordinary and ex-officio Clerk of the Court of 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 George W. Powell and Eugenia E. Prather, as the same appear of record in Book "B", Record of Marriages, Page 250/

In Testimony Whereof, I have hereunto set my hand and affixed the seal of said Court of Ordinary, at Decatur, Georgia, this 15th day of October, 1919.

The seal of said Court of Ordinary & ex-oft to Clark Court Ordinary & ex-oft to Clark Court Ordinary

DeKalb County, Georgia.



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

County_ DeKalb Name Mrs. R. J. Prentiss. Sr. Widow of R. J. Prentiss, Sr. Date of Marriage October 2 1889 Date of Husband's Death 6-3 1 923 Company B- 2nd Battallion Regiment S. C. Volunteers Approved 12/29/30 193 ...

STATE DEPARTMENT OF PUBLIC WELFARE

State Dept. Public Welfare, Atlanta, Oct. 1, 1937.

The name R. J. Prentiss
has not been found on rolls
in file in this office of
Co. B, on any C. S. A. organization from the State
of South Carolina numericals
ly designated the 2d.

(Washington record.) Not a pensioner.

Confederate Records

Certificate

STATE OF GEORGIA

Prentiss,

(SEAL OF ORDINARY

INSTRUCTIONS

If not

AUG 11 1937

Widow's Application Under Act of 1910—As Amended by 1919, and Constitutional Amendm of 1920 and 1937. Widow of R. J. Prentiss, Sr my. B- 2nd Battallion AUG 11 1937 5

Ordinary's Certificate

STATE OF GEORGIA

DeKalb	COUNTY.		
I, 1 V. 3, Morgan		, Ordinary of	said County, do certify
that I know Mrs. R. J. I	rentiss, Sr.	the appli	cant for pension; that
she is the person she represents herself	to be, and that she	has been, continuously	y, a bona fide resident
citizen of said State since January 1st,	1920; that I also know	See Affiday	1ts
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 b	y me before signing	the foregoing affidav	its, and that they are
truthful and trustworthy and their state	ments are entitled to	full faith and credit.	
Given under my hand and seal of o (SEAL OF ORDINARY)	ffice this 10 de	ay of August	
		DeKelb	
· · · · · · · · · · · · · · · · · · ·	INSTRUCTIONS:	3 11 11	× ,
1. Before any questions are answered the do solemnly swear that you will true answers mutthe before you God." 2. Solemnly swear that you will true answers mutter that you will be a solemnly solemnly a support of the certified by such Ordinary. 5. Attach certified copy of marriage license 6. Fill out the back of the application care 7. Don't use the bully form of Marriage Ce 8. Do not take an application from as	blank spaces are insufficiently let, 1920, are entitled brdinary of the County in if obtainable. If not, profully.	ons saked you and the evid ent. n which the applicant or we ever marriage, by some person out the State. A short simple	itness resides and must be

OF A CONFEDERATE SOLDIER

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

OUESTIONS FOR APPLICANT TO ANSWER

STATE OF GEORGIA,
COUNTY.
Personally appears before me, Mrs. R. J. Prantisa, 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, R. J. Prentiss, Sr 556 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?. Reaided in Georgia since 1891. Give date, or year, of your birth. Jan. 28, 1866
1865 Was your husand personally present with his Command when it was surrendered or discharged? 3. Was your husand personally present with his Command Johnson's Army the night before the surrender and came to 5. 6. to act as guard to Gov. Magrath who was the first was not present, state specifically and clearly where he was?
5. When did he leave the Command? When discharged
a. For what cause did he leave? To act as guard to Gov. Magrath at Greenville, S.C.
b. By whose authority did he leave? x c. For how long was his leave of absence granted? x d. In what way? x
e. What was his physical condition when he left his Command?
Sworn to and subscribed before me, this the 22 day of July 193.7. M. D. M. Ordinary (SEAL OF ORDINARY) Secative Say Chone 440977

(Read carefully before making this affidavit.) State of Georgia, County of DeKelb Before me, the Ordinary of said County, comes Mrs. R. J. Prentice, Sr. 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. mr. R. J. Printies SV.

Sworn to and subscribed before me, this the

__ 22 ____ day of __ July _____, 193 7 ... Muy an, Ordinary, DeKelb (County.

STATE OF GEORGIA,
COUNTY.
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:
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
the state of the s
of this State? 4. When and to whom was she married? How do you know?
The state of the s
7
husband? 6. When and where did
6. When and where did
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 Com-
pany and Regiment? (Give dates.)
12. When and where was his Command surrendered or discharged? (Give date and place.)
distribution of the second sec
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 speci-
fically)
15. For what cause, if you know of your own knowledge, was he prevented from returning to his Com-
mand?
16. What effort did he make to return to his Command and how do you know this?
17. Was he captured as a prisoner?
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)

J. D. HARGROVE ORDINARY. DOOLY, COUNTY. We, the undersigned, do hereby certify that we were present at and witnessed the marriage of Miss Quinnette Clarke to R. J. Prentiss, Confederate veteran, on October 2, 1889 at the Presbyterian Church, Beech Island, Aiken County, Vienna, Ba, Jept 17 in gor South Carolina: John D. Clarke General, & & Dongon I Ording in & for print Ducy Cunty terry Combify Thus R.J. Crawling affilenson levery his Cumb before Ind & filed & Sulubed The witch reggins hyblind of S. Chafedule Soldi 3 & Dunbar ins, He is Therefore ceits ing I Was as Turme ago nishing the limbs of The stule of 199 instrust budy Subject to a Tiene for Therefor Them under my hund & Seul of office His Sept 17 1 1900 LD IVing - 1 ove State of South Carolina Coverly of aixen Dusonally appeared before me. EN alsouron asproved by James Whitley, Ordinary Irvin Co. Ja and f. J. Donbor and made ook that they was present at the maneage of miss quemette Clark to By prentise. I and approved, the Feb 114,907. & m Brown 6.M. Wise In Dym SC Ordinary, But Hickor, 24 the It the days of July 1937

Fitzgerald, Ga. March 27th, 1909

TO THE UNITED DAUGHTERS OF THE CONFEDERACY.

The undersigned, residing at Fitzgerald, Ga., Ben Hill, County, who is an ex-Confederate soldier, but not a member of any damp, hereby, at your request, presents this Certificate of Eligibility for a Souther Cross of Honor. He entered the service of the Confederate States on the 17th day of November, 1862, as a private in Company A, of the 2nd Battallion Citadel Cadets, Regiment of South Carolina Volunteers, Elliott's Brigade. He was honorably discharged from said service by Major J. P. Thomas, on the 22nd day at Newberry, S. C., 1865, at which time he held the rank of 2nd Sargeant. I left with my command Johnson's Army the night before the surrender and came to S. C. to act as guard to Gov. Magrath, who was then at Greenville, S. C.

Respectfully,

R. J. Prestiss.

We endorse the above Certificate of Eligibility.

Marcus Luke Co.E, 7th Ga.

D. B. Mull, Member Co. E, Reg't 6th Ga. Cal.CSA Fitzgerald, ,Ga., Feb. 6th, 1908.

TO THE OFFICERS AND MEMBER OF THE UNITED DAUGHTERS OF THE CONFEDERACY OF BEN HILL CHAPTER, located at Fitzgerald, County of Ben Hill, State of Georgia

Designated as Chapter Ben Hill, Georgia Division Chapter No. 1137, United Daughters of the Confederacy

I, undersigned, respectfully apply to become a member of the Ben Hill Chapter, Georgia Division, of the United Daughters of the Confederacy, and if accepted, do promise adherence to the rules and usages of the organization.

My presdent address is Mrs. R. J. Prentiss, Fitzgerald, Ga.

I am the wife of R. J. Prentiss, whose service to the Condederate cause was as follows:

Sergeant of Company B, Citadel Cadets, attached to 22nd South Carolina Volunteers. Elliott's Brigade, Hardee's Army, during the years 1863, 64 and 65.

Signed Mrs. R. J. Prentiss.

Recommended by

Marcus Luke, Co. E, 7th Georgia. R. J. Prentiss, Co. B, 22nd S. C. R.J. Prentiss and Quinette E. Clarke married October 2 99 1889 at Beech Island.

State of Ceorgia County of Richmond

Personally appeared before me, a notary public in and for the county aforesaid, Minnie L. C. Cordle, who being duly sworn, deposes and says: the above record of marriage is copied from the Family Bible "Presented to John M. Clarke by S. J. M. Clarke June 1840."

minne L. C. Cordle

Sworn to and subscribed before me this 23rd

day of July, 1937.

Notary Public, Richmond County, Ga.

State of Georgia County of Richmond

Personally appeared before me, a notary public in and for the county aforesaid, Mrs. Cootosa Gordon and Mrs. Helen Eve, who being duly sworn, depose and say that they each know that the statement above describing the date and names of the contracting parties in the marriage above described is true.

Man Cortos a Witson Gordon

Sworn to and subscribed before me this 23rd

day of July, 1937.

Notary Public, Richmond County, Ga. Georgia, Ben Hill County.

Personally appeared before me and officer, duly authorized, by law to administer oath, Mrs. F. E. Johnson, President of the Ben Hill County Chapter, United Daughters of the Confederacy, who oath deposes and says, that the attached two sheets of typewritten papers are the true and correct copies of the membership of Mrs. R. J. Prentiss, widow of R. J. Prentiss, formerly a Confederate Beteran of Ben Hill County, Georgia, whose war record was as follows:

Sergeant of Company B Citadel Cadets attached to 22nd South Carolina Volunteers, Elliott's Brigade, Hardee's Army, during the years 1863, 64 and 65,

Sworn to and Subscribed to Before me this 12th day of July, 1937.

Bu Niello La

Ones Bend Fill Co. Chapter, 1/37 it goods

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLANTA

Hon. V. S. Morgan, Ordinary, DeKalb County, Decatur, Georgia.

WHEREAS:

MRS. R. J. PRENTISS, SR., WIDOW OF R. J. PRENTISS, SR.,

has filed in this office an application for the Georgia pension allowed to vidows of Confederate veterans; and it appearing that the late husband of this applicant performed actual military service as a Confederate soldier and was honorably separated from such service; and that applicant was married to said soldier prior to January 1st, 1920, and that she was not remarried; it is, therefore,

ORDERED:

That said applicant be admitted to the pension roll of the State of Georgia for the month of January 19 38, and thereafter; and that a copy of this order be sent to the Ordinary of said County.

This, the 27th day of December 19 37.

S. This "Pat" Giocen

Director, Confederate Division State Department of Public Wolfare

Ordinan	Executed in the presence of	WITNESS my hand and seal, this 21 day of January 1	eccive and receipt for the pension allowed and request that he remit so	Od Blee St Drieg her	TE OF GEORGIA,	POWER OF ATTORNEY.
i i		A of January	and request that he remit some year	hereby au		TORNEY.

INDIGENT
SOLDIER'S PENSION

1905.

Name & County County

County & Kall

WARRANT ISSUED

1/2 3 1905.

Commissioner of Pensions.

WARRANT HANDED TO

O TO THE CONTROL OF THE PRINTER, ATLANTA.

JOHN W. LINDSEY,

nodata

POWER OF ATTORNEY.

STATE OF GE	1 1 11	OUNTY.			
O.J.	There	Pni Of.	Dies	Tur	ereby authorize
to receive and re	ceipt for the per	nsion allowe	and requ	est that he	remit same to
by	y hand and seal, t	his 2/	day of	Janus	Ly 1905.
		-	9 14 62	cice	[L. S.]
Executed in	the presence of	5			
	jadin	any			
) \			
	NO		. []	.1905.	1/2 KANTA.
ENROLL S	ENS!	33	ment Of	V. LINDSEY, Commissioner of Pensions	HANDED TO
E ALREADY E	IER'S PEL	33	Regiment	JOHN W. LINDSEY	NT HANI
CODE SECTION 19 CODE SECTION 19 NO.		The state	tt C.	JOHN	WARRA CO
3 =		H. H.	13		2

POWER OF ATTORNEY.

	OF CHARGE OF CHA	CORGIA, Course C	N Oni	eKall-	Con	
Toy_		my hand and seal, to in the presence of Angura		day of J	misony Price	
view, James 4.	Coas Secret 1354. (FOR THOSE ALREADY EMROLLED.) No. Aff	OLDIER'S PENSION 1906.	County Marie	WARRANT ISSUED	JOHN W. LINDSEY. Commissioner of Pensions. WARRANT HANDED TO	a function to beautiful to the tension to

STATE OF GEORGIA,	
Gounty.	1
12/4	
Personally appears	nice of Texall
	orn, says on oath that he is a bona fide citizen
	has resided in said State continuously ever
	18; that he is 6 8 years old and
	ne enlisted in the military service of the Con-
경기 등 경기 전 하는 것이 되었다면 하는 것이 되었다면 하는 것이 없는 것이다.	during the war between the
	in Company , of th Regiment
of Tarilla ally Bolale	that his physical condition is as
follows:	
Infirmly End	age
that his property consists of the following ite	ems:
	Dollars. I am now earning,
	Dollars per month. That by reason of his
	o support himself by his own exertion or
labor, and that he receives no pension but th	e one nerein applied for. benefits of the Act approved December 15th,
- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10	nakes application for the pension to which he
is entitled for the year 1905. I have heretofo	Ø . /. //
County been allowed a pension for the year 1	
Sworn to and subscribed before me, this	the)
26 day of January 1905	
Janua Plycorge	
y www. C. pur	Ordinary.
STATE OF GEORGIA,	
Tekall- County.	
1. Janus Ryers	Ordinary of said County,
do certify that I am well acquainted with.	
	am well satisfied that the statements made
by him in his said affidavit are true, and I ku	ow he is the individual he represents himself
to be, and that he resides in this County.	2/12
Given under my official signa	
day of Hullan	1905.
Amis C:	Tomas Titre
Nour Ordin	ary Lekall County.

Nors.—The blank spaces must be filled. Nors.—Affidavit should not be attested before January 1st, 1905.

State of Georgia, De Kalk County.
Personally appears James H Price of De Kalh
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 68 years old and
by occupation a, that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served for the term ofin Company, of th Regiment
of Buttle art batt; that his physical condition is as
follows: _ Gge & panerty
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
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
day of January 1906. Januar At Price
State of Georgia, County,
I, famee 1 Strage Ordinary of said County,
that I am went 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 farmary 1808.
And Glorge Ordinary Frach County.

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

POWER OF ATTORNEY.

	STATE OF	Jany (D)	is de	I.	COUNTY. of of atat		and re	quest		·	same to	
16		NESS my l		e of	nis	21)	da;	y of	Jan	uy	[r s.]	
reach si	COOR BACTION 1264. (FOR THOSE ALREADY ENROLLED)	No. 759		1902.	Name Jane 2 M. Brice	. O Regiment Butte	MARRANT ISSUED	/21 1907.	JOHN W. LINDSEY, Commissioner of Pensions.	WARRANT HANDED TO	OLOW WEALDON FATE PRIFTLA ATLANTA	

State of Georgia. County. Personally appears January N. Brice of DOKALB County, State of Georgia, who, being duly sworn, says on oath that he is a long 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 Conduring the war between the federate States (or of the State of States, and served for the term of of_ ; that his physical condition is as follows: that his property consists of the following items: of the value of Dollars. I am now earning by my labor,.. Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of County, been allowed a pension for the year 1906. Sworn to and subscribed before me, this the State of Georgia. County. Pances R. George Ordinary of said County, do certify that I am well acquainted with James N the applicant in the foregoing affidavit, and an well satisfied that the statements made by him in his said affidavit are true, and I know 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_

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

Orice, Julia A. De Kalf Co For Those Heretofore Paid.	
From Thewar Co. 1898 NO. 3120)
CLIDOW'S PENSION, For year ending February 15th, 1899. Mu Julia A Price	,
DeKalk County Widow of Jno B Price	
RICHARD JOHNSON, Commissioner of Pensions. WARRANT ISSUED 1899.	The state of the s
ANÓ HANDED TO	And Services

POWER OF ATTORNEY.

to receive and receipt for the pension paid hereon and request that he remit same to IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 2/

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

POWER OF ATTORNEY. State of Georgia, ellia Alsice hereby authorize MM Ragalice of Askalh to receive and receipt for the pension paid hereon and request that he remit same to IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 2/ day of_ Julia A Price [L. S.] Executed in presence of R. M. Thompson

RICHARD JOHNSON,

WARRANT ISSUED

WIDOW'S PENSION

to rec	arandalmaniaman 4	·	Secondary Control of the Control of		paid hereon		est that he	remit same to
day of	- /	NESS	WHERI	1000	ve hereunto			
	Execu	ted in p	resence (Mus G	ulia i	د ل 4	iee[L. S.]
	12	John ma	son					
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							1 1. a.	2-4-32-12-1 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
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			ION,	1900.	County,	/ Pensions.	901	3
143								
ofore Park.	0	011	SE	1 16th,	1 00	(DSEY	SSUE	D'TO D'TO
Herotofore Park.	900.	NO. 640	'S PENS	PAID TO	la B. P.	JNO. W. LINDSEY,	WARRANT ISSUE	CLAS DED TO

POWER OF ATTORNEY.

County.

STATE OF GEORGIA,

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally Comes Mrs.
County of A. Rath Juliant Price
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. 1837 That she is the Widow of who was a soldier in Company of the 532 Regiment of
Volunteers, that he enlisted in said regiment on or about the month of May 1862 and served in the Army up to 1862. That he lost his life on the 2 4th day of Luly 1862 (State here
full particulars of the husband's death, when, where and from what cause.) That fever and died near Riehmond The white 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 1807. I have been allowed a pension as a resident of Affalla County for the year ending
Sworn to and subscribed before me, this Julia of Ma 1899. Post-Office Post-Office
State of Georgia, De Cally County. Ordinary of said County, certify that I am well acquainted with Mrs. Julia of Price who made the above uffidavit and am satis-
fied that the facts thereon stated are true, and I know she is the individual she represents herself to be, and that she
Given under my official signature and seal this the 31 day of Jan 1899
Official Seal. Ordinary of DeKath County.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,	Personally Comes Mrs.
County of Ne / Call	Succa III wee
who being swown savis on o	ath, that she is a bona fide resident of said county of
	of Georgia, and that she has RESIDED in said State
· · · · · · · · · · · · · · · · · · ·	
continuously ever since Acception	1837. That she is the Widow of
	who was a soldier in Company
F of the 53 &	Regiment of
Volunteers, that he enlisted in said regiment on or about the	
186 2 and served in the Army up to	
life on the 22 day of	1862 (State here
particulars of the husband's death, when, where and from	what cause)
particulars of the husband's death, when, where and from	Ociehmond 11
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. 1	
she has never married since his death aforesaid, and that she I have been allowed a pension as a resident of	County for the year ending
February 15th, 189, and now apply for the pension pro	Y
Sworn to and subscribed before me, this	(b) Julia A Usiac
1900. }	Post Office
Milaplace Ordinary.	
	1 11/1 Canadra
State of Georgia,	
Dig Kall County.) On	linary of said County, certify that I am well acquainted
with Mrs. Sulla 9 03000	, who made the above affidavit and am satis-
fied that the facts therein stated are true, and I know she is	
has continuously resided in this State since the	2 day of 18.37
Given under my official signature and seal, this the	/8 - day of 1900.
	Maple
Official	T. M.
Ordinar	y or the County.

POWER OF ATTORNEY. STATE OF GEORGIA, Stalk County. I Mira Julia A Price hereby authorize M.M. Ragadaee of De Kalk 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 / a day of Jan 1901. Executed in presence of B.J. Burgess. J.W. William

JOHN W. LINDSEY,

WIDOW'S PENSION

No. 33 4

To Those Heretofore Paid.

1901.

and receipt	reof, I have	ve hereu_1902.	at into set 1		d seal, this	s_/5\	
ecuted in pr	resence of	_1902.	nto set 1				C. R. S
			Yu	lia	H	13, i.	C. C. S
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	ION,	902.	A.	County,	of Pensions	D 1906	
	ENS	bec. 31, 1	Sul	3.3	[NDSEY mmissioner	ISSUE //7/	or of
	S	nding D	36	200	H	RANT	AND HANDED
No.	M00	or year e	3 3	1 2 .	NHOI	WAR	AA
*		ŭ	Much	Widow	3	13	
THE REAL PROPERTY AND ADDRESS OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN C	Na. 631	WIDOW'S PENSIO	ding Pau T T DAY	WIDOW'S PENSIO For year ending Dec. 31, 1902. Thus River Solves	WIDOW'S PENSIO For year ending Dec. 31, 1902. Rule Rule Rulia Rule Con Widow of Bire (3). Niee	No. 63/ No. 63/ OW'S PENS Tyear ending Dec. 31, 19 Rece Solling Rece Solling Rece Solling Received 5.3. JOHN W. LINDSEY, Commissioner o	No. 63/ No. 63/ Tyear ending Dec. 31, 19 Rice Sallia Regiment 33 JOHN W. LINDSEY, Commissioner o. WARRANT ISSUEL

ror widows heretolore allowed reasions.

STATE OF GEORGIA. Personally Comes Mrs.
County of the Keelh Julia A. Price
State of Georgia, and that she has RESIDED in said State
State of Georgia, and that she has RESIDED in said State
continuously ever since. Luly 27" 1837 That she is the Widow of
who was a soldier in Company
E of the 53 d Regiment of La
Volunteers, that he culisted in said regiment on or about the month of
1862 and served in the Army up to July 1862. That he lost his life on the 22 day of July 1862 (State here
life on the 121 day of killy 1862 (State here
particulars of the hydrand's death when sales and from what cause)
particulars of the husband's death, when, where and from what cause) - Died of Jever near Richmond Va
med of fever near recommand of
The second secon
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 18 517,
I have been allowed a pension as a resident of Deltath County for the year ending
February 15th, 1 910, and now apply for the pension provided by law for the year ending February 15th, 1901.
Sworn to and subscribed before me, this
12 day of lan 1901. Julia A Drice
MM Replace Ordinary.) Post Office Clasheston Ga,
Tilling of the traction of the
Win Do
State of Georgia, Lettach County. Ordinary of said County, certify that I am well acquainted
Sellah County, Ordinary of said County, certify that I am well acquainted
with Mrs. Julia A. Price , 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 27 day of July 1837, Given under my official signature and seal, this the 12" day of July 1901.
Given under my official signature and seal, this the 12" day of 1901.
M.M. Regsdace
Seal. Ordinary of Se Kalh County.

for Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, PERSONALLY COMES MRS.
County of De Ball Inlia A Price
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
contiguously ever since July 22 1837. That she is the Widow of who was a soldier in Company
E 531
Volunteers, that he enlisted in said regiment on or about the month of
1862, and served in the Army up to 1862. That he lost his
life on the 22 day of July 1862 (State here particulars of the husband's death, when, where and from what cause). Too the Jever and Richmoon
To the Content of the husband's death, when, where and from what cause)
The fire to and free of ment dieumon
the state of the s
The state of the s
The state of the s
Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
soldier, and that she has never married since his death aforesaid, and that she became his wife in
the year 18 57.
I have been paid a pension as a resident of De Halk 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 pay of San 1902 Sulid et Inice
MM Wage Lale, Ordinary. Post-Office
- Marin D
State of Georgia,
See Ralk County. Ordinary of said County, certify that I am well
acquainted with Mrs. Inlia A. Psice , who made the above attidavit and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
hereself to be, and that she has continuously resided in this State since the 1221
day of July 1437
Given under my official signature and seal, this the day of my 1902.
Tonicial! MMagsdage
Seal. Ordinary of Le Rall County.
NOTE,—All blank spaces must be filled.
Voucher and affidavit must bear date after January 1st, 1902.

POWER OF ATTORNEY. STATE OF GEORGIA, STATE OF GEORGIA. COUNTY. 1. Julia a Price of Dekall County W. M. Rosslee to receive and receipt for the pension paid hereon, and request that he remit same to In Witness Whereof, I have hereunto set my hand and seal, this 10 IN WITNESS WHEREOF, I have hereunto set my hand and seal, this. Julia A Price [L.S.] 1903. Intia of Priogr. 8.] Executed in presence of James Rylorge Ordinan WA Morris 0 & george rob year Ending December 31, 1904. Thu, fulled a Brie (County, Ridow of June 19 Brie County, Ridow of June 19 Brie County, WIDOW'S PENSION WIDOW'S PENSION THOSE HERETOFORE PA JOHN W. LINDSEY, WARRANT ISSUED 1903. 1904. No. 2.78

Willows Herotofore Allowed Pensions,

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA PERSONALLY COMES MRS. County of Die Tealh Sulia A. Price
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 12 2 4 /83 7. That she is the Widow of who was a soldier in Company
L of the 53rd Regiment of
Volunteers, that he enlisted in said regiment on or about the month of
186 2, and served in the Army up to July 186 2. That he lost his
life on the 22d day of July 1862 (State here
particulars of the husband's death, when, where and from what cause.)
fever near Richmonds
<u> </u>
· · · · · · · · · · · · · · · · · · ·
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 5 7
I have been paid a pension as a resident of Die Halk County for the
year ending December 31, 1902, and now apply for the pension provided by law for the year ending
December 31, 1903.
this 1 day of 1908.
MRagsdal Ordinary.) Post-Office Ingliside la.
State of Georgia, I M. M. Raya Lace
De Roll County. Ordinary of said County, certify that I am well
acquainted with Mrs. Julia A. Wile, ,who made the above affidavit and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
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
herself to be, and that she has continuously resided in this State since the 22 day of 18 37
herself to be, and that she has continuously resided in this State since the 22
herself to be, and that she has continuously resided in this State since the 22 day of 18 37

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

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	PERSONALLY COMES MRS.
County of Ochalb	Julia G. Price
who, being sworn says on oath,	that she is a bona fide resident of said County of
1 + 50 10 10 1	of Georgia, and that she has RESIDED in said State
	2, 1837. That she is the Widow of
Jmo. B. Price	who was a soldier in Company
∅ 6 of the	53 Regiment of Gu
Volunteers, that he eniisted in said regiment on	
186 2, and served in the Army up to	July 186 2 That he lost his
	July 1862 (State
particulars of the husband's death, when, where and	
	as Richmones
5	
	eceased soldier, during his service in the Army as a
	nis death aforesaid, and that she became his wife in
the year 18 5 /	1901211
I have been paid a pension as a resident of	
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,	Julia A Price
this 19 day of Jaury 1904.	Janua Ci O Sinke
Janus Pluse Ordinary.	Post Office.
State of Georgia,	James P Story
DE Hall County.	Ordinary of said County, certify that I am well
() . 011	who made the above affidavit and
	ue, and I know she is the individual she represents
herself to be, and that she has continuously residuy of Luly 18 37	led in this State since the
	10 00
	this the 19 day of Jacry 1904.
(Official)	anus R Giorge
{ Official Real }	Ordinary of DERulb County.
NOTE.—All blank spaces must be fill Voucher and Affidavit must be	ed.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,	PERSONALLY COMES MRS.
who, being sworn says on oath, that she is	a bona fide resident of said County of d that she has resident in said State
Londinuously ever since Price	who was a soldier in Company
// 6 of the 5-3 Reg	iment of 9
Volunteers, that he enlisted in said regiment on or about the n	nonth of July
186 1, and served in the Army up to	That he lost his
life on the day of	18 (State here
particulars of the husband's death, when where and from what ca	(Pa July 22,1863,
*	
8 <u></u>	
Deponent swears that she was the wife of said deceased soldier	
soldier, and that she has never married since his death afores: the year 18 I have been paid a pension as a resident of	Wall County for the
year ending December 31, 1904, and now apply for the pensio December 31, 1905.	n provided by law for the year ending
Sworn to and subscribed before me, this 14 day of Jawy 1905.	in of Prior
Janus R. George, Ordinary. Post Of	fice
Listable County Ordinary	of said County, certify that I am well
am satisfied that the facts therein stated are true, and I know	
am satisfied that the facts trigrein stated are true, and I know herself to be, and that she has continuously resided in this Sta	
day of18	· J
Given under my official signature and seal, this the	4 day of Jany 1905.
Sofficial James	15 George
Ordinary of	County.

NOTE,-All blank spaces must be filled.

For Widows Heretofore Allowed Pensions.

County of Ka	[A]	Fulia	A Price
Se Whe, being sworn, s			resident of said County of has RESIDED in said State
continuously ever since	ly 22, 1	03	That she is the Widow of
6 of the 39 Geo	rgia	Regiment of.	was a soldier in Company
Volunteers, that he enlisted in said reg	giment on or abou	the month of	fully
186 Z, and served in the Army up	//	July	186 2 State here
particulars of the husband's death, when		phat cause.)	
Died fever	nichs	nond	Va
Commission of the Commission o	· in the major to a second		
		** ** ** ** ** ** ** ** ** ** ** ** **	
No. 1984	للأستنسا للنفوة		-
Deponent swears that she was the wife	<u> </u>	<u> </u>	
ne year 10		0 -	at she became his wife in
I have been paid a pension as		de Xa	County, for the
I have been paid a pension as year ending December 31, 1905, and no December 31, 1906.	w apply for the p	de Xa	County, for the
I have been paid a pension as year ending December 31, 1905, and no	w apply for the p	de Xa	County, for the by law for the year ending
I have been paid a pension as year ending December 31, 1905, and no December 31, 1906. Sworn to and subscribed before	ow apply for the pore me	De Ka	County, for the by law for the year ending
I have been paid a pension as year ending December 31, 1905, and not December 31, 1906. Sworn to and subscribed before the day of AMM	ow apply for the pore me	De Ka ension provided Colia A	County, for the by law for the year ending Ornac arkestonly
I have been paid a pension as year ending December 31, 1905, and no December 31, 1906. Sworn to and subscribed beform to day of the control	ore me 1906. Innary. Ord	ension provided Colia A ost Office Col I. Jan inary of said Cou	County, for the by law for the year ending Driac anticipation for the year ending anticipation for the ye
I have been paid a pension as year ending December 31, 1905, and not become at 1, 1905, and not become at 1, 1906. Sworn to and subscribed before the day of any of any or become of the second at 1, 1905, and a second at	we apply for the property of t	Se Xa ension provided Colica A set Office Col I. Jerr inary of said Cou Co., who make know she is the i	County, for the by law for the year ending Dinac
I have been paid a pension as year ending December 31, 1905, and not become at 1, 1905, and not become at 1, 1906. Sworn to and subscribed before the day of any of any or become of the second at 1, 1905, and a second at	we apply for the property of t	Se Xa ension provided Colica A set Office Col I. Jerr inary of said Cou Co., who make know she is the i	County, for the by law for the year ending Dinac Dinac Darkeston ga anty, certify that I am well the the above affidavit, and andividual she represents
pear ending December 31, 1905, and not become 31, 1906. Sworn to and subscribed before the day of August Order. State of Georgia,	unty. Ord	choice and continuous said Court of the continuous said continuous	County, for the by law for the year ending Driac Anticology anty, certify that I am well the above affidavit, and individual she represents
I have been paid a pension as year ending December 31, 1905, and not become at 1, 1905. Sworn to and subscribed before this day of day	unty. Ord	choice and continuous said Court of the continuous said continuous	County, for the by law for the year ending Driac Avtistory avtistory nty, certify that I am well the above affidavit, and individual she represents he

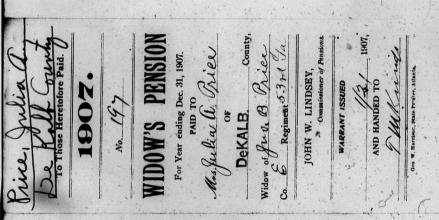
Briffin Sa 12-5-14

In it. Me, Henney Dear Lan Dear Lan Dear Lan Shat we are in Grippin at Chile Willis, and that we are as well as Common haping this May find you are jours all well Am Willis and family are at well as Common I send you power of allowing Common I send you power of allowing Collect my pendon sion and sign who the fapers for me as I cannot be up their please sec The ordinary

get is fixed up and get

POWER OF ATTORNEY.

STATE OF GEO	RGIA,)		
DeKAL	B. COUNTY			
I	A Office	ei.		
004	William	uy	0	nereby authorize
tofreogive and recei	pt for the pension pa	id hereon, and r	equest that he	remit (same to
Julia	A Price	at Elan		190
In Witness W	ereo/, I have hereunto	set my hand and	seal, this/	150
day of Janes	18			
		Jus	in A	Isia(v.s.)
7 Execute	d in presence of			
+anu	Rywige			
U Tit.	maria	,		



a check for the Money and Send to Me and I can get the money here from the bank of there Should be any little mistake in form of allowing you and the Ordinary can correct and it will be all right Write Me Soon and let the know. how and gains me foling along I am as ever your Father Jackson Kenny

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of DEKALB.	Personally comes Mrs.
who, being sworn says o	on oath, that she is a bons fide resident of said County of
DeKALB. s	itate of Georgia, and that she has RESIDED in said State
continuously ever since	That she is the Widow of
Juo B. Bri	who was a soldier in Company
6 of the 53rd Ha	Regiment of
Volounteers, that he enlisted in said regimen	t on or about the month of
86, and served in the Army up to	186 That he lost his
ife on theds	ay of
particulars of the husband's death, when, where Died fever Rich	mond Va July 22nd, 1862
I have been paid a pension as a residence rending December 31, 1908, and now ap December 31, 1907. Sworn to and subscribed before meaning to the subscribed before m	Post Office Classical Section
State of Georgia, DeKALB. County Squainted with Mrs. Julia A. U	
	true, and I know she is the individual she represents
erself to be, and that she has continuously	
y of18	
Given under my official signature and	soul, this the Lany of Juny 1907.
	James R. George
Official) Seal }	DeKALB.
	Ordinary of County.

NOTE.—All blanks must be filled.

Vouchers and Affidavits must bear date after January 1st, 190

POWER OF ATTORNEY.

Ce Kalk County				.				to rec	
DEC. 16, 1901 For 1908			, j. r.		Executed		Witness	eive and	[,
No					in presence of		hand a	receipt for	
IDOW'S PENSION,					e of		Wirness my hand and seal this	receive and receipt for the pension allowed and request that he	
1907						1	- E	n allowed a	COUNTY.
R. Wice		17.3						and reque	
ny of Dekallo					,		day of	st that he	
								ofremit same	
rant issued 190	1.						by —	ne to	
			1						•
J. W. LINDSEY,							190		hereb
Commissioner of Pensions. Geo. W. Harrison, State Printer, Atlanta, Ga:						[Seat]			hereby authorize

PUWER OF ATTORNEY.

	}	
COUNTY.	1	
I,	······································	hereby authoriz
	of	
eceive and receipt for the pension allowed	and request that he semit seems to	
at	by	
Witness my hand and seal, this	day of	190

Sung 108.	130		J. W. LINDSEY, Commissioner of Pensions. State Printy Atlanta, Ca.
Act De Ja 1904 JOS WIDOW'S PENSION,	Ma R. M. M. M. M. M. M. County of Bellet M.	9 7	J. W. LINDSEY, Commissioner of Pension Geo. W. Harrison, State Prints, Atlanta, Ga.
3418	Mrs. County of County of Warrant issued.	and handed to	86

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,	11 1 1
	Personally came Mrs. 17. Vice
COUNTY OF DISTANT	who says on oath she is the
widow of Janua Hori	et to whom, in the County of
Dekall State of	li win
an act	
day of Cloth	1856, that she remained his wife up to the 20
day of 19	0.7 , at which time he died, and that she has not since married.
At the time of his death he was a resident of	Sucalb County, in said State of
Georgia, and was on the + Judigen	V/ 'I
61,00	4 1
a pension of 8 O per annum on a	account of being a soldier in Company
Salalion Regiment,	Volunteers or State Service
What affliction have you and how does it affect	you? General brook down
agrand Infine	
	d
*	
What have you been doing to earn a support sin	nce 1st of January, 1900? Mulking
only looking a	then My hour duties
(1)	
What property or effects had you on 1st January,	1900? Milhing
- nuc property or effects had you on 1st January,	1900? Milking
What have you acquired since, and what income	
	+ 10
What have you acquired since, and what income	have you now? Writhing I have
What have you acquired since, and what income What disposition have you made of any proper	have you now? Withing I have
What have you acquired since, and what income	have you now? Vinthing I have
What have you acquired since, and what income What disposition have you made of any proper	have you now? Withing I have price and it what price and it what
What have you acquired since, and what income What disposition have you made of any proper	have you now? Withing I have price and it what price and it what
What have you acquired since, and what income No Joseph Corne What disposition have you made of any prope purpose? Last No Proper at any finite.	have you now? Withing I have orty since 1st January, 1900, and at what price and is what what the distance of
What have you acquired since, and what income No Income What disposition have you made of any prope purpose? Last No Proping at any finite. Deponent further says that she is now a resident of	have you now? Unthing I have only since 1st January, 1900, and at what price and it what what To dishare of county, and has contin-
What have you acquired since, and what income No Joseph Corne What disposition have you made of any prope purpose? Last No Proper at any finite.	have you now? Unthing I have only since 1st January, 1900, and at what price and it what what To dishare of county, and has contin-
What have you acquired since, and what income No Johnson What disposition have you made of any prope purpose? Last Mo Proper at any furies Deponent further says that she is now a resident of uously resided in the State of Georgia since the	have you now? Withing I have only since 1st January, 1900, and at what price and or what only to distract of County, and has contin-
What have you acquired since, and what income What disposition have you made of any prope purpose? Had Ho Phylica Deponent further says that she is now a resident of uously resided in the State of Georgia since the She applies for the pension provided by Act of the	have you now? Withing I have orty since 1st January, 1900, and at what price and 27 what The displace of County, and has contin- 21 day of September 18, 1901.
What have you acquired since, and what income What disposition have you made of any prope purpose? Had Ho Phylica Deponent further says that she is now a resident of uously resided in the State of Georgia since the She applies for the pension provided by Act of the	have you now? Withing I have only since 1st January, 1900, and at what price and or what only to distract of County, and has contin-
What have you acquired since, and what income What disposition have you made of any prope purpose? Had Ho Phylica Deponent further says that she is now a resident of uously resided in the State of Georgia since the She applies for the pension provided by Act of the	have you now? Withing I have orty since 1st January, 1900, and at what price and 27 what The displace of County, and has contin- 21 day of September 18, 1901.
What have you acquired since, and what income What disposition have you made of any prope purpose? Had Ho Phylica Deponent further says that she is now a resident of uously resided in the State of Georgia since the She applies for the pension provided by Act of the	have you now? Withing I have been since 1st January, 1900, and at what price and is what what the dispose of County, and has continuous day of september 18, 1901.

STATE OF GEORGIA, I. Janua Record Ordinary,
COUNTY OF THE ALL In and for said County of Dy Kulle
State of Georgia, hereby certify that I am acquainted with Mrs. R. F. France
the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to
me by reputable witnesses) that she resides in this County, and that she has resided in the State of Georgia continuously since the day of day of 1837, and has not lived out
of the State since that date. I also certify that the witnesses, to-wit: R. Duker
whose testimony she presents to sustain her claim, are known to me to be truthful witnesses, entitled to full faith
and credit as such, and that the full text of the affidavit was read to and understood by them before same was
signed. I am fully satisfied that this claim is made in good faith, and I have caused the applicant and the
witnesses to read or hear read the proofs they sign.
In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the
James Records

NOTES.

The Pension is only payable to those widows whose husbands were on Pension Roll at the time of death. The marriage must have existed at the time husband was a soldier, and the widow must have remained unmarried since the death of such husband. Date of marriage is essential and must be submitted. Proofs by one witness and two physicians will be accepted when it is shown that the same cannot be furnished, but in all cases the best proof accessible will be required, and it is incumbent on the applicant to make out a clear case covering the above points.

Affidiavits must be made in presence of the Ordinary.

SEAL

PRICE, R. H. (mys DEKALD

1929

County

Application for Pension **Due Deceased Pensioner**

(UNDER ACT 1919)
(To pay expenses of last illness and funeral)

71. D. Morran Ordinary

Date of Death June 2/ 192 9 Amount \$ /00

Approved and ordered paid

JOHN W. CLARK,

Received of V.J. morgan and Que thendred Dallaw for fund Ordinary: Cill out poole in full and sended the plank to Pension Department for approval. Do not pay on the month until the approved blank is in 70th thanks from you authority to do so. Send back to the Pension Department of the Pension of the Pe

Department with your receipted payrolls to be permanently filed with them. Do not keep this application in your office.

State of Georgia. DeKalb County.

R. H. Price, who being first duly sworn according to law, deposes and says on oath, that she was on the Pension Roll of DeKalb County, Georgia, and drew a pension of Sixty (\$60.00) Dollars for the year 1916; that in the Spring of the year 1916, she removed from the State of Georgia to the State of New York, and remained in said last named State until the tenth (10th) day of September, 1923, when she returned to the State of Georgia, and is now, and has been since the 10th day of September. permanent resident titizen with the intention of remaining permanently inda 1923, a/resident/of said State. That she is not on the Pension roll of any other State and has not drawn a pension from any other state since leaving the State of Georgia, and she makes this affidavit for the purpose of being re-instated on the the Pension Roll of said State of Georgia. & R H Frese Sworn to and subscribed before me,

In person appeared before me, the undersigned authority, Mrs.

Extmass Clark Court Ordinary Dakalb County, Georgia.

this 29th day of February, 1924.

with the intention of maning persons the

(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 Charles E. Jolly
of said County, who, after being sworn, on oatl
says that he knew Mrs. Rebecca Hill Price
was on the Pension Roll of said County at the time of death, which occurred in DeKalb
County, in this State, on the 21st day of June 1929
and that pensioner willow wildow surviving, and no estate of any value sufficient to pay these funera
expenses, which amounted to the sum of \$ 190.00, per sworn statements fully and completely
ITEMIZED hereto attached.
Sworn to and subscribed before me,
Sworn to and subscribed before me, U.D. Morgan, Ordinary DeKalb County Charles & Jolly
DeKalb() County
(Seal of Ordinary)

CERTIFICATE OF ORDINARY

GEORGIA, Count	у.
I, V. S. Morgan	
*	who is a resident
citizen of said County, and that said person is of truthful an	
faith and credit; that I also knew Mrs. Rebecca Hill	while in life and that this was
the same person whose name appears on the Pension Roll of.	De Kalb County, and
was paid a Pension of Fifty & 00/100 April 25	th 1929. (\$ 50.) Dollars
in said County for 192.9, 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 at-
tached hereto.	
Given under my hand and official seal, this	day of July , 1929. D. Maryau , Ordinary
(Seal of Ordinary)	. D. Margan, Ordinary
	DEMALL 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 for far funeral expenses, as the case ber of mists A Vrice , who died without owning sufficient property to pay this bill.

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

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

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

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

DEKala County Mrs. R. A. Preces
Application for
receistatement
on rolls for 1924 on roles for 1909

3-25-1924

be) of Mark Alvarda, who died without owning sufficient property to pay this bill.

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

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

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

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

ATLANTA, GAJune 22

192 9

M iss Stella Price

317- Pharr Road, Decatur, Ga.

To THE BARCLAY & BRANDON CO. Dr.

For-Funeral
Mrs.Rebecca Hill
Price.

Funeral Directors Ambulance Service
274-278 IVY STREET, N. E. CORNER BAKER
PHONES: WAlkut-6211-6222

	Casket 125.00-Embalming 25.00 Opening grave 16.00 -Grave lining 3.00 Hearse 12.00- Outeide burial box 10.00 Newspaper announcements		150.00 13.00 22.00 5.00
	Tota		190,00
	The above and foregoing account is ren expenses of Mrs. Rebecca Hill Price, sufficient property to pay this bill.	who died with	out ewning
2	ersonally appeared before me Chas. E. J Brandon Co. who upon being duly sworn at atement to be correct. Charles & Ja	ates that the	Barclay above
	orn to and subscribed before me this 22n		1929

	AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	5540E14577587478749	MARKET COLUMN COLUMN	#14.00 mark to 10.00 mark	ı
Prichard 1. 12					
1891		sign	the	do app	
soka !L		Given	individ I furt ore wh	certify dicant his said	CONTRACTOR STATE
The work of		thereto	ual he her cer	that I a in the affiday	11111
No. 2651		signatures thereto are genuine Given under my official si	the individual he represents himself to be I further certify that before whom the foregoing affidavits	do certify that I am well acquainted with applicant in the foregoing affilavit an in his said affidavit are true, and that he	11111
Application for Allowance		al signa	s himse	quaint affili	111
Loss 2 Offices.		tures thereto are genuine. Given under my official signature and scal, this	I further certify that before whom the foregoing affidavits were made and power of attorne	do certify that I am well acquainted with I 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	1
Applicant, De Michael	Ordinary	The state of	that h	well s	A
Amount, 10	to the second	18"	were made and power of attorney	Aciantisfied 1	* * * * * * * * * * * * * * * * * * *
Entered on record		day of	in this (or ele as a ried that the state he extent he clai	
(WHII 1894			County.	Ordina Stateme	
SECRETARY EXECUTIVE DEPARTMENT.		. 7	was	ents n	SALITATION OF THE PARTY OF THE
applie allion	Cot	13" day of Musel 1891.	was signed, is	Ordinary of said County, the statements made by him dains, and I know he is	The second second
Geo. W. Harrison, State Printer, Atlanta Ga	County.	. 168	and a	the him	Spinstern Company

STATE OF GEORGIA,

STATE OF GEORGIA,	
De the le Connity.	
I, MM Mogsdae	
do certify that I am well acquainted with	O. Bichard the
applicant in the foregoing affidavit, and am wel	
in his said affidavit are true, and that he is disable	d, to the extent he claims, and I know he is
the individual he represents himself to be, and that I further certify that	t he resides in this County.
before whom the foregoing affidavits were ma	de and power of attorney was signed, is a
	of said County, and the said affidavits and
signatures thereto are genuine.	j a catalian a ma
Given under my official signature and seal, t	nis 13" day of March 1891.
	dale,
Ordina	ry De Hall County,
County 1	

Application for Allowance Application for Allowance ra ra ra ras sore cross a, in. Application for Allowance Application for Allowance Application for Allowance Application for Allowance Amount, 10 Amount, 10 Entered on record Entered on record Warrant, 10 Entered on record Entered on record Again to the contract allower.	SOLDIER'S PENSION. SOLDIER'S PENSION. 1892. FOR THE YEAR ENDING OCTORER 26, 1892. COURTY APPLICATION Amount, \$ 188

STATE OF GEORGIA,

I, Ordinary of said county, do certify that I am well acquainted with Sichard 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 14" day of March 1892

MMR godales

Ordinary De Kill

County

W. H. HARRISON

ror applicants neretolore allowed rensions.	For Applicants Heretotore Allowed Pensions.
STATE OF GEORGIA,	De Pall County, No. 1
Ac Call County.	PERSONALLY appears 2 Litrichard,
PERSONALLY appears J.D. Prichard of De Kalk	of County, State of Georgia, who, being duly sworn, says
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and	on oath that he is a bona fide citizen and resident of Georgia, and has been such continuously
resident of said State, and has resided therein continuously ever since the	since the day of the control of the
day of 1863; that he enlisted in the military service of the Confederate States (or of the State of during the war between the	in the military service of the Confederate States (or of the State of
federate States (or of the State of States, and served as a Corfict of in Company II, of 2th Regiment	during the war between the States, and served as a Corporal in Company D.
of S. C. Cifle Volunteers lending 's Brigade; that whilst engaged	of 2d th Regiment of S. C. Volunteers Lenkins 's
in such military service at the battle of Chanciers Grassin in the State	Brigade; that whilst engaged in such military service at the battle of Grasier Glasin
of La , on the 30 day of fine 1862, he was	in the Stage of day of day of
wounded as follows: Shot in sight hand	. 1863, he was wounded as follows: Short with
which caused the loss of two	minie bull in sight hand.
first fingers.	- carring los of two fingers
·	
The state of the s	
Deponent desires to participate in the benefits of the Act, approved October 24, 1887,	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
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	the year ending October 26, 1892. I have heretofore been allowed a pension of
dollars, for	Dollars for good of devopringers.
Sworn to and subscribed before me, this, the \ James D Bichard	Sworn to and subscribed before me this the
day of March 1891.	day of March 1892.
Monthogsdae, Ordinary.	MILA o da Ce, Ordinary.
Nors. 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.	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.
POWER OF ATTORNEY.	
STATE OF GEORGIA,)	STATE OF GEORGIA,
County.	
Know all Men by these Presents, That I,	Know all Men by these Presents, That I,
ofCounty, State of Georgia, do hereby appoint	1
*	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	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
to from the State of Georgia by reason of the injury received as aforesaid in the military service	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
of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authoriz- ing my said attorney to receipt in my name for any Warrant that may be issued by the Gover-	my said attorney to receipt in my name for any Warrant that may be issued by the Governor,
nor, or for any sum of money which may be coming to me for the reason aforesaid.	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
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this	day of1892.
day of1891[L. S.]	[L. S.]
Executed in the presence of us:	Executed in the presence of us:
Manhanganing qualishing a contrary parameters and qualitative many qualitative contrary and state of the contrary of the contr	
DIRECTION.	DIRECTION.
Send money to me as follows, by	Send money to me as follows, by
County, Georgia.	County, Georgia.

For Applicants Heretofore Allowed Pensions.

County, State of Georgia, do hereby appoint Given under my official signature and seal, this mh trug and lawful attorned in fact, for my true and lawfill attorney in fact, for 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; hersby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sulfit of money which may be confing to the reason aforesaid. MILWITNESS 118WHEREOF, I have hereunto set my hand and seal, this dividual he represents highelf to be, and that he resides it this County. applicant in the foregoing adidavit, and am well salished that the statements made by hun in he Executed in the bissence of ms: said arridavit are true, and that he is also alted to the extent he claims, and I know he is the in do cortily that I am well acquainted with Ordinary of said County DIRECTION. Send money to me as follows, by STATE OF GEORGIA. County, Georgia. Note -State fully nature of wound or contract of theat, when causes the disability, and capture for research the extent of such military service at the battle of 's Brigache; that while a engaged in States, and served as a - 18; '; that he enlisted in the military service of the Co resident of said State, and has resided therein continuously ever since the County, State of Georgia, who, seing duly sworn, says on oath that he is a bona pide citizen and PERSONALLY appears STATE OF GEORGIA,

POWER OF ATTORNEY.
STATE OF GEORGIA,)

Know all Men by these Presents, That I.

STATE OF GEORGIA,)
As Latt gounty
PERSONALLY appears A Prichard of De Hall
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 1866; that he enlisted in the military service of the G
lederate States (or of the State of Australia) during the
States, and served as a States
of Volunteers (1) William 's Brigade : that whilst engaged in
such military service at the battle of the line of in the State
of day of day of 1862 he was
wounded as follows: State minuic fall
the day the day carried the
The de
to the same of the
Dansan da San
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 very ending October 26.
the year againg occoper to, 1693. I have heretolore been allowed a pension of
Sweet to and which the dollars, for good of 2 fine of
Sworn to and subscribed before me, this, the
day of 1893.)
Land Mary Male Oslivers,
NOTE—State fully nature of wound or character of disease which causes the disability, and enplain 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 Sik Prichard the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his
said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the in-
dividual he represents himself to be, and that he resides in this County.
I further certify that ANY CONTROL TO THE STATE OF THE ST
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 21 day of Borerol 1893.
MUResolate 1095
VIII 6 10 10 10 10 10 10 10 10 10 10 10 10 10
Ordinary De Mall County.
Kind on the property state of the Till
Kind on the property state of the Till

Prichard, J. D. 1891. Maimed Soldiers. Voucher No. 2651 Amount \$ Paid to Duchaux For Lax of Im Singer lanch 13, 1891. Included in warrant No. issued to Treasurer, 1891. WARRANT-CLERK.

- applicant

Audited

1891.

COMPTROLLER-GENERAL.

ENLISTED WHEN AND WHERE?

RANK. Corporal

COMFANY AND REGIMENT? Co D 2nd Regt. South Carolina Rifles Jenkins' Brigade

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WILEST

RELEASED.

WHEN AND WHIRL SUTRINDIRED?

IF NOT IRESERT AT CURRENDER, WHERE WELL YOU?

DIED, WHEN AND WALRE?

BURIED.

MITNESSES. Fraziers' Farm, Va. - June 30, 1862 - Shot in right hand, causing loss of two first fingers.

STATE OF GEORGIA, EXECUTIVE DEPARTMENT. No. 7651. Atlanta, Bal Moch 13 1091.

Mr. & D. Prich	ard of the County
of De Kalh	having filed his application in the Executive
Department for an allowance under the Act app	proved October 24, 1887, as amended by Acts
approved Dec. 24, 1888 and Nov. 11, 1889, and the	e same having been examined and allowed for
for such disability, the same being the allowance de	ie 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.	Al nonling
By the Governor, IM Harrisa	GOVERNOR. EXECUTIVE DEPARTMENT.
SECY	E. DEFANISATION
RECEIVED OF R. U. HARDEMAN, Treasurer of the	e Sand of Georgia.
Clay + sol	
per above voucher, this 13 of	Dollars,
	ach Rediands

utnam Henry M (mas)		
dunig No.	that I kno is the pers and was o the witness worthy, an Sworn u (SEAL)	STATE
Widow's Pension Under Act 1910-year Amended by Act of 1919.	that know heat. A that know heat. A that know heat. A that were duly sworn by me were duly sworn by me worthy, and their staten worthy, and their staten Sworn under my hand (SEAL) Before any que you and the staten a	₹8 I
Jounty DeKall	ember cons	GEORGIA,
Vidow Stenny M. Putnem	herself to be as the self to b	c
company A Survey	COU	rdinary
Approved	NIX With a control of the control	~ (e
(t)	the application of the property of the propert	incate
	the applicant using resident citical the applicant that they both are had the witness in the questions said the person to be so the person to be s	
	f said licant tilicant to citis to the area in asked on be some	
J. W. LINDSEY, Commissioner of Pensions. Byrd Printing Co., State Printers, Atlanta.	County, do certify for pension. She zen of said County and seid County and seid County and seid County. Ordinary, County County the vallowing words: you and the evidence you and certified by person, or by general	

9 (conay 5, 61, f (arma, 1832, De may 14, may 19, 63

10-30-1919

STATE OF GEORGIA, Ordinary of said County, do certify 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 Sovember 1908; that I also know A. C. Phillipp.

The the street of husband that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidaxits and that they both are truthful, trustworthy, and their statements are entitled to full faith and credit NOTES: 1. Before any questions are answered the Ordinary shall swer 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 An arbitraris must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
 Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation. BOARD AND AND COMMON TO THE OWNER OF THE OWNER Pension Widow's

As Amended by Act of 1919

Questions for Applicant

STATE OF GEORGIA,	\mathbf{q}
DeKalb	COUNTY. (Of Dekalb County)
Personally before me comes	Mrs. He Me. Putnamof said State and County,
	ays that she desires to apply for a pension allowed under the Act
	9, and submit testimony to make out the same, true answers makes to
the following questions to-wit:	o, and stomic resembly to make our the same, true answers makes to
	e do you reside! Mrs. H. M. Putnam, o/o Dekalb New Br
	Decatur, Ga.
	All ber life
	re you married? Feb. 10, 1880, Breaks Co., Ca.
	to U. M. Putnem
	eath of first and soldier husband?NO
	ompany and Regiment did your husband enlist as a soldier in Con-
	(State the arms and class of Service.)
May 27m 1861. Atlant	A. Ga. Co. F. 6th Ga.
	mands of your husband surrender or discharge from the army?
	Don! know
	present at the time of the surrender or discharge of this command?
	present at the time of the surrender or discharge of this command?
7. If he was not present state clea	arly where he was?_At bome in Cherokee Co., Ga
8. Where was his command when	he left! Sharpaburg, Va. Sept 17. 1862
a. For what cause did he leave h	is command?LOAS_Of_Arm
b. By whose authority did he leav	ve his command?Commanding Officers
c. For how long was he granted le	eave of absence?
e. What was his physical condition	on when he left his command? - Wounded
f. What effort did he make to ret	turn to his command?
g. In what way was he prevented	from going back to CommandWounded
	y at any time?No
	l and where held as a prisoner, and when and for what cause released?
	t husband die? Dec. 10, 1910. Acworth. Ga.
	hen he died?Xes
	ed apart?Never lived apart
	to Usa
	retofore been paid a pension by the State? Xes
	e you or your husband placed on the roll? On the disabled
Roll of Cobb County	
Sworn to and subscribed before m	ne this the \ man, 12, 312 Fulled
12 day of Septer	mber 1919
Same Pl	UNI College
- Francisco	CALL Gramary
DeKalh DeKalh	County. \
(SEAL)	

STATE OF GEORGIA COUNTY	
Personally before me comes OC Phillip who, after	
being duly every true answers to make to the following questions, answers as follows:	
1. What is your name and where to you reside & C. Philles	_
Clewith Ta work to	1
2 Alow long and since when have you known Mrs. H. M. Pallnam applicant?	
Auce 1880. 01 20 4 care	
3. How long and since when has she continuously resided in this State? (Give date.)	
1 All ther like	,
4. When and to whom was she married 1 Jek. 10 1880 1. Halletteau How do you know he source K	*
5. How long and since when did you know Am Puttuain her	
husband? Foes 211012 than 50 years.	+
6. When and where did Hill Pollicain	
the husband of applicant, diet. De &, 10-1910. Accorth Ga	
7. Were the applicant and her husband living together as husband and wife at the date of his greath?	
8. If not, how long did they live apart before his death?	
8. If not, now long did they live apart before his death? Were they divorced? \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
9. When, where and in what Company and Regiment did HM Bultuane enlist?	
9. When, where and in what Company and Regiment and 9.7.1.1.	
10. Were you a member of the same Company?	
11. How long within your personal knowledge did he perform actual military service with his Company	
and Regiment 1	
12. When and where did his Command surrender, and was discharged?	
distribution of the second sec	
13. Were you personally present when it was surrendered?	
were you and how came you there?	
14. Was the hasband of applicant personally present at surrender?If not	
where was he? When, where and for what cause did he leave Command? (Give date.) By whose	
authority did he leave his Command?	
long was he granted leave? How do you know all this?	
long was ne granted teaver.	
15. For what cause, if you know of your own knowledge, was he prevented from returning to his Com-	
mand?	
16. What effort did he make to return to his Command and how do you know this? Of your own	
knowledge or how?	
Sworn to and subscribed before me this the	
30 day of Sept 1919)	
Ocherica Ordinary)	
of M. P. Cabb Colga County.	
of 1911 County.)	

(SEAL)

STATE OF GEORGIA
COOK
Personally before me comes OC Phillips who, after
being duly sworn, true answers to make to the following questions, answers as follows:
1. What is your name and where to you reside the C. Thillip
Cleworth sa Copp Co.
2 Alow long and since when have you known Mrs. H. M. Futnam, applicant?
Since 1880- or 40 years
3. How long and since when has she continuously resided in this State! (Give date.)
1 All her like
4. When and to whom was she married 11 10 18 10 1 H Mattenant How do you know he money
5. How long and since when did you know Hm Cutuain her
husband! For Mison than 50 years.
6. When and where did HM Pathram
the husband of applicant, diet Dec 10-1910 aeworth Ga
7. Were the applicant and her husband living together as husband and wife at the date of his Seath?
· ULV
8. If not, how long did they live apart before his death?
Were they divorced! La Teo.
9. When, where and in what Company and Regiment did HM Entram enlist?
5. When, where and in what company and regiment and
10. Were you a member of the same Company ?
11. How long within your personal knowledge did he perform actual military service with his Company
and Regiment!
12. When and where did his Command surrender, and was discharged?
13. Were you personally present when it was surrendered?If not, where
were youand how came you there
·
14. Was the husband of applicant personally present at surrender?If not
where was he?When, where and for what
cause did he leave Command? (Give date.)By whose
authority did he leave his Command !And how .
long was he granted leave!How do you know all this?
15. For what cause, if you know of your own knowledge, was he prevented from returning to his Com-
mand1
16. What effort did he make to return to his Command and how do you know this? Of your own
knowledge or how f
Sworn to and subscribed before me this the
1 1 (10.10.10.10.10.10.10.10.10.10.10.10.10.1
30 day of Sept 1969
Schemes Ordinary)
of N.P. Coll Colja County.
of AMALON Country.

(SEAL)

Georgia, DeKalb County.

Personally appeared before me, the undersigned, Mrs. H. M. Putnam, who being first duly sworn, says on oath: That in an effort to find a man who was a member of Company F. 6th Georgia Regiment, she has made a diligent and exhaustive search, but that she can find no one who belonged to said organization, either the Company or Regiment. .

Sworn to and subscribed before me. This 18th day of October, 1919.

Georgia -- Brooks County. I, W. A. May, Ordinary and ex.-officio Clerk of the Court of Ordinary in and for said county, do he reby certify that the foregoing and within is a true and correct copy of the marriage license and certificate of Henry M. Putnam and Della Calloway as will fully appear from the records of file In Witness Whereof; I have hereunto set my hand and sea this the 26th day of August, 1919.

GROCERIES HARDWARE CHOCKERY TOBACCO

J. H. BAILEY

Dry Goods, Notions, Shoes, Hats, Etc.

Forwill Sal.

Near Madam.

Gover Justiand

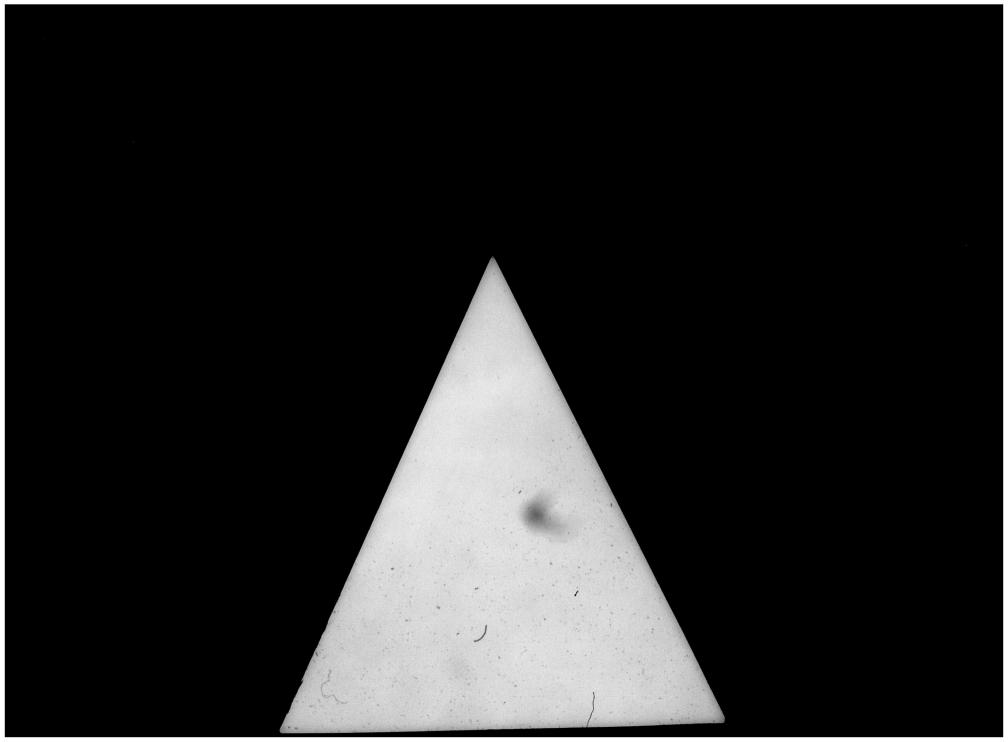
teerg in Sel. 1862



TO ANY JUDGE, JUSTICE OF THE PEACE, OR MINISTER OF THE GOSPELA

You are hereby authorized to join M. Putnam and Lella Callowayin the Holy State of Matrimony, according to the Constitution and Faus of this State and for so doing this shall be your Ficense. Independent for the Histories to me will your Conficute hower of the fact and date of the Marriage. feby 1888 proposed from the form of Pers font, clut & and in the proposed of the fort of and and sent this court of arising. CERTIFICATE STATE OF GEORGIA I Cortify that I henry M Sutnam and Della Callaway were joined in Matrimong by no this

Recorded



an arm is "substantia of the Act in reference lly useless."

APPLICATION FOR ALLOWANCE Leftarm Dyablest
Applicant Requilities
County De Kall Date of Warrant afel 13 Entered on Record 1889 SECRETARY EXECUTIVE DEPARTMENT.

applicant

Quillian, games

Returned for a Gullen Statement by physicians-Explain precisely extent of dirability

MHHamim

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.

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 physicians, 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 a leg, unless the arm or leg has been rendered substantially

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

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

4. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."

5. It papers are returned for correction, and amendments are added to any of the affidavits, the amendments must be made under outh before an officer, and the proofs must show that the amendments have been delto area.

6. Every application must be certified by the Ordinary of the county of the residence of the applicant.

The certificate of any other will not be received in any case.

The Ordinaries of the several counties are specially requested to call the attention of the physicians

APPLICATION FOR ALLOWANCE

For Use of Applicants Who Have not Heretofore Drawn.

STATE OF GEORGIA,
Dekalle County.
1
PERSONALLY appears James Republican of Dehall county,
State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and
resident of said State, and has been such since the Muith day of
October 1844; that he enlisted in the military service of the Con-
federate States (or of the State of Jungia) during the war between the
States, and served as a 2 storgeard in Company H, of H Regiment
of Chargia Volunteers NR factions 's Brigade; that whilst engaged in such military service, at the battle of Standard in the State
· la
Il die a
suching in ruply as set forthe classiftens
Consisting of distocation of Gulle of left foot
with fraction of one of the ley
also other was Either fraction of Suration of sevel of the mitatornal
bones the infany being such it of the link is remarked outstoutably Vision tall wall
Deponent desires to participate in the benefits of the Act, approved October 24, 1887,
and the Act amendatory thereof, approved December 24, 1888, and makes application for
the allowance to which he is entitled for the year thereunder ending October 26, 1889.
Sworn to and subscribed before me, this the
0.0 KL. 0.00
Note: State fully nature of wound or character of disease which causes the disability, and explain particularly, the extent of the disability.
the disability.
Commissioned Officer's Affidavit.
STATE OF GEORGIA
Destall county)
not Post
of Hiller State of Georgia, who, being duly sworn, says that he was a commissioned officer in Company F., of the 1st Regiment of Regiment
a commissioned officer in Company 1: of the Regiment of Hergia

STATE OF GEORGIA,
Destalle County)
PERSONALLY came before me De Caract of the county
of Hulton State of Georgia, who, being duly sworn, says that he was
a commissioned officer in Company M., of the 12 Regiment of Bergia
Volunteers, and that deponent knows Sames He Quellinand 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 fas h. Lucllin .
far R. Smellen is a bona fide citizen of this State and resides
1. A. 14. 16.
Man Bogsdale Wid Eggard Copole
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:
he Kall Co.

STATE OF GEORGIA.

PERSONALLY came

citizens of

county, in said State,

who, being duly sworn, say that they are acquainted with

and know that he received the wounds (or contracted the disease) in the military service, as stated by him in the foregoing affidavit; that said wounds (or disease) permanently disables applicant, as stated by him; that said applicant is a bona fide citizen of this State, and resides in county, and we are well satisfied that all the statements in his affidavit are true.

Sworn to and subscribed before me, this

Nore - Above attidavit must be made by three citizens of the county of applicant's residence.

STATE OF GEORGIA. DeKalh

Personally comes before me J J Inlsey Ordinary of said county, 50 Hitchcock and D. C. Chang MD, both known to

me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined James & Quillian and after such

examination say that the applicant has been injured as follows: The left ankle Distocated and also that one of the bound

of the leg abouth ankle point was at the same

tim fractured, and probably Some of the metatorial bones articulating with the bones

of, and bring the foint ever wither fugated or ractured we consider the injury such as to and

Mr Quellians by Substantially & effectively Uselift SCHitchcock MD Sworn to and subscribed before me, this I

16" day of April 18895 J. C. avary MX

L. Hulsen 14

hours ex aurusof tus f. R. Luellians the my une is Surch as to make STATE OF GEORGIA

W.M. Kogsdali,

Ordinary of said county,

do certify that I am well acquainted with Las Ov. Quillian the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this county. I also certify that the foregoing witnesses, are persons

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

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

Given under my official signature and seal, this 12 day of April 1889 Ordinary A Rall. County.

POWER OF ATTORNEY.

STATE OF GEORGIA

Del Tall-

Know all Men by these Presents, That I, Julie R Quilling

county, in said State, do hereby appoint M. L. Essard

of Fulton Country 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 form 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 12 7

Executed in the presence of us:

STATE OF GEORGIA,

Let Male County.

I, County.

do certify that I am well acquainted with applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and 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 I day of the human 1890.

Ordinary Au Male County.

County.

APPLICATION FOR ALLOWANCE.

THE TALE STATES OF ALLOWANCE.

THE TALE STATES OF THE ALLO

STATE OF GEORGIA,

I, Ordinary of said County,
do certify that I am well acquainted with applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and 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 law day of the law o

Application for Allowance

Rate to Allowance

Rate to County

Applicant, JR Houleau

Sounty, Sold 10

Engrad on record

The 10

Sold 10

S

or yhi.

For Applicants Heretolore Anowed Fensions.	Lot whitegues neterointe unamen Lenginis.
	STATE OF GEORGIA,
STATE OF GEORGIA,	Die Kall County
Le Kall ogomin ice & To ll	PERSONALLY appears M. Quillian of De Rath
PERSONALLY appears In Quillian of De Kall county,	County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen an
State of Georgia, who, being duly sworn, says on oath that he is a bong fide citizen and	resident of said State, and has resided therein continuously ever since the
resident of said State, and has been such continually since the day of 1844 that he enlisted in the military service of the Con-	day of Oct 1844; that he enlisted in the military service of the Cor
	federate States (or of the State of) during the war between the
States, and served as a Surgeout in Company M, of / the Regiment	States, and served as a Sez Jezz in Company H, of 18th Regimen
of Congin Volunteers Jacking 's Brigade; that whilst engaged	of Volunteers Chellan 's Brigade; that whilst engage
in such military service, at the buttle of Starton in the State	in such military service at the battle & II Starting in the Star
of Liginia on the 12th day of July 186/, he was	of Life , on the 200 gay of 1861, he was
wounded as follows: Fift lea broken and antile	wounded as follows: Seff leg hitten and
distocated causing a suftine of the	wifile discocated, supturing the
ligamente of the deg	ligaments and cano ing peque
	Rendering the leg Substantially
	and es Bentially reless.
10.1	Deponent desires to participate in the benefits of the Act, approved October 24, 188
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	and the acts amendatory thereof, and makes application for the allowance to which he is entitle for the year ending October 26, 1891. I have heretofore been allowed a pension of
and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1890. I have heretofore been allowed a pension dollars.	diffy dollars, for
Sworn to and subscribed before me, this the (Ruillian	Sworn to and subscribed before me, this, the
day of Leberge any 1890	10 th day of the 12 1891.)
Willians day Ordinary.	Milliandela P. Ominen
Note. State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of	Nora State fully nature of yound or character of disease which causes the disability, and explain particularly the extent the disability, resulting from the wound or disease.
POWER OF ATTORNEY.	POWER OF ATTORNEY.
STATE OF GEORGIA	STATE OF GEORGIA,
County. 1 6 '00'	De Lock County.)
county, in said State, do hereby appoint 13. J. Davis	Know all Men by these Presents, That I, Lillian
of he hall	of De County, State of Georgia, do hereby appoi
county, in said State, do hereby appoint 19, 9. Warrs	of Hillard Doggan Day my true and lawful attorney in fact for
of 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	of
the and if mane, or hand, or hand, or hand in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit;	to from the State of Georgia by reason of the injury received as aforesaid in the military servi- of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authori
the sale authorising my said attorney to receipt in my name for any Warrant that may be	ing my said attorney to receipt in my name for any Warrant that may be issued by the Gove
issued by the Governor, or for any sum of money which may be coming to me for the reason	nor, 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, the
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this	
First day of Rebruary 1890.	day of The 1891. J. R. Zuillan [L. S
[L. S.]	Executed in the presence of us:
Executed in the presence of us:	Bober MBrown In
	Miller osdal, Ordinary
Thill, Regedale Ordinary	DIRECTION.
Send money to me as follows, by	Send money to me as follows, by
to P.O.	County, Georgia.
County, Georgia.	

STATE OF GEORGIA.

Me Kalt County.

1. // Mella gadas Ordinary of said county, do certify that I am well acquainted with applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the Maimed Soldiers. individual he repesents himself to be, and that he resides in this county. Given under my official signature and seal, this 2 day of March 1892. Voucher No. 1981 MAS solale. Audited Ordinary L.C. Kalle Amount, & 50 County. COMPTROLLER GENERAL Paid to James R Linkling Derable April 13 Included in Warrant No. issued to Treasurer applecan

of Applicating their	leroloie Allowed I elisiolis
STATE OF GEORGIA	101
De Pall Count	du Visa
	(1/1/4)
Personally appears	MA Millian
	County, State of Georgia, who, being duly sworn, says
on oath that he is a bona fide citizen and	l resident of Georgia, and has been such continuously
ince theday of	(Ce 1 1844; that he enlisted
the military service of the Confederate	te States (or of the State of See 2 104
luring the war between the States, and	served as a de well in Company H.
of I'm th Regiment of Leaz	
	llitary service at the battle of Stanton
	, on the 20" and day of
180	66 , he was wounded as follows: Left leg.
brothen and.	anhle dislocated
	of the ligaments,
wallstring stege	yent Ineration
rendening !	the leg essentially and
Substant Deally	n Luseless
	the benefits of the Act, approved October 24, 1887, and sapplication for the allowance to which he is entitled for
he year ending October 26, 1892. I ha	ave heretofore been allowed a pension of
Witte	Dollars for Misabled Leg
Sworn to and subscribed before me	000
Swort to and subscribed before in	M. Lulh an
day of // usen	1892.)
The pudació	Ordinary.
NorsState fully nature of wound or charact	eter of disease which causes the disability, and explain particularly the
extent of the disability.	
POWER	OF ATTORNEY.
STATE OF GEORGIA.)
STATE OF GEORGIA,	,
·	nty.)
Know all Men by these Presents	s, That I,
	of
County in said State, do hereby appoint	•
County, in said State, do hereby appoint	
of me and in my name to receive and rec	my true and lawful attorney in fact, for eccipt 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	e), as stated in the foregoing affidavit: hereby authorizing
ny said attorney to receipt in my name	for any Warrant that may be issued by the Governor, coming to me for the reason aforesaid.
	ave hereunto set my hand and seal this
lay of	
	[L. S.]
Executed in the presence of us:	and the second of the second of the second
and the second s	
VI A STATE OF THE	DIRECTION.
Send money to me as follows, by	mana manana m
	to P.O.

No. 1981. STATE OF GEORGIA, EXECUTIVE DEPARTMENT.) Attenta, Ga April 131859 Mr. Sauce R. Quillian of Halb having filed his applica having filed his application in the Executive/ Department for an allowance under the Act approved October 24, 1887, as amended by Act, Dec. 24, 1883, and the same having been allowed for Left beg derables
He is entitled to receive the sum of High & Day. for such disability, the same being the same and hold his receipt on this voucher, and return same to Executive Department for warrhow By the Governor. . CO A Harieson CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Dollar per above voucher, this

of McC 1889.

County, Georgia.

	DeKalk
	Maimed Soldiers.
Audited 7 cb. 4 18 90	Voucher No. 10
WM J MICHAELLER GENERAL	Amount & GO
	Paid of Apullian .
	7. —
	Hehr 3 sgo
	Included in warrant No.
	issued to Treasurer.

WARRANT CLERK.

Audited

COMPTROLLER GENERAL.

1891. Maimed Soldiers. Voucher No. 410 Amount \$ 50 Paid of Paulian Included in warrant No. issued to Treasurer. 1891.

WARRANT-CLERK.

No. 70
EXECUTIVE DEPARTMENT.) Glanta, Ba., Seby 3 1090
My R. Paullian of the County
f Hestalb having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Act,
pproved, Dec. 24, 1888, and the same having been examined and allowed for
Leg disabled as
To is stitled to receive the sum of Highly Loaf Dollars
or such disability, the same being the allowance due for the year ending October 24, 18
The Treasurer will pay the same and hold his receipt on this voucher, and return same
Executive Department for warrant.
GOVERNOR.
By the Governor,
CLERK EXECUTIVE DEPARTMENT.
Serial March
South Million
RECEIVED OF STATE TREASURER, R. U. HARDEMAN,
Filter x oof Dollars,
per above voucher, this 3 of Hebry 1890
J.R. Builtian
y. J. Januar
By B.J. Davis. Atty in fact

STATE OF GEORGIA,	All the	Hely 10 1891.
EXECUTIVE DEPARTMENT.	Guania, Sa	10911.
ana		
Mr. X W Dun	llian.	of the County
Mr. J. R. Dom of Dexalt	having filed hi	s 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 b	een examined and allowed for
ef y ()		
He is eptitled to receive the sum of	diply.	Dollars
for such disability, the same being the		
The Treasurer will pay the same		
Executive Department for warrant.		0
Executive Department	76.6	Courses.
	1	Governor.
By the Governor,		
MONONA	nismi	
	SEC'Y EXECUTIVE DE	PARTMENT:
,50		
RECEIVED OF R. U. HARDEMAN, Tr	easurer of the State of Geor	gia.
RECEIVED OF K. C.	7.80	
July 1/2	TTO	Dollars,
per above voucher, this	Ib Attel	1891.
TE OF	GEORGIA 13	rois
	1/1	00 0 101

1891. No. 410 NAME, Quillian, James R.

WHEN AND WHERE BORN?

ENLISTED WHEN AND WHERE?

RANK.

COMPANY AND REGIMENT? 2nd. Sergt. Co. H, lsr. Regt. Georgia Vols.

H.R. Jackson's Brigade.

NAME OF CAPTAIN AND COLONEL? W.L. Ezzard Captain.

WOUNDED? Stanton, Va. June 15th. 1861. Kicked by a horse, dislocation of ankle of the left foot with fracture of one of the bones of leg left.

CAPTURED, WHEN AND WHENCE?

RELEASED.

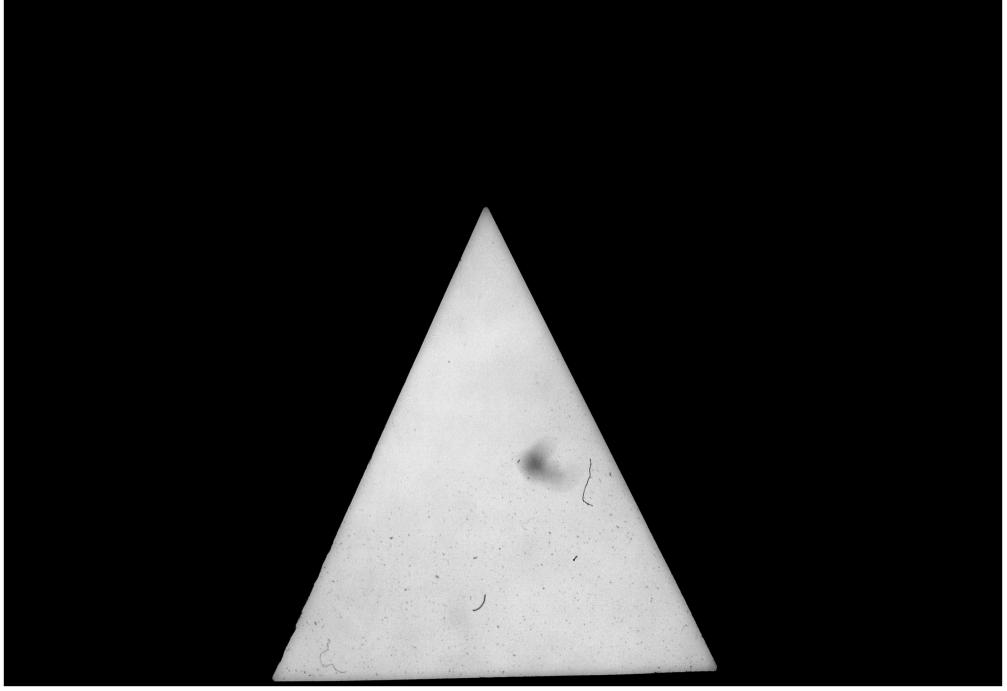
WHEN AND WHERL SUPRENDERED?

IF NOT PRESENT AT SURRENDER, WHERE WARD YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. Captain W.L. Ezzard, No data.



Pusion Office 7/12 1899 Ragsdale, P. J. It is doubtful under the proof that afflicant cannot sup port him INDIGENT PENSION suf-Rich Johnson 1899. Applicant much Name P. G. Raysdal Hal the row has from County De Rath a wilinger who was present - y obsent for what Cause RICHARD JOHNSON, lever row founded thy whent anderity WARRANT HANDED TO

110-190V

POWER OF ATTORNEY

1899.

CA (I. S.)

STATE OF GEORGIA STATE OF GEORGIA. Deeall-Dellally COUNTY. of said State and County, desiring to avail himself of the Pension Act (Section 1254, Code), hereby submits his proofs, and after being duly , PSI Magsdas . hereby authorize 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.) 2. How long and since when have you been a resident of this Sinte: to receive and receipt for the pension allowed, and request that he remit same to Witness my hand and seal this 2 & day of Rel 3. When and where were you born? Tieb, 2d. 1840, New York Co P. S. X Ragidae (1. 8.) When and where and in what company and regiment did you enlist or serve? M. 18-61, 5. How long did you remain in such company and regiment ? Six Months then was hans fered to Company, &, 6-6 92, 6. For how long a period did you discharge regular military duty? Worth Hyears 7. When, where and under what circumstances were you discharged from service at close of Surrender. Coplant it Records in 1Hay 8. What is your present occupation? Thying to Harm 9. How much can you earn (gross) per annum by your own exertions or labor Worldle & lama, Harming 10. What has been your occupation since 1865? 11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty" Umlinith - boyeth, 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?

Start sufficient with Pills In it hemoriqe for last IT Hen Heart. 13. What property, effects or income do you possess, and its gross value. Horre of my 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 ? JM 189 48. 10, 18953164 1897 \$1,90 1898 \$ 1,00 15. In what County did you reside during those years, and what property did you then return for taxation? Decalle. 16. How were you supported during the years 1897 and 1898? On My Children - + mothers help and what would could to myself 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? Clow Sunty five Bollar 5 13000 20. 18. What was your employment during 1897 and 1898? What pay did you receive in each year: 14 arming Merce received anything 19. Have you a family It'so, who composes such family? Give their means of support? Have they a homestead? The Sind Girl. JOHNSON HANDED Mery have no formatical 20. Are you receiving any pension? If so, what amount, and for what disability? (10 Sworn to and subscribed before me this the WARRANT 1899. Applicant.

FUWER OF ALLUNINE

QUESTIONS FOR WITNESS.	AFFIDATE OF PHYBICIANS.
	STATE OF GEORGIA,
STATE OF GEORGIA,	legion of the second of the se
Rolldale COUNTY.	Delsolt COUNTY.
25 :11 -1	Personally came before me for M Inilole and
as a witness in support of the application of P. J. Lagadale for pension	A Chuff , both known to me as reputable physicians
as a witness in support of the application of D. V. Page 100 Tor pension under Section 1254, Code, and after being duly sworn true answers to make to the following questions,	of said County, who, being severally sworn, say on oath that they have examined carefully
, , , ,	- A Magadale , applicant for pension under Section 1254, Code, and after
1. What is your name and where do you reside? fit, Albert	such personal examination say that his precise physical condition is as follows:
Me felicis as morning	Files and Probps of Rections also
2. Are you acquainted with P. B. Rugadale, the applicant; if so	Suffers with Sumbago there fore he
how long have you known him? has theorem hours about your	is not able to work
3. Where does he reside, and how long and since when has he been a resident of this State? Buttalble	
Da about forty years.	
4. When, where and in what company and regiment did he enlist, and how do you know? Albuth you met 1862 by E. 56 In Rey Royalale belonged to	We further say on oath that the physical condition of applicant renders him unable to labor at any
affinity led. Got a 56. In May Magnate belonged to	work or calling sufficient to earn a support for himself, and that we have no interest in said pension being
Were you a member of the same company and regiment? Was leaft of the do	allowed. Thible MAST
6. How long did he perform regular military duty, and what do you know of his service as a Confederate	Sworn to and subscribed before me this the
soldier, and the time and circumstances of his discharge from the service? Served to Closes of tran made a good Soldier. Turn de losse of	2d day of the 1899. O. R. Chupp, M.O
blose of mar	Monkeasdace Ordinary.
7. What property, effects or income has the applicant? (Give your means of knowledge.)	ORDINARY'S CERTIFICATE.
Hat any at all, I have been knowing	
him for 18- year.	STATE OF GEORGIA,
8 What property, effects or income did the applicant possess in 1896, 1897 and 1898, and what dispo-	Le hall county.
sition, if any, did he make of same? is tal net have any	I, MM Ragosface, Ordinary in and for said County, hereby certify
profest at all,	that the applicant Rogsotale resides in said County, and has
9. Has he conveyed away any of his property in the last three years, if so, what was it, and to whom?	been a bona fide resident of this State since the 2 day of Petro 1840
he had no praperty	and that the witnesses, viz: A leogain, In , Sribbee mis
10. What is the applicant's occupation and physical condition? Turning their	and AR Chulk mil.
mas were he suppres with feller into himorogia,	are of trustworthy character, and that their statements are entitled to full faith and credit.
Mesc	I further certify that before answering the foregoing questions the applicant and each witness took
11. Is the applicant unable to support himself by labor of any sort, if so, why? Hes.	the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witness
	before same was signed.
12.1 How was he supported during the years 1897 and 1898? by the help of	I further certify that the tax digests of He fault County show that applicant
12.3 How was he supported during the years 1001 and 10001.	returned for taxation in his name in 1897 Dollars of property, and in 1898
13. What portion of his support for these two years was derived from his own labor or income?	
a depose aboutow orsis.	In my opinion the foregoing claim is made in good faith
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension,	Witness my hand and seal of office, this day of the 1899.
under Section 1254, Code? Supply 100 1 4 500 1 Biles and	- May lag sale Ordinary,
a Herry Congression	of Sectally County.
from to hefore me that relating Milla goder Ording	NOTE.
15. What interest have you in the recovery of a pension by this applicant? Money	 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
Sworn to and subscribed before me, this J 71 Athe A. Capil. 3. 565	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
the day of 1899.	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.
Ordinary. a	

AFFIDATE OF PHYSICIANS.

STATE OF GEORGIA. STATE OF GEORGIA. Dikall- A DeKall COUNTY. Lagsdale of said State and County, desiring to avail himself of the Pension Act (Section 1264, Code), hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (Give State County and post-office). 6. Hagsdale DEKall County and R. Gunge Py. Ragsdale Lithonia Dekach C How long and since when have you been a resident of this State? 64 years Litharia newton County ga When and where were you born? Hibry 2/1/840 4) When and where and in what company and regiment did you enlist or serve? fall of 1861 the Suas martine Witness my hand and seal, this. 19 & Rory Stale [L. S.] after 6 months Then Jaimes CO & 56 & a Regenery Executed in presence of 5. How long did you remain in such company and regiment? Three years and and 6 mouths In both Regenents 6: When and where was your company and regiment surrendered and discharged? 1865. I was mustine out of environ in COB34a ofter 6 months at Savoral ya, for north Carolina Were you present with your company and regiment when it was surrendered? Wan Not and by whose authority? Command clearly spore you were, when you left your command, for what cause and by whose authority? Command to the com taken a Phisioner is why I left my command 9. "How much can you earn (gross) per annum by your own exertions or labor? about \$ 2000 What has been you've count on since 1865? January
 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"? CALLY Pourty & Bad Egy on 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, pills. state whether you are totally blind and when and whore you lost your sight? For 10 years I have not been able to work any and and interly dependent, not totally blinds, but I have not seen much for weglans 13. What property, real and personal, or income, do you possess, and its gross value? Willing 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? Williams 15. In what County did you reside during those years And what property did you then return for taxation? In Jekall House holds Gards + a loon 16. How were you supported during the years 1899, 1900, 1901 and 1902? But My Children

17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? Children 18. What was your employment during 1898, 1899, 1901 and 1902? What pay did you receive in each year?

18. What was your employment during 1898, 1899, 1901 and 1902? What pay did you receive in each year?

19. Have you a family? If so, who composes such family? Give their means of port? Have they a omestead, og other property? Their ages and how employed? . . . Mave My Children are all married live 2. Merufixet I flen out in la 20. Are you receiving any pension? If so, what amount and for what dissplitty? I received

Penseive in 1901-1902. age & Raverty & 13 da Egyxich. LINDSEY WARRANT HANDED 22. How many applications have you ever made and under that class? Out To & Ragsolae. Sworn to and subscribed before me this the 3/ 18 of March 1904. Carries B George Ordinary,

STATE OF GEORGIA,

Do Kall COUNTY.
Personally cards before me June A. Synn M. D. a.
G. Janus M. D., both known to me as reputable physicia
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: Appleaned The P. J. Ragsdale, is
supprising with bleding & protruding feles Ch
rheumation caused by expresse while in active ser
in sivil war extreme debitite rendering fine to
west for any Kind of work- Alst morely blindes
and that we have no interest in said pension being allowed. Berg. Co Synna
Sworn to and subscribed before me, this, the
Januar Rying Ordinary.
ODDINADNIA ODDINICA III
ORDINARY'S CERTIFICATE.
STATE OF GEORGIA,
DESTAIL COUNTY.
I, Ordinary, in and for said County, hereby certification and the applicant. Plantage Page Association of the county and hereby certification and county and coun
200
been a bona fide resident of this State since the 2 day of 1840 and that the witnesses, viz.: No Collection
and that the witnesses, viz.: e 0
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 oa 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 Dekall County shows that applica
returned for taxation in his name in 1899 Uou Dollars
property, and in 1900 NMC Dollars of property; in 190
Dollars of property; in 190
Dollars of property.
In my opinion the foregoing claim is made in good faith.
Witness my hand and seal of office, this 12 day of Africa 190 \$
James Regulary Ordinary
of DWWW Count
MOTE.

STATE OF GEORGIA

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.

OUESTIONS FOR WITNESS. STATE OF GEORGIA, DEKRELof said State and County, having been presented as a witness in support of the application of Sy Ragadale under section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows: What is your same and where do you reside? Clarkenten Garekalber Where does he reside, and how long and since when has he been a resident of this State? DEKall-Co. 644eans 4. When, where and in what company and regiment did he enlist, and how do you know? Halle, 1861 attention in company B 3 Ga Requent 5. Were you a member of the same company and regiment?..... 6. How long-did he perform regular military duty ? When and where was his command surrendered any printant and ail after 6 months Liver 8. Were you present when it surrendered? was france when mula out 9. Was applicant present?. 10. If he was not present, where was he?_ By what authority he left? Time Expensed & Muniland a X How do you know all of this? & work kneed and know of my own 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 not able to Seam a lufford 15. Is the applicant unable to support himself by lasor of any sort, if so, why threek not be is very 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? his Opplical Conclilies very por I know of writing he has

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

Sworn to and subscribed before me, this the

13, day of Ofwil

QUESTIONS FOR WITNESS

STATE OF GEORGIA,
Rockdole County.
0. H Albertof said State and County, having been presented
as a witness in support of the application of Ph Rayadale for pension
under section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and
1. What is your name and where do you reside? I Albert Resides in Rock dele
2. Are you acquainted with P. S. Rays dale , the applicant; if so, how
long have you known him? 454 / Cu own him more than forty 41074 3. Where does he reside, and how long and since when has he been a resident of this State?
He resides in which the La Has resided in La Mel this Le
4. When, where and in what company and regiment did he enlist, and how do you know?
Whost march 1862 Attenta to let le 56 Reg fa Vols William March 5. Who you a member of the same company and regiment?
6. How long did he perform regular military duty? Served in the let to 1864 When about 7. When a whole the both the both of the man and transmit a topic that a the server of the server and the server a
North leaveling
8. Were you present when it surrendered?
9. Was applicant present? No. 18 a primer at the time of Durrender. 10. If he was not present, where was he? Sout more great was in prison
When did he leave his command? Was Captured that man For what cause:
By what authority he left? Wade a prosser How do you know all of this?
Thorse by bring present and Commanding the let.
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 that disposition, if any, did he make of same? Had home of any Consequence
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom?
Has not had now to coming
14. What is the applicant's occupation and physical condition?
He is a farmer He is getting old from out and nearly bland
15. Is the applicant unable to support, himself by labor of any sort, if so, why? He is not able to
support hundely by his labor on account of old age blundness
and general devilty
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?
Strit Know
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under
Section 1254, Code? We is nearly feetle and generally distillated.
and not able to lobor 19. Who composes family? What property have they? Children's age and their earning capacity?
Nas a wyle Has no property. Thildren all left him hos -
four don't know their earning Capacity
20. What interest have you in the recovery of a pension by this applicant? Work
Sworn to and subscribed before me, this the)
11 the day of April 190% Witness.
All Nolins Ordinary

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, COUNTY.	
I, A.M. Helm	Ordinary, in and for said County, hereby certify
that the applicant	resides in said County, and has
been a bona fide resident of this State since the and that the witnesses, viz.:	day of
hereon prescribed, and that the full text of the affidavits v Therefore certify that the tax digest of	oing questions the applicant and each witness took the oath was read to the applicant and witness before same was signed. County show that applicant
returned for taxation in his name in 1899	Dollars of
	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	m. Helmo Ordinary
	of Rockdole County.
* * * * * * * * * * * * * * * * * * *	OTE:
1. Before any questions are answered, the Ordinar	y shall swear applicant and the witnesses in the following

^{1.} Desire 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 sinday its 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. hereby authorize to receive and receipt for the pension allowed and request that he remit same to Witness my hand and seal, this Executed in presence of FOR THOSE ALREADY ENROLLED.) LDIER'S PENSION JOHN W. LINDSEY, WARRANT HANDED TO INDIGENT 1902. WARRANT ISSUED 1120 No. 924

*		County. \				
I,			_hereby at	thorize		
		of		<u> </u>		
receive and	l receipt for t			request th		
,					1	
	y hand and seal		. 9			
Witness m			. 9	• 3		
Witness m	y hand and seal		. 9			
Witness m			. 9			
Witness m			. 9			
Witness m			. 9			
Witness m			. 9			

(FOR THOSE ALREADY ENROLLED.)

DIER'S PENSION

INDIGENT

WARRANT ISSUED

JOHN W. LINDSEY,
Commissioner of Pensi WARRANT HANDED TO

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA.
De Kalk County.
Personally appears PR Registrate of Resident 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 1860; that he is 80 years old and by occupation a latencer 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 12 leave in Company B, of 3 ch Regiment of 2 a log that his physical condition is as follows: The first first from the confederate States and served for the term of States, and served for the term of States, and served for the term of States, and served for the term of States and served for the term of States, and the military service of the Company B. of States, and served for the term of States, and the served for the term
that his property consists of the following items. Nove
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 see Kall County been allowed a pension for the year 1901. Sworn to and subscribed before me, this the day of the year 1902. Sworn to and subscribed before me, this the day of the year 1902. Dollars, that by reason of his physical counties have reason of his physical condition.
Milliogsdale Ordinary.
STATE OF GEORGIA, Je Kall County. I, Mill Me gada County, do certify that I am well acquainted with Magazine the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.
Given undermy official signature and seal, this 20
day of 1902. Ama your here day of 1902. Ordinary Le Valle County. Nore.—The blank spaces must be filled.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Se Kalk County
Personally appears P. Raysdale of De Nach 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 2 day of 1840; that he is 3 years old and by occupation a 1840; that he is 63 years old and by occupation a 1840; that he enlisted in the military service of the Con- federate States (or of the State of States, and served for the term of 3243 in Company B, of 30 h Regiment of 1840; that his physical condition is as follows:
that his property consists of the following items:
of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of De Mall. Sworn to and subscribed before me, this the day of Mall. Ordinary. Ordinary.
STATE OF GEORGIA, County. I, M. Rogadale pordinary of said County, dojectify 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 1903. Anix your here here Ordinary & County.

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

POWER OF ATTORNEY.

STATI	E OF GEORGIA,	1		
	befait County.	f .		
, _. .	of fingesdale	hereby auth	norize	P
- 21	I Shupp hagsdale	of Schoo	ell County	i - Ge
to rece	ive and receipt for the pension	allowed and a	request that he re	emit same to
21	Dig Bassdale	at The	min - Ga	
by			2	`
Ŵi	itness iny hand and seal, this of			1904.
		550.91	scus sola c	Z [1 8.]
	Executed in presence of		0	
·	it last gop.).	

P.S. Hagsdale SOLDIER'S PENSION INDIGENT 24 WARRANT HANDED TO 1904. JOHN W. LINDSEY. (FOR THOSE ALREADY EI nodata County

POWER OF ATTORNEY.

Ι,			here	by authoriz
receive and receipt for the	pension allowe	d, and reques	that he re	mit same to
	at		*	
1.				1005
WITNESS my hand and sea	d, this	day of		1905.
				[L. S.
Executed in the presence o				

LDIER'S PENSION 1905. INDIGENT

(FOR THOSE ALREADY ENROLLED.)

160

Name P. D. Raysack

Regiment 3 95

JOHN W. LINDSEY,

WARRANT HANDED TO

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	P. January C. Company
DEKall County.	
	egsdale of DEKall
	worn, says on oath that he is a bona fide citizen
	d has resided in said State continuously ever
since the 2 day of Heloy	at he enlisted in the military service of the Con
by occupation a Farmer, th	at he enlisted in the military service of the Con
federate States (or of the State of	during the war between the
States, and served for the term of 312) during the war between the
follows: allage and	Piles
	**
that his property consists of the following	items:
2 Cora	1
19010	1
*	
	Dollars, that by reason of his physica
	port himself by his own exertion or labor, and
that he receives no pension but the one her	
	benefits of the Act, approved December 15th makes application for the pension to which h
is entitled for the year 1904. I have heret	ofore as a resident of DEIKale.
County been allowed a pension for the year	
Sworn to and subscribed before me, t	570 1 110000 1111
13 day of Journ	
1 001	
Janus Hyenry	Ordinary.
STATE OF GEORGIA,	
VEKall County.	
O OU_{-}	
1, Janus 18 deor	Gordinary of said County
do certify that I am well acquainted with	1. J. Hagsdale
	d am well satisfied that the statements mad
	know he is the individual he represents himsel
to be, and that he resides in this County.	
V2	nature and seal, this / 3
day of Hannels	7 1904.
Amix your	Junus Junge
here.	Ardinary Willald County

LAN ULL RIOUNTO HEMPIALA	UL VIDAMED I DUDIANO.
STATE OF GEORGIA, Gulfall County.	
Personally appears . Tu.	godalos Lettalo
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 ha	
since theday of	18; that he isyears old and \
by occupation a, that he e	nlisted in the military service of the Con-
federate States (or of the State of	during the war between the
of States and served for the term of of States and served for the term of follows:	in Company 3, of 5 th Regiment; that his physical condition is as
follows: Jewfirmity 7	Povisty
had a submitted and the submitted of the	A Samuel
The same of the sa	
that his property consists of the following items	
of the value of	Dollars. I am now earning,
by my labor, D	
physical condition and poverty he is unable to s	
labor, and that he receives no pension but the o	
Deponent desires to participate in the bend	
1894, and the Acts amendatory thereof, and mak	
is entitled for the year 1905. I have heretofore	
County been allowed a pension for the year 1904	11 6 1/10 / 1
Sworn to and subscribed before me, this th	se Jag selice
Jane Reference 1905.	
Jane Officer of	Ordinary.
STATE OF GEORGIA	
STATE OF GEORGIA, County.	that is the will be seen to
County. /	Ordinary of said County,
1, 100	William of said county,
do certify that I am well acquainted with	well esticial that the statements made
the applicant in the foregoing affidavit, and and by him in his said affidavit are true, and I know	he is the individual he represents himself
Given under my official signatur	re and seal, this 23
day of Juccio	1905.

Norg.—The blank spaces must be filled.

Norg.—Affidavit should not be attested before January 1st, 1905.

Affix your Seal here

State of Leongia, Fullen County.

Personally apprecial before the under riqued, J. J. Black stock, when on outh says that he is prevenuly well argumiled with P. G. Ragsdale of he Kath benely, Seorgia, I that he served with here in bougany to of 58 & Regiment of Georgia Volunteers; that he roas with command when it runched, but Ragodale west not present because he had been captured panel coas an priver, that he has been heard in about to years, that he was a good doldier and verved his country Severe to and enboorbed before me, April 20-1904, J. J. Sillenthalacke John Rethickmine Ochuray,

Liorgia I In person cambe De Nall leonning 3 heg ore me Osdings If they, who he ing swown says he was Coplain of least, 56th La Regimens That he is personally organited with 1. No godace, they he know him -during the war that he served as stated intinoppidavid intest. 56" Reg. Fa. Vol. Mas said Rogedale was Captured at Respeced Garin May 1864 and was held as a prisony up to surrender and so was not fresent with his command up Me Surrender. A corait was present with his command when it surrendered at Secustions VIC. in fall 1863 and the season 1. J. Courage was not present Me was captured as stated and was need as a prisoner of war. Sworn to and subscribed 2. To Flech he fore me since 8th 1901. 3 1.11. No god a ce Ordinasy ? Leonia, 3 & MINAsosdace (Shinas) Le Hall Coming 3 in and for said Comity foller hipy hear I am aggreanted with J. J. Affect and that his statement use worthy of well ered in auch helie. soft in vice 2 my hand and leal of of piec his love 8th 1901 11/1/Magsday

the suffers with Pills & honoriges Pis There for inabel to make his support the that me property or income to make can't rest. I de Strickland N & Raysdale Detall Journey 3 In # St colum H HWesley I WM Regulace Ordinary just acid for staid Courty do hereby certify that the above named citizens of said leounty are known to me and that they were sworn to the statements contained in the above offidavit. that they are worthy of full wredis and belief Witness my hand and Seal of office Whire Dec 19 th 1899, Millagodace Edinas. Gurgio J. P. G. Rogadale Makes this Dekall County Coffichaver Chat I was not before The Grand Juny of Dekall vat the. March Vigin 1903. I was not notified to appear before The Grandfung and make out claim for Dension Swown to and Subscribe & To of Raggodale be fore We March 31 79048 Janux R. George Ordinon

WHEN AND WHERE BORN? February 2nd. 1840 Newton Co. Ga. Resident of Ga. since birth.

ENLISTED WHEN ALL WHERE? . 1861

HANK.

COMPANY AND REGISENT? Co. B, 3rd. Regt. Ga. Vols. (six months) Transferred to Co. E, 56th. Regt. Ga. Vols.

NAME OF CAPTAIN AND COLONEL? Captain J.F. Albert, (Co. E., 56th Ga.)

WOUNDED?

CAPTURED, WHEN AND WILEAE? Captured at Resaca. Ga. 1864 May

RELEASED. After surrender.

WHEN AND WHERE SURRENDERED?

IF NOT FRESENT AT SURRENDER, WHERE WERE YOU? In prison.

DIED, WHEN AND WHERE?

BURIED.

WITNESSES.

WHEN AND WHERE BORN? February 2, 1840 - Newton County, Georgia

ENLISTED WHEN AND WHERE?

RANK.

NAME Ragsdale, P. G.

COMPANY AND REGIMENT? Company B. 3rd Ga - then mustered out/after six montus service and joined Company E. 56th Ga Regiment

Fell or 1861 - Atlanta, Georgia

NAME OF CAPTAIN AND COLONEL? J. F. Alvert, Captain - Co E, 56th Ga Regt.

WOUNDED? Piles and chronic rneumatism caused by exposure while in active service in the war.

CAPTURED, WHEN AND WHENE? Near Mesaca, Georgia

RELEASED. Date not given

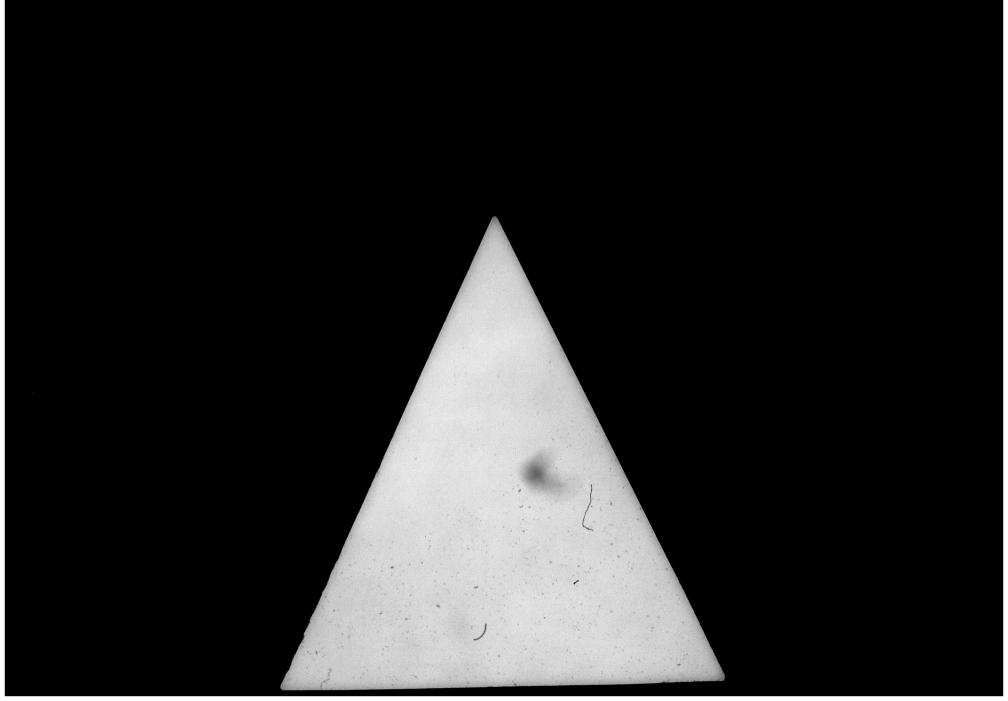
WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. J. J. Blackstock. - Co E. 56tn Regt. No ata. N. M. Lankrord - Co B, 3rd Ga Regt. -- No data.



POWER OF ATTORNEY

STATE OF GEORGIA,

Know all Men by these Presents, That I,

County, in said State, do hereby appoint.

to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing me and in my name, to receive and receipt for whatever amount of money I may be entitled 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 my true and lawful attorney in fact, for aforesaid.

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

Executed in the presence of us:

If allowed, send amount by

me at

and oblige,



oms Fallie Painer

\$100.DD.

Warrant Issued

1891

AND HANDED TO

POWER OF ATTORNEY. "

S	TA	TE	OF	GEO	RGIA.

County.

Knov	w all Men I	by these	Presents,	That	I,	 <u>.</u>	 	
		30.4			01			

County, in said State, do hereby appoint....

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of ________189_____

Executed in the presence of us:

)

DIRECTIONS.

If allowed, send amount by

.....

[L. S.]

me at

, and oblige,



Meshall-County
1891.

210. 7677

Widows' Pension

Muliconnection 1991

AND HANDED TO
1891

AND HANDED TO
1891

Affidavit to be Made by the Widow: Form

STATE OF GEORGIA.	
	In person came before me, the undersigned Ordinary in and for the County of See Roll
	, who being sworn according to law, says under
oath that she is the widow of John	I Maissie, who was a soldier in
the service of the Confederate States, and ser	
	Volunteers; that he enlisted in said
	day of Sept 186/, and was in the
leanse desate Army up to	July 1863 That while in the
	ay of July 186 3, (See Note No. 1)
John wison	
Gettesburg wo	as carried to Print
Lookout a fee	
where he died	from disease while
	The fall of 1863.
	me face y 1000.
•	
•	4
	the state of the s
Deponent further swears that she was the wif	e of said deceased soldier during his term of service in
	the his death; that she became his wife on the
day of 1852, ar	nd that she has resided in Georgia continuously since the
self her bay 61	; 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 sold	lier husband, applies for the pension provided by Act of
	her right to receive the allowance granted by said Act.
Sworn to and subscribed before me, this, t	
day of Mary 180	
1 180	

NOTE I. 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.

STATE OF GEORGIA.

Country of Se lall in and for said Country, witnessed

erson came before me, the undersigned Ordinary

and J. V. House

(each known to said Attesting Officer as truthful,

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

Mrs. Sallie Rainey, of the Country the Kall State of Georgia, is the widow of John Maney , who was a soldier in of the 38

Regiment of Leon Scia Volunteers.

That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or 186/ That while in said service, or by

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

Letter her g Pa and carried to Point Gookout. M.D. a federal Krison where he took Diarrhaes land died from the disease while in prison in the fall of 186.3

We further swear that Mrs. Sallie Rainey soldier during the service, and that she has not intermarried since his death, and that she resides in County of the State of Georgia.

Sworn to and subscribed before me, this, the

Sworn to and subscribed before me, this, the John Batter

14" day of Juny 1891. She Batter

11 May of Juny 1891. She Batter

Ordinary. J. J. Herrie

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

STATE OF GEORGIA,

ATE OF GEORGIA,

I. M.M. Rogislace.

County of De Kalk in and for said County of De Kalk

State of Georgia, hereby certify that I am acquainted with Mrs. Hallie Rainer 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 tully satisfied that this claim is made in good faith, and that I have caused the applicant and the witnesses to read or hear read the proofs they sign.

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

14th day of May M.M. Rogeschale.

Ordinary.

Form No. 4.

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

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

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.

STATE OF GEORGIA County of De Ra State of Georgia, hereby certify that I am acquainted with Mrs. Ordinary in and for said County of Sallie Kainey 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, 1800, and has not lived out of the State since that date. That she is the I. Kainez widow of deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1893. In Witness Whereof, Lifave hereunto set my hand and affixed the seal of my office, this, the day of fancary Ordinary. POWER OF ATTORNEY. STATE OF GEORGIA, Dekalla County in said State, do hereby appoint John of John of Dekall my true and lawful attorney in fact, for me, and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid. IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 24 day of Jan Selly Learing [L. S.] Executed in the presence of us: Del. Chesnut K. S. Chemul, 19 / DIRECTIONS. Send amount by me at , and oblige

rui midums neresolure allowed rensions.

STATE OF GEORGIA C MONTO TO

_ (())	RGIA, Dersonally comes
County of Yel	all Sally Raine
	, that she is a bona fide resident of said County of
Dekall	State of Georgia, and that she has resided in said S
continuously ever since. CC	a les like 18 That she is the Widow
1 6 Mai	who was a Soldier in Comp
w. of the 38	Regiment of Glorique
Volunteers, that he enlisted in	said Regiment on or about the month of Sele
	up to his death 1864 That he lost
life on the Sefet	
	's death, when, where and from what cause.)
	t 1864. est Point los
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Fig. 1 5 (1) 6	
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Deponent swears that she was t	the wife of said deceased soldier during his service in t
	the wife of said deceased soldier during his service in t
army as a soldier, and that she l	has never married since his death aforesaid, that she beca
army as a soldier, and that she lais wife in the year $185\mathbb{Z}$; tha	has never married since his death aforesaid, that she becan at Georgia is her home and she resided in this State 23d d
army as a soldier, and that she last wife in the year 1852; that of December, 1890, and has not	has never married since his death aforesaid, that she becan at Georgia is her home and she resided in this State 23d d lived in any other State or locality since that date. I ha
nrmy as a soldier, and that she lass wife in the year 1852; that of December, 1890, and has not been allowed a pension for the y	has never married since his death aforesaid, that she became at Georgia is her home and she resided in this State 23d divided in any other State or locality since that date. I have a reading February 15th, 1893, and now apply for the state of the state
army as a soldier, and that she lating wife in the year 1852; that of December, 1890, and has not been allowed a pension for the yellowance provided by law for the	has never married since his death aforesaid, that she becan at Georgia is her home and she resided in this State 23d d lived in any other State or locality since that date. I have year ending February 15th, 1893, and now apply for the year ending February 15th, 1894.
army as a soldier, and that she lass wife in the year 1852; that of December, 1890, and has not been allowed a pension for the yellowance provided by law for the Sworm to and subscribed before	has never married since his death aforesaid, that she becan at Georgia is her home and she resided in this State 23d d lived in any other State or locality since that date. I have year ending February 15th, 1893, and now apply for the year ending February 15th, 1894.
army as a soldier, and that she lass wife in the year 1852; that of December, 1890, and has not been allowed a pension for the yellowance provided by law for the Sworm to and subscribed before	has never married since his death aforesaid, that she becan at Georgia is her home and she resided in this State 23d d lived in any other State or locality since that date. I have year ending February 15th, 1893, and now apply for the year ending February 15th, 1894.
rmy as a soldier, and that she lass wife in the year 1852; that f December, 1890, and has not seen allowed a pension for the y flowance provided by law for the Sworm to and subscribed befor	has never married since his death aforesaid, that she becan at Georgia is her home and she resided in this State 23d d lived in any other State or locality since that date. I have year ending February 15th, 1893, and now apply for the year ending February 15th, 1894.

9 12 1	Certificate of Ordinary of the County of Applicant's Residence.
STATE OF GEORGIA, County of De Hall	S / MOISHOU NOW OF THE PROPERTY OF THE PROPERT
1, Ordinary in and for said County of	STATE OF GEORGIA County of Tellalle
State of Geo. ia, hereby certify that I am acquainted with Mrs.	I, M. Ragddale Ordinary in and for said County of
Laclic Cainey the applicant for a pension in this case, and	State of Georgia, hereby certify that I am acquainted with Mrs.
know, from my own knowledge, (or from positive proof presented to me by reputable witnesses),	Sallie Rainey the applicant for a pension in this case, and
that she resides in this County, and that she resided in the State of Georgia on December 23,	know from my own knowledge (or from positive proof presented to me by reputable wit-
1890 and has not lived out of the State since that date. That she is the widow of	nesses), that she resides in this County, and that she resided in the State of Georgia on
John J. Roiney deceased, and as such has heretofore been allowed a	December 23, 7890, and has not lived out of the State since that date. That she is the
pension for the year ending February 15th 1892.	widow of Mainey deceased, and as such has heretofore
In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the	been allowed a pension for the year ending February 15th, 1894.
day of help 1893.	In Witness Whereof, I have hereunto set my hand and affixed the seal of my office,
Illi Repole a Ordinary.	this, the day of Cheb 1895.
	{mil} Majordace, Ordinary.
POWER OF ATTORNEY.	
TOWER OF ATTORNET.	POLYKER OF ACTION NEWS
() () () () () () () () () ()	POWER OF ATTORNEY.
STATE OF GEORGIA, Takall County.	T 1 11
KNOW ALL MEN BY THESE PRESENTS, That I, Salliella sieg	STATE OF GEORGIA, Dekall County.
of De Kall	KNOW ALL MEN BY THESE PRESENTS, That I, Sally Raines
County, in said State, do hereby appoint	
ofmy true and lawful attorney in fact, for	County in said State, do hereby appoint R & Chemist
me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affi-	ofmy true and lawful attorney in tact, for
davit: hereby authorizing my said Attorney to receipt in my name for any Warrant that may be	me, and in my name, to receive and receipt for whatever amount of money I may be en- titled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the
issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.	foregoing affidavit hereby authorizing my said Attorney to receipt in my name for any
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this / he w	Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.
day of	IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
- Sully Ruiny [L.S.]	day of pare 1895. Sally Rainer [L. S.]
Executed in the presence of us:	
I I the mut pp	Executed in the presence of us:
mand a me from from and be de in office and an amount manner.	2. v. lehesunt
DIRECTIONS.	Jan, Gosa
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TEMETOFORE PAID. 1893. 1893. PAID TO WE RECEIVE COUNTY. AND HANDED TO AND H	THOSE HERETOFORE PAID. 1895. PAND TO WARRANT ISSUED WARRANT ISSUED WARRANT ISSUED AND HANDED TO TO THE PAND TO TH

For Widows' Heretofore Allowed Pensions.

County of Do Rull	Sallie Rainey
	is a bona fide resident of said County of
+4	ate of Georgia, and that she has resided in said State
	18.3.2 That she is the Widow of
deline since re- grace	18.2.2 I hat she is the Widow o
of the 38	who was a Soldier in Company
or and	Regiment of The Control
	nt on or about the month of Arefeed L
18. C. M. N. N. S. C. C. C. M. N. M.	
	of Marien 1865 (State here
full particulars of the husband's death, when	
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	aid deceased soldier during his service in the army
	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 of	or locality since that date. I have been allowed a
1890, and has not lived in any other State of	or locality since that date. I have been allowed a 1892, and now apply for the allowance provided by
r890, and has not lived in any other State of	1892, and now apply for the allowance provided by
pension for the year ending February 15th, 1893 Sworn to and subscribed before me, this	1892, and now apply for the allowance provided by .
pension for the year ending February 15th, 1 law for the year ending February 15th, 1893 Sworn to and subscribed before me, this	1892, and now apply for the allowance provided by Sally Ruises.
pension for the year ending February 15th, 1 law for the year ending February 15th, 1893 Sworn to and subscribed before me, this	1892, and now apply for the allowance provided by Sally Ruises.
pension for the year ending February 15th, 1893 Sworn to and subscribed before me, this Thirtd day of Neth 1893 M. J. Chem. T. Bridnary	1892, and now apply for the allowance provided by Sally Raines. Post-office
pension for the year ending February 15th, 1893 Sworn to and subscribed before me, this Michael day of Neth 1893 Reference Fordinary	1892, and now apply for the allowance provided by Sally Ruises.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,	Personally Comes Mrs.
County of Dekall	Sallie Rainey
Control of the state of the sta	
who being sworn, says on oath, that she is a bona	fide resident of said county of
The State of Georgie	a, and that she has resided in said State
continuously ever since at her life	1828 That she is the Widow of
A & Raine	who was a Soldier in Company
A of the Thirty Eight Re	egiment of Georgia
Volunteers, that he enlisted in said Regiment on o	r about the month of defet
186/ and served in the Army up to feel, 5	That he lost his
life on the thirty wight day of	
full particulars of the husband's death, when, where	
Died in Prison at	Point Faskout
of Chronic Diarakoe	a
	Secretary and the secretary an
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Deponent swears that she was the wife of said dece	and antidian dust 1.5
army as a soldier, and that she has never married sin	
his wife in the year 1852, that Georgia is her hom	
of December, 1890, and has not lived in any other S	
been allowed a pension for the year ending Februa	
allowance provided by law for the year ending Febru	
	ary 15th, 1895.
Sworn to and subscribed before me, this	Sally Rearing
R. S. Chemit Redinary. Post-	
Post-	office Jucker ha

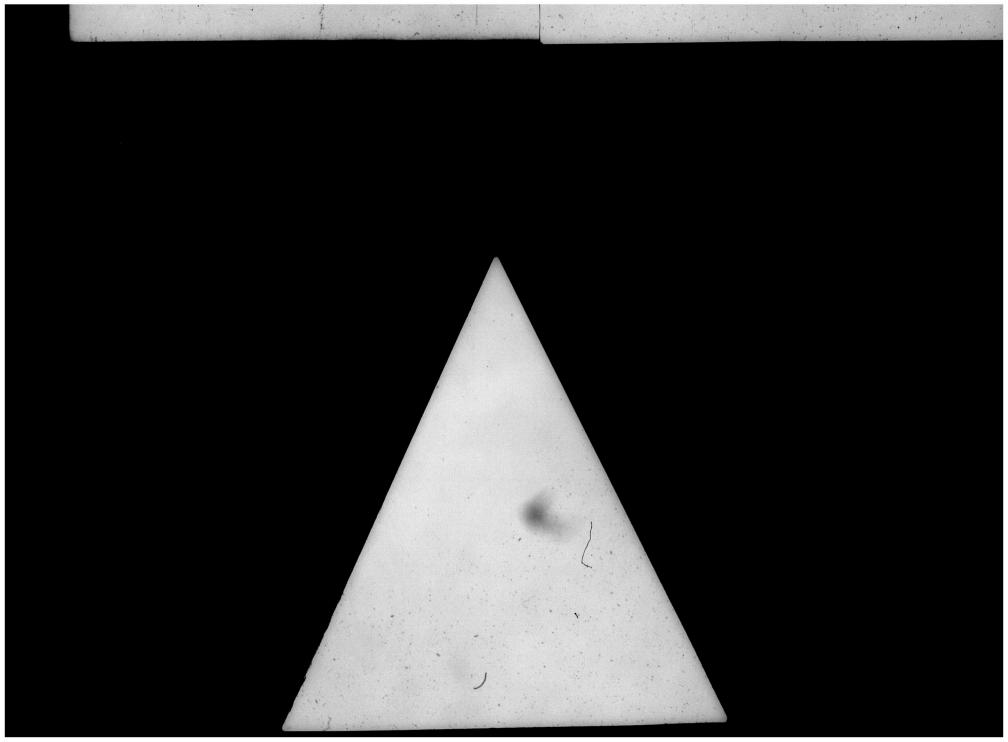
STATE OF GEORGIA, County of De Kall STATE OF GEORGIA, County of Ne Kalk M Magsdace Ordinary in and for said County of In MM Kagadice. State of Georgia, hereby certify that I am acquainted with Mrs. State of Georgia, hereby certify that I am acquainted with Mrs. know from my own knowledge (or from positive proof presented to me by reputable witnesses,) that she ...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 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 11/11. Aliney 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 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 (SEAL) MANKagodace. POWER OF ATTORNEY. POWER OF ATTORNEY. STATE OF GEORGIA, Se Mali STATE OF GEORGIA, Dollack I, Suity Perincy hereby authorize the S. Cherren. Mrs Sallie Rainey hereby authorize N. C. Loga of - Suid Court to receive and receipt for the pension paid hereon and request to receive and receipt for the pension paid hereon and request that he remit same to. IN WITNESS WHEREOF, I have hereunto set my hand and seal, this of COL IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 3d day of He bunky Sally Pearing [1.8.] sally Paricey [in] Executed in the presence of Imarida,), Chomis 9. 8. Chemust IDOM'S PENSIO No. 282 3 OW'S PENSIO

OI. MINOMO HELENAIRE WHOMEN I empirity

STATIOF GEORGIA, Dersonally Comes Mrs.
County of Gekielh Saly Kainey
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 eyer since will her life 18 That she is the Widow of
John of Millinery who was a Soldier in Company
of the Hill Cight Regiment of Girly in
Volunteers, that he enlisted in said regiment on or about the month of Sefeline he
1861 and served in the Army up to his Death 1864 That he lost his
life on the day of Scholar here (State here
full particulars of the husband's death, when, where and from what cause.)
Schunder 1864 in Plison at
Point Tookout. of Chronic
Tiarria .
, which is the second of the s
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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, 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
Tekall 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
filst day of Feb 1896. Sally Sediney
Sworn to and subscribed before me, this first day of Feb. 1896. Post-office July Pedinary. Post-office July Pedinary.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,	Personally Comes Mrs.
County of De Noch	Laccie Raine
who being sworn, says on oath,	that she is a bona fide resident of said county of
De Kalk State of	Georgia, and that she has RESIDED in said State
continuously ever since geller lip	
lo final de la company	That she is the widow of
John y. Raincy	who was a Soldier in Company
이번 보고 있는데 이렇게 되었다면 하는데 살아보고 있는데 그 사람들이 되었다면 그 사람들이 되었다면 하는데 그 사람들이 되었다면 하는데 그 사람들이 되었다면 하는데 그 사람들이 되었다면 그 사람들이 그	Regiment of 2
Volunteers, that enlisted in said regiment on or about the	
186and served in the Army up tolife on theday of	ly 186 3 That he lost his
life on the day of	Le hr 1864 (State hand
full particulars of the husband's death, when, where and fro	를 맞는 1. 10mm -
He was Captured	m what cause.
1163 and died in &	
Frank Mid. ins	ps 18411.
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Deponent swears that she was the wife of said deceased solo	lier, during his service in the army as a soldier,
and that she has never married since his death aforesaid, the	nat she became his wife in the year 18 52,
hat Georgia is her home and she resided in this St	ate 23d day of December, 1890, and has not
ived in any other State or locality since that date. I	
0 11 11	
)	nding February 15th, 1896, and now apply for
he pension provided by law for the year ending February	15th, 1897.
Swgrn to and subscribed before me, this	The second of the second
38 116	Sally Painey
Mark 1897.	a de la



Ok for 1911		4 Pm	
	d		111
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Confederate Soldier's Application.

UNDER ACT 1910.

County Destall

Regiment Ga Cadella There

Approve

J. W. LINDSEY,
Commissioner of Pensions

CHAS P. BYRD, State Printer, Atla

STATE OF GEORGIA.	Jultou County.
County	Office of the Control
Personally before me comes of W Marson & 99.88 Munich who on oath	as a witness in support of the application of
says that they are freeholders residing in said County and we know J	by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded,
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.)	Jummer of Alleman
owns a Small place with Decatur Fa the sol	1. What is your name and where do you reside? Thomas P. Kimberly;
7 \$4000 CO	24 Hay long and since when have you known B P Rondall the applicant?
BP Randall owns 100cms of Land in Bulley	First Jum in Service about March, 1865,
1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov	3. Where does he now reside, and since whan has he been a bona fide, continuing resident in this
1908? (State it fully by items.) ON House Hal of \$15000	State and how do you know? In DerKalb Co Lee There not beer with lime but Thougans passon to believe he has been in
Suld To Puston A . Sol	Heorgia all the time mee close 5 the way. 4. When, where and in what Company and Regiment did. 13. 5 the way. enlist during
2. When and to whom was it sold or given to? Sold to Gwigoruston	war from 1861 to 1865? (Give date and place) He was in Jose Glemis Combany,
3. What was the price paid or stated to be paid? 10000	was from 1861 to 1865? (Give date and place) He was in Jon Hems Company, by the wild you betain your information of this Service.
5. What disposition was made of the proceeds of the sale? for Sufface	The Company in the service . We were together
6. Was the disposition of this property made in good faith and full values? Was	6. How long within your own personal knowledge did he perform actual military service with
or was it made to obtain a pension? was read.	this Company and Regiment? (give date) thousand the formal surrendered of discharged (give date and place)
Sworn to and subscribed before me, this the Jumayou & Alle Mammet	At Atlante, at Poplar 3 from , in Afr. 04 May 186
	8. Were you personally present at the Surrender? 2400 1 3 1
James Regeorge Ordinary,	9. If not, where were you and how came you there?
of Dikalb County.	Was the applicant personally present with his Command at surregier? I commot sour
· · · · · · · · · · · · · · · · · · ·	11. If not where was he and howecome him there? Congress or and a supply
ORDINARY'S CERTIFICATE.	thing about wes in Confusion Jama of Course Re Courted the fronting as to one for ofer.
STATE OF GEORGIA,	12. When did he leave his Command? The Sunder Where was his Command
Kikalb County.	when he left it? I wrendered of the leave? Just where was his Command when he left it? I wrendered of the leave? Just walks
Janus R. Giorge Ordinary of said County, certify that I know	long was he granted leave? Israefinitely Survice we how do you know
the applicant J. Randal for Pension is the person he represents himself to be and resides in	all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) 1300 au Swas there, and I remember the circumstances
said County. That I also know the witness swearing to the	
service and JW Myssou +1934 Hamus who are freeholders, that	How do you know? Reacute Quest one of the Asldiers these
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	14. What effort did he make to return to his Command and how do you know? No masse
Tax Results of shows that and wife	for return, No more server to be done
value for tax is in 1908 \$ /800 00 for 1909 \$ 3/80 00 for 1910 \$ 3.410 00	15. Was applicant captured as a prisoner. No Ser If so, when and where?
Sworn under my hand and official seal of office this	In what prison was he held? and when released?
James Regionary, Ordinary,	Sworn to and subscribed before me, this the 4 P King land
NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words	22 day of Octo 1910
"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 efficient may be attached if blank angers are insufficient.	John Wellmson Ordinary
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 freehaldes unnecessary.	of Fullan County.

What property, if any, has been sold or given away by the applicant or his wife since 4 Nov
What property, if any, has been sold or given away by the applicant or his wife since 4 Nov
When and to whom was it sold or given to?
What was the price paid or stated to be paid?
What relation is the party to applicant?
What disposition was made of the proceeds of the sale?
Was the disposition of this property made in good faith and full values?
made to obtain a pension?
vorn to and subscribed before me, this the day of
ofCounty.
ORDINARY'S CERTIFICATE.
Thurson Ordinary of said County, certify that I kno
nty. That I also know the transfer to be and resident to the and resident to the transfer to the witness swearing to the wine are freehelders, the
all residents of said County and were duly sworn by me before signing the foregoing affidavit an all truthful and trustworthy and their statements are entitled to full faith and credit. That it is allows that and will be of the same and will be
tax is in 1908 \$

00 A

Georgia, DeKalb County.

Personally appeared before me, the undersigned, the Ordinary in and for said county, B. P. Randall, and being first drly sworn, deposes and says on oath, that the property shown on the Tax Books of DeKalb County, returned by him as agent, is not his property but is the property of his children, and returned by him as agent for them.

Sworn to and subscribed before.me,

this the 9th day of November, 1910.

James R. Giorge Ordinary.

NAME Randell, Bushrod P

YMAR 1911

COUNTY DeKalb.

WE EN AND WHERE BORN? Jan., 1846. (64 years)

WILSEED WHEN AND WHERE? 1864.

BOTH

leter in------ Artillery.

MANUE OF CAPTAIN AND COLONEL?

WCUMDED?

CAP FURED. WHEN AND WHERE?

PELEASED.

WHEN AND WHERE SURRENDERED? May 1865.

Witness states;

Poplar Springs, Georgia.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED,

WI INESSES.

Thimas P. Kimberly- Wase with applicant-Robett L. Rodgers- Same commandNo data.

ORDINARY'S CERTIFICATE

NOTES:	before si are entit Swc	person s on the Tha	STATE L L know M
1. Before "You ' you say Additio 2. Additio 3. All aff 4. Only w 5. Attach reputat 6. Widows service	gning the ded to furn under MAL.)	he repres	Se E Cone
any questions do solemnly si ll give wll be mal affaivits must t idavits must li idows who ma certified copie ion, of Disabled because he i	e respective ull faith and r my hand		MARCH RESTA
are answer that the truth. The truth the truth may be at he made brief s of marris of	affidavit credit. and offi	30	is y
reced the Ordlyou will true So help you G So	s, and that cial scal of	d that she is	
	office th		COUNTY. Ordinary of said Cou
	truthful	hoth of	0
plicant an h of the h of the cient, of residen bd. prove ma hank and the circle to do	and tr	inuing r	rdinary :
d the with questions ree. rriage, by trate and I so.	ay of 1	esident o	of said C
LE Per OF	The gall	of said C rriage, a rere duly	ounty, d
and the even of husl	neir staten	ounty and I also worn by	of said County, do certify t
	1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following You do solembly aware that, you will true answers make to each of the questions asked you and the you shall give will be the truth. So belly you God." 2. Additional affidavits may be attached if blank spaces are immediately. 3. All affidavits must be made before the Ordinary of the county of residence. 4. Only vidous who married prior to first January, 1881, are certified, powe marriage, by some person, or by freprintion, Disabled Pensioners must use the Blue Application Blank and state and prove full term of hu service—because he made no proof of service and was not required to do so.	signing the respective affidavits, and that they are trutiful and trustworthy and titled to full faith and credit. **Author and the state of office this.** **L. Defore any questions are namerical the Ordinary shall swear applicant and the witness in the "You do solven!" a there you will remain a make to cache of the questions asked you "You do solven!" a there you will not an aware make to cache of the questions asked you "You do solven!" a there was a state of the same of the courty of residence. **Author and the force the Ordinary of the courty of residence. **Author ortified copies of marriage license if obtainable. If not, prove marriage, by some per the properties. **Author ortified copies of marriage license if obtainable. If not, prove marriage, by some per the properties. **Author ortified copies of marriage license if obtainable. If not, prove marriage, by some per the properties. **Author ortified copies of marriage license if obtainable. If not, prove marriage, by some per the properties. **Author ortified copies of marriage license if obtainable. If not, prove marriage, by some per the properties. **Author ortified copies of marriage license if obtainable. If not, prove marriage, by some per the properties. **Author ortified copies of marriage license if obtainable. If not, prove marriage, by some per the properties. **Author ortified copies of marriage license if obtainable. If not, prove marriage, by some per the properties. **Author ortified copies of marriage license if obtainable. If not, prove marriage, by some per the properties. **Author ortified copies of marriage license if obtainable. If not, prove marriage, by some per the properties. **Author ortified copies of marriage license if obtainable. If not, prove marriage, by some per the properties. **Author ortified copies of marriage license if obtainable. If not prove marriage license if obtainable. **Author ortified copies of marriage license if obtainable. If not prove marriage license if obtainable. **Author ortified co	Fig. 1914. The same that she is a bona fide continuing resident of said of the foregoing were dultive affidivits, and that they are trutiful and trustworthy and that they are trutiful and trustworthy and that and credit. The same are answered the Ordinary shall sever applicant and the witness in the trust that you will true answers make to each of the questions asked you will be the truth. So help you fold. The same that you will true answers are insufficient to the same that you will true answers are insufficient. The same that you fold. The same that you fold you fold you said the country of residence. The same that you fold you fold you said the said that and state and prove full the foreigners must use the Blue Application Blank and state and prove full the made no proof of service and was not required to do so.

Byrd Printing Co., State Printers, Atlanta-

on the	day of also know &	Hmas	en 19	1.7.	witness as to	marriage, and I als	ıo kr
				hat both of	the foregoing	were duly sworn	by
	ing the respective I to full faith and		d that they	are truthful	and trustwor	thy and their stat	eme
Sworn - (SEA	under my hand	and official s	eal of office	this 7	Plan	Tel Ordinar	19/ _v
, tony	<i></i> ,		0	Č	Ze N.	201	unty
NOTES, 1					licant and the v	den and the Mallanda	-
	Before any questions 'You do solemnly so	the truth. So hel	ill true answe lp you God.''	rs make to cacl	of the question	ns asked you and the	evide
	"You do solemnly sw you shall give will be Additional affidavits All affidavits must b Only widows who ma Attach certified copies	the truth. So hel	ill true answe lp you God.''	rs make to cacl	of the question	ns asked you and the	evide
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2. 3. 4. 5.	"You do solemnly sw you shall give will be Additional affidavits All affidavits must b Only widows who ma Attach certified copies reputation. Widows of Disabled	vear that you we the truth. So he may be attached be made before rried prior to first of marriage literature.	ill true answe lp you God." I if blank spa the Ordinary est January, 1 cense if obtain use the Blue	ces are insuffic of the county o 881, are entitle nable. If not, Application Bl.	of the question ient. f residence. l. prove marriage, ank and state an	ns asked you and the	gene
2. 3. 4. 5.	"You do solemnly sw you shall give will be Additional affidavits All affidavits must b Only widows who ma Attach certified copies reputation. Widows of Disabled	vear that you we the truth. So he may be attached be made before rried prior to first of marriage literature.	ill true answe lp you God." I if blank spa the Ordinary est January, 1 cense if obtain use the Blue	ces are insuffic of the county o 881, are entitle nable. If not, Application Bl.	of the question ient. f residence. l. prove marriage, ank and state an	ns asked you and the	gene
2. 3. 4. 5.	"You do solerinly sw you shall give will be Additional affidavits nust b Daly widows who ma Attach certified copie- reputation, Widows of Disabled service—because he n	vear that you we the truth. So he may be attached be made before rried prior to first of marriage literature.	ill true answe lp you God." I if blank spa the Ordinary est January, 1 cense if obtain use the Blue	ces are insuffic of the county o 881, are entitle nable. If not, Application Bl.	of the question ient. f residence. l. prove marriage, ank and state an	ns asked you and the	gene
2. 3. 4. 5.	"You do solemnly sw you shall give will be Additional affidavits All affidavits must b Only widows who ma Attach certified copies reputation. Widows of Disabled	vear that you we the truth. So he may be attached be made before rried prior to first of marriage literature.	ill true answe lp you God." I if blank spa the Ordinary est January, 1 cense if obtain use the Blue	ces are insuffic of the county o 881, are entitle nable. If not, Application Bl	of the question ient. f residence. l. prove marriage, ank and state an	ns asked you and the	gene

State of Georgia, Lekalb County.

To any Minister of the Gosmel, Judge of Superior Court Justice of Peace to Celebrate:

You are hereby authorized and permitted to join in the Honorable State of Matrimony Bushrod P. Randall and Miss Caroline E. Mason, 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 of office this 6th day of July 1871.

W. R. Webster, Ordy .

I hereby certify that Bushrod P. Randall and Caroline E. Mason were joined together in the Holy Bans of Matrimony by me on 6th day of July 1971.

John S. Wilson, D. D.

Georgia, Lekalb County.

I, James R. George, Ordinary and ex-officio Clerk of the Court of Ordinary in and for said County, do hereby certify that the above and foregoing cooy, is a true, correct and complete copy of the marriage licenseand certificate of marriage of Bushrod P. Randall and Miss Caroline E. Mason, as appears of record in Book "B", Record of Marriages, Page 368.

In Witness Whereof, I have hereunto set my hand and affixed the seal of said Court of Ordinary at Decatur, Georgia, this the 26th day of August, 1919.

rothery & ex-official elerk Coart Ordinary in and

STATE OF GEORGIA,
DEKALB COUNTY.
Personally before me comes
who, after being duly sworn, says that she is the widow of Bushred R. Bandall
to whom, in the County of LeKalh State of Georgia she was married on
the_Sthday of_July1871,, and that she remained his wife, and resided with him to the
date of his death in May 9th19.15 and that she has not since his death remarried. At
the time of his death he was a resident ofRekalbCounty, in said-State
of Georgia, and he was on theInd1gentPension Roll of the State and paid a pension
of \$60.00 in Devalb County for 1915 per annum, on account of being a soldier in
Company Later Glengia Regiment (Volunteers or State Militia)
That she is now a bona fide resident citizen of said County ofand she
has so continuously resided since 2th day of MAY 1945.
Sworn to and subscribed before me, this the
Farth day of Angust 19 19 Farth County County County (SEAL)
(SEAL)
Affidavit of Witnesses to Prove Marriage and to Whom.
Date of Death of Husband
STATE OF GEORGIA,
responsible and truthful persons, residing in said County, who after having been duly sworn, say: that
of their own personal knowledge Mrs. Caroline 4. Rancall, who made the foregoing
affidavit, is the lawful widow of Rushing Po Randall
County in said State of Georgia on 9th day of May 1915,
and that she has not since remarried. That she became the wife of Bushrod P. Randall on
the 6th day of July
wife continuously since 6thday of _July1871_, and that the busined P. Dandalla was
the same man who was on the pension roll of said Statefromfrom
Countywhen he died.
Sworn to and anhacribed before me, this the

Sworn to and subscribed before me, this the

James Electron Ordinary

EAL)

Estmason.

POWER OF ATTORNEY.

STATE OF GEORGIA,

		M.	1.14	50
ACT DEC. 16, 1901.		THE EXECUTION OF THE PARTY OF T	Witness m	receive and receipt for
No.		aso Lac	Witness my hand and seal thi	
WIDOW'S PENSION,			eal this	he pension
Mrs Eliza & Ranfin		13	day	pension allowed and request that
Mrs Eliza & Ranking County of De Kall		12	of Diec	F .
Warrant issued 190		in the state of th	by	remit same to.
and handed to			19	
J. W. LINDSEY, Commissioner of Pensions,			1902	
12/6 ~ 190 2		- <u>F</u>		

STATE OF GEORGIA,	
De Kalk COUNTY.	
1. Saylin	hereby authorize
to receive and receipt for the pension allowed and req	
at	
. Witness my hand and seal this day o	of Nec 190 Z.
Executed in presence of	Eliza & Rankinging
Ordinary.	

STO STO	1	S,	J		 		
2 Chi		PENSION	Lengh,	all		LINDSEY,	. Harricon, State Printer.
the		Š	190.	12ch.	2 3	J. W. LIN	ties, W. Harrison,
8 gra	ACT DEC.	WIDOW	Mrs 6	County of	Warrant issued and handed to	,	infer

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA, Personally came Mrs. Eliga 4. Raukin
COUNTY OF De Kalh who says on outh she is the
wildow of J. Maritain to whom, in the County of
State of, she was married on the
23 day of Janey 1857, that she remained his wife up to the 6th
day of OCA 1902, at which time he died, and that she has not since married.
At the time of his death he was a resident of Delle County, in said State of
Georgia, and was on the Juliquest pension roll of the State of Georgia, having been allowed
a pension of 8 60.700 per augum on account of being a soldier in Company
38th Regiment, Ja Volunteers or State
What affliction have you and how does it effect you? I roubled with
Catassh and from weak arm which
has le se troken
What have you been doing to earn a support since 1st of January, 1900?
Lupperted by my diedlen
What property or effects had you on 1st January, 1900? As property at we
The state of the s
What have you acquired since, and what income have you now? Nove
well a black of the well, the well and the second
What disposition have you made of any property since 1st January, 1900, and at what price and for what purpose?
Made no dishosition of my hist
Deponent further says that she is now a resident of Derall County and has
continuously resided in the State of Georgia since the day of Mirel 1854.
She applies for the pension provided by Act of the General Assembly, approved December 18, 1901.
Sworn to and subscribed before me this 5 The day of December 1902.
Eliza of Marilia.
Millas dieco tille

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

AFFIDAVIT FOR THREE WITNESSES Personally came I. C. Counds STATE OF GEORGIA COUNTY OF DE HAM known to me to be reputable and truthful person who says on oath that from his own personal knowledge Mrs. Eliza A Rankin who made the foregoing affidavit is the widow of IJ. Raukin County and State of Georgia day of Och 902 , and that she has not since married, that she became his wife on the 23 day of Jacky 18524 , and so remained up to the time of his death, and that she has resided in this State continuously since the. day of March 1854 With what affliction does she suffer? Grom affects of fractured and coming atrophy of minales What property or income had she on 1st January, 1900? Jove What has she in her possession and control now? Hou How was she supported in 1900 and 1901 , By her chiedren Syora to and subscribed before me this. Mullagedale County, Georgia. PHYSICIANS' AFFIDAVIT. STATE OF GEORGIA, COUNTY OF DE Kall physicians, who say on oath that they personally know Elipa A Kaukin mentioned in the foregoing affidavit, that she is permanently afflicted with (state disease and how it prevents her From ald age and by a fraction the armi causing a Sworn to and subscribed before me this ________

milagodale

Ordinary of De Rull County.

GRRTIFICATE OF ORDINARY OF THE COUNTY OF APPLICANT'S RESIDENCE

STATE OF GEORGIA,	1 MM Kag	y or De Kall	Ordinary,
COUNTY OF De Hall	in and for said Count	y of De Kall	•
State of Georgia, hereby certify that I am	acquainted with Mrs. 6.1	iga A. Rauf	lies
the applicant for a pension in this case, ar			
by reputable witnesses) that she resides in	this County, and that she ha	s resided in the State of Ge	orgia continuously
since theday of Ma	reh .	1857 and has not	
State since that date. I also certify that	the witnesses, to wit:	Colound	
EA Beauchamp	and S. J. Jacks	ow , wh	ose testimony she
presents to sustain her claim, are known	to me to be truthful witne	sses, entitled to full faith a	nd credit as such,
and that the full text of the affidavit was	read to and understood by	them before same was sig	ned. I am fully
satisfied that this claim is made in good	l faith, and I have caused th	e applicant and the witness	ses to read or hear
read the proofs they sign.			
In Witness Whereof, I have hereun	o set my hand and affixed th	e seal of my office, this the	5".
day of De C 1	9024		5
Complete Committee Committee	ma	Rogedaic .	
THAL I	12100	Jenne .	Ordinary.

NOTES

The pension is only payable to those widows whose husbands were on Pension Roll at the time of death. The marriage must have existed at the time husband was a soldier, and the widow must have remained unmarried since the death of such husband.

Proofs by one witness and two physicians will be accepted when it is shown that the same can not be furnished, but in all cases the best proof accessible will be required and it is incumbent on the applicant to make out a clear case covering the above points.

Affidavits must be made in presence of the Ordinary.

STATE OF GEORGIA,

J. County. STATE OF GEORGIA, COUNTY, Selia . A. Rankin , hereby authorize Raukin of Dekall Courty to receive and receipt for the pension paid hereon, and request that he remit same to to receive and receipt for the pension paid hereon, and request that he remit same to IN WITNESS WHEREOF, I have hereunto set my hand and seal, this..... In Witness Whereof, I have hereunto set my hand and seal, this day of Suusay 1905. Januar/ Eliza A. Marikin Executed in presence of amus Rysorgs
Ordinary WARRANT ISSUED Me Chya a Rantin Rhayped TO FOR YEAR ENDING DECEMBER 31, 1905 anthis WIDOW'S PENSIO WIDOW'S PENSION JOHN W. LINDSEY, Commissioner of Pensic **INDIGENT INDIGENT** For year ending Dec. 31, 1905. JOHN W. LINDSEY.

Commissioner of Pens To Those Heretofore Paid. からい TO THOSE HERETOFORE 224 38" WARRANT ISSUED 1904. 1905. John & Man My Elizar No. Widow of Widow of

ER UF ALIUNNEL

POWER OF ATTORNEY.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	PERSONALLY COMES MRS.
County of Dewall	Eliza a Rankin
A Milai	hat she is a bona fide resident of said County of of Georgia, and that she has RESIDED in said State
continuously ever since Opril 10	
J. D. Pankin	who was a soldier in Company
D of the	38" Regiment of La
Volunteers, that he enlisted in said regiment on o	or about the month of
186 and served in the Army up to	186 That he died
on the 6 day of OCF	1802
	<u> </u>
the year 18 54 I have been allowed an Indigent pension as	s a resident of DESCALL
County, under Act 1900, for the year 1903, and	now apply for the pension provided by law for the
year ending December 31, 1904.	
. Sworn to and subscribed before me,	ED. 1 12 1
this day of Jaury 1904.	Cliga A Panter.
Janiel Helperge Ordinary)	Post Office. Ditte March March Con gran
	James P George
State of Georgia, County.	
	Ordinary of said County, certify that I am well
*	ue, and I know she is the individual she represents
herself to be, and that she has continuously resi	
day of april 18/5	
Given under my official signature and seal,	
~ * * * * * * * * * * * * * * * * * * *	Janua R. George
Omerat A Real A	Ordinary of Destally County

NOTE.—All blanks must be filled.

Vouchers and Affidavits must bear date after January 1st, 1904.

NOTE.—All blanks must be filled.

Vouchers and Affidavits must bear date after January 1st, 1905.

STATE OF GEORGIA, County of Listals	Clinau Tan Min
11.01-1	that she is a bona fide resident of said County of leorgia, and that she has RESIDED in said State
continuously ever sinec	. That she is the Widow of
) Do Panstin	who was a soldier in Company
. 0 D of the 38	Regiment of 95
Volunteers, that he enlisted in said regiment on or a	
186, and served in the Army up to	186 That he died on
theday of	18
	for the state of t
9 21	the state of the s
	* * * * * * * * * * * * * * * * * * * *
soldier, and that she has never married since his de the year 18 I have been allowed an Indigent pension as	
County, under Act 1900, for the year 1904, and now	
year ending December 31, 1905.	
* Sworn to and subscribed before me,	51
the // day of Jany 1905.	Eliza Panterni.
James Refleres ordinary.	Post-Office Stree Brown town
promote for grandery.	Post-Olice OFF
State of Georgia,	Janus P. Jus
County.	Ordinary of said County, certify that I am well
acquainted with Mrs. aligae 1 Tel	
am satisfied that the facts therein stated are true, a	
herself to be, and that she has continuously resided	in this State since the
day of18	
Given under my official signature and seal, th	is the // day of facily 1905.
(Official)	anux of heave
Seal.	nary of Deffeel County.

TAN TUNIARIT RIDARD HREETALAKE VERARED I BROIARD.

POWER OF ATTORNEY.

STATE OF GEORGIA,	
71, Mar & A Routin	, hereby authorize
John S. Rankin of St	Tone Mountain 4a
to receive and receipt for the pension paid hereon.	and request that he remit same to
Mon & & Ranking at S	love Mountain &
In Witness Whereof, I have hereunto set my h	and and seal, this /0 //
day of January 1906.	& BARankon [L. S.]
7 Executed in presence of	1
James R George	
Ordinary	1
Cordinary	

WIDOW'S PENSION,

For year ending Dec. 31, 1906.

my & and an

INDIGENT

To Those Heretofore Paid.

1906.

the

No.

WARRANT ISSUED / 22-1906,

Commissioner of Pensions.

JOHN W. LINDSEY,

Regiment.

Widow of

Any HANDED TO

antein, E

7 y Jaca,

POWER OF ATTORNEY.

STATE John to receive	and receipt fo	Ran Rank r the pens	of_ ion paid h	Slow record and record	quest that	he pemit sa	rga
day of	a Ran Witness When			Stour at my hand an		s //*	[t. s.]
Jani	Executed in Cond	presence of	4	e d			2
County ore Paid.	2.	ENSION,	c. 31, 1907. Rau Kin	B. County, Raw Kin	LINDSEY, Commissioner of Pensions.	Suep 1907.	INTER, ALLANTA.
To Those Heretofore Pa	No 2 Ca	OW'S PENS	For year ending Dec. 31, 1907 PAID TO PAID TO PAID TO PAID TO PAID TO THE PAID	KAL.	JOHN W. LINDSEY	WARRANT ISSUED	GEO. W. HARRISON, STATE PER
21			For	Widow of	3		7

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	PERSONALLY COMES MRS.
New 11	that she is a bona fide resident of said County of Georgia, and that she has RESIDED in said State
continuously ever since	That she is the Widow of
A & Kankin	who was a soldier in Company
D. of the 38 Hear gr	
Volunteers, that he enlisted in said regiment on o	
186, and served in the Army up to	186 That he died on
theday of	18
	*
the year 18 I have been allowed an Indigent pension	
	ow apply for the pension provided by law for the
year ending December 31, 1906.	
Sworn to and subscribed before me	Mw. E & Buck in
this day of distant 1906.	
auch Rydorga, ordina	Post Office Stone Mountain la
)	James H. George
State of Georgia	
County.	Ordinary of said County, certify that I am well
acquainted with Mrs. Cliza UNa	nkin, who made the above affidavit, and
am satisfied that the facts therein stated are true	e, and I know she is the individual she represents
herself to be, and that she has continuously resid	led in this State since the
day of18	/ /
Given under my official signature and seal,	this the day of Janny 1906.
Official Saal	ordinary of the County.
)

NOTE.—All blanks must be filled.

Vouchers and Addavits must bear date after January 1st, 1906.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	PERSONALLY COMES MRS.
County of DeKALB.	Eliza A. Raukin
DAKALD	th, that she is a bona fide resident of said County of of Georgia, and that she has resided in said State
continuously ever since.	That she is the Widow of
J. J. Raux	who was a soldier in Company
D. of the 38th ffx	Regiment of
Volounteers, that he culisted in said regiment on	or about the month of
186, and served in the Army up to	186 That he died on
theday of	18
	and the same of th
	eceased soldier, during his service in the Army as a is death aforesaid, and that she became his wife in
the year 18	
I have been allowed an Indigent pension a	s a resident of DEKALB.
County, under Act 1900, for the year 1906, and	now apply for the pension provided by law for the
year ending December 31, 1907.	
Sworn to and subscribed before me	and the state of the same
this // day of Jeerry 1907.	and the second s
and Reverse, Ordinary	Post Office Stone Mountain
State of Georgia,	James R. George
De KALB County.	Ordinary of said County, certify that I am well
	ricking, who made the above affidavit, and
	e, and I know she is the individual she represents
herself to be, and that she has continuously resi	ded in this State since the
day of18	
Given under my official signature and sea	day of free 1907.
(Official)	Jumes George
Or Or	dinary of DeKALB. (County.)
NOTE -All blanks must be filled.	

NOTE.—All blanks must be filled. Vouchers and Affidavits must bear date after January 1st, 1907 Rankin Elin a. (1128.)

1908

Application for Pension Due Deceased Pensioner, Under Act 1904.

James R. George Ordinary, CFOR Funeral Experience of Dekalb County, Of CoD 3.5 LA Regiment.

Approved and Ordered Paid

190_

J. W. LINDSEY,

Commissioner of Pensions.

M. PATTERSON, GENERAL MANAGER

ESTABLISHED 1880.

H. M. PATTERSON & SON

FUNERAL DIRECTORS

96 NORTH FORSYTH STREET

PHONES 217

stelle John & Rangen Hande Com Frank I to Eliza a Panking

Suron to and subscribes Ham Services 1250 Suron to and subscribes Hus Matterns. Services 1250 Orfone Me March 24/908 Janet 12 serve 14/908

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, Dekall County.
Personally before me, the Ordinary of said County, comes
John S. Kanking of said County, who, after being sworn on
oath, says that he knew Mrs Eliza A. Rankin of said County, and
that was on the Judgin Pension Roll Dettall
County at the time of his death, which occurred in Dutalb County,
in this State, on the day of James 1908, and
that a Pension of Juxy 60 Dollars was due and
unpaid at the time of the death. The the left no lilear or dependent children surviving
him, and no estate of any value sufficient to pay in funeral expenses, which amounted to
the sum ofDollars, as per sworn statement,
itemized, hereto attached.
Sworn to and subscribed before me, this
19 day of March 1908 John S. Rauslin
January Ordinary,
County.
Country Country
Georgia, Dekall County. L. Farrest R. Georgia , Ordinary of said County, do certify
0.0 7000
that I personally know the S. Ranking, 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 Mus Eliza A. Rankin while in life;
Pension Roll of Tikall County, and was paid a Pension of
Sixty \$600 Dollars in said County for 1908
and I now believe him to be dead.
Given under my hand and officienseal, this 19 day of March 1908
James R Sebras Ordinary,
Dekall County.

H. M. PATTERBON, SEVERAL MANAGER PREDERICK W. PATTERSON. SECRETARY & TREASURES

ESTABLISHED 1880.

H. M. PATTERSON & SON

FUNERAL DIRECTORS 96 NORTH PORSYTH STREET

BILLS DUE WHEN PRESENTED

John & Rangen Manta Ga. Jan 24
Har Eliza a Rankin

Carket + Hearn & Services 12500 Lypseriles WWW. Hattises.

No Soundy

No INDIGENT PENSION,

1900.

Name J. G. Rankin

County County

Approved 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

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eceive and receipt for the pension showed, and request that he remit same w	1000	S.		
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STATE OF GEORGIA, County. [L. S.] INDIGENT PENSION, Name J. G. Rankin JOHN W. LINDSEY, 1800.

De Rally County, V.
to small blood of the Banks of said State and County, desiring
to avail himself of the Pension Act (Section 1254, Code), hereby submits his proofs, and after being duly aworn true answers to make to the following questions, deposes and answers as follows:
where do you reside ((give State, County and post omoe)
2. How long and since when have you been a resident of this State?
Sixty five years - Single 1835
3. When and where were you born? Dec 11th 1815, aglethirly les.
4. When and where and in what company and regiment did you enlist op serve? Sept 26" 1861
38 th Sa, Country learns Kirkfatrick leaD
8. How long did you remain in such company and regiment? Worked 19th days Sens
8 1864, when I was captured as uncheste V
6. For how long a period did you discharge regular military duty? Quel Mixlone
7. When, where and under what circumstances were you discharged from service? Were you with your
d command at the time? Was parolled from for
Delware at the clase of the war
8. What is your present occupation? Mone Cutter by Kale
9. How much can you earn (gross) per annum by your own exertions or labor? Nothing
10. What has been your occupation since 1865? Alorse Cutter
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
A upon the third, state whether you are totally blind and when and where you lost your sight?
have been smalled to severly and laugho.
I myself.
of the second second
I myself.
13. What property, effects or income do you possess, and its gross value?
13. What property, effects or income do you possess, and its gross value? \\ 14. What property, effects or income did you possess in 1894, 1895, 1896, 1897, 1898 and 1899, and
13. What property, effects or income did you possess, and its gross value? 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? 15. In what County 154 you reside during those years, and what property did you then return for taxation?
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STATE OF GEORGIA,	STATE OF GEORGIA,
COUNTY.)	De Pall COUNTY of
J. Mells for said State and County, having been presented	Personally came before me emas & summey he and
as a witness in support of the application of	D. Raymond Wells, M. D. , both known to me as reputable physicians
deposes and answers as follows:	ospaid County, who, being severally sworn, say on oath that they have examined carefully
1. What is your name and where do you reside? It I fello	J. C. Cassilin , applicant for pension under Section 1254, Code, and after
Stone Mondain De Kall les.	such personal examination say that his precise physical condition is as follows:
2. Are you acquainted with J. Kankin , the applicant; if so,	Being Eighty four years of as
how long have you known him? Tes How Brown him for 40 years	he is weath and physically
3. Where does he reside, and how long and since when has he been a resident of this State?	7
Ar Stone Monntain Ou do my knowledge for xo year	mable to do markuel lahor
4. When, where and in what company and regiment did he enfist, and how do you know?	
In 1861 At Camp Kisppatricka lev. D. 38 Ba. Kac there.	
5. Were you a member of the same company and regiment? I was	They further say on oath that the physical condition of applicant renders him unable to labor at
6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? Were you present with con-	any work or calling sufficient to earn a support for himself, and that we have no interest in said pension
mand when discharged! Oor orger three years until	being allowed.
Explored in Sept 1864. made a good	Sworn to and subscribed before me, this the Ohus. K. Dun -
sildels and was parolled from Came	22 day of duy, 1900. & Raymontheils m
Delaware at close of war	The state of the s
7. What property, effects or income has the applicant? (Give your means of knowledge.)	TO, TOO GOTTALE Ordinary.
Has none for any meome. I am	ORDINARY'S CERTIFICATE
a neighbor and have lived near him sine &	
8. What property, effects or income did the applicant possess in 1896, 1897, 1898 and 1899, and what	STATE OF GEORGIA,
disposition, if any, did he make of same? True, make see	Le Kalk COUNTY.
dishosihin is and	1. M. Kaplage , Ordinary in and for said County, hereby certify
9. Has be conveyed away any of his property in the dist four years, if so, what was it, and to whom?	that the applicant J. Cankin resides in said County, and line
Has more	been a bona fide resident of this Stary since the day of in 35.
10. What is the applicant's occupation and physical condition? De was from	and that the witnesses, viz: Tea R. Wells
old age being Eighty fores years	•
old hid is Sow mable to be any work.	are of trustworthy character, and that their statements are entitled to full faith and credit.
11. Is the applicant unable to support himself by labor of any sort, if so, why?	I further certify that before answering the foregoing questions the applicant and each witness took
he is malle, I do any ling on	the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witness
account of in age	before same was signed.
12. Now was he supported during the years 1898 and 1899? He is supplied	I further certify that the tax digests of Actalh County show that applicant
by his two sons	returned for taxation in his name in 1898 / Dollars
13. What portion of his support for these two years was derived from his own labor or income?	of property, and in 1899 / WWC Dollars of property.
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension	In my opinion the foregoing claim is made in good faith,
under Section 1254, Code? Al worth	Witness my hand and seal of office, this 22 day of day of 1900.
on secount of age and infrinity.	Maplace Ordinary,
	of De Kach County
15. What interest have you in the recovery of a pension by this applicant?	NOME.
Sworn to and subscribed before me, this)	 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 Ged."
the 13" day of ling 1900. Witness.	you Ged." 2. Additional affidavits may be attached if blank spaces are insufficient
March later	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.
Ordinary.	

POWER OF ATTORNEY. POWER OF ATTORNEY. STATE OF GEORGIA, COMINTY. STATE OF GEORGIA, De Lack County. hereby authorize_ of Sellath to receive and receipt for the pension allowed and request that he remit same to null at Stone Manutain In to receive and receipt for the pension allowed and request that he remit same to Witness my hand and seal, this 19 day of Xauce Witness my hand and seal, this... O (Andi kin [L. s.] Executed in presence of Executed in presence of SOLDIER'S PENSION OHN W. LINDSEY, JOHN W. LINDSEY, WARRANT HANDED TO VARRANT ISSUED INDIGENT INDIGENT WARRANT ISSUED

For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA, personally appears Shull Naural of Me Mals County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever since the 10 day of april 1835; that he is 85 years old and by occupation a shirte butter 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 3 421. 45 9 Months Company 00, of 3 8 th Regiment Derrigg ; that his physical condition is as that his property consists of the following items 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, 1594, 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 dy Routin county-been allowed a pension for the year 1 Sworn to and subscribed before me, this the May of an STATE OF GEORGIA. County. He Kull 1. 1112 Magadace Ordinary of said County, do certify that I am well acquinted with I. C. Manthim

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

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

Given under my official signature and seal, this

day of fan 1901. 1901. Opedage Ordinary De Stalle

and that he resides in this County.

Note - The I fank spaces must be filled.

Note: Affidavit should not be attested before January 1st, 1901.

STATE OF GEORGIA. Le Hall County. Personally appears & Mankin 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 10 day of April 18/5; that he is 86 years old and that he enlisted in the military service of the Conby occupation a____ federate States (or of the State of during the war between the States, and served for the term of 3 Leave in Company D, of 38 th Regiment of La Val ; that his physical condition is as follows: It id age and onfirmity that his property consists of the following items ITM 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 Allach county been allowed a pension for the year 190/1 Sworn to and subscribed before me, this the Maysdaig STATE OF GEORGIA, County. M. M. Rogsdele & Predinary 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 /3 County. Nork.—The blank spaces must be filled.

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

NAME Rankin, J.G.

YEAR 1901 COUNTY DeKelb

WHEN AND WHERE BORN? December 11th. 1815 Oglethorpe Co. Ga.

ENLISTED WHEN AND WHERE? September 26th. 1861 DeKalb Co. Ga. Camp Kirkpatrick

RANK.

COMPANY AND REGIMENT? Co. D, 38th. Regt. Ga. Vols.

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHENE? September 19th. 1864 was captured at Winchester, Va. carried to Fort Deleware prison.

RELEASED. Close of the war.

WHEN AND WHERE SURRENDERED?

IF NOT FRESENT AT SURRENDER, WHERE WERE YOU? In prison

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. George R. Wells, same command - No data.

ORDINARY'S CERTIFICATE

No. 1 Sage	NOTES	before are en S:	on the	STATE L know M
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.	i: 1. Before any questions (**You do solution) (**You do solution) (**You sail by solution) (**You sail by solution) (**You sail by solution) (**You sail by solution) (**You sail affakevit most solution) (**You sail solu	before signing the respective affidavits, and the are entitled to full faith and credit. Sworn under my hand and official scal (SEAL)	nät I also know	BEAN MAN
Name Mary Jone Rowlins Widow of W. Sa Rowlins	are answered the Ordinary ear that you will true assay the truth. So help you food. You have the truth. So help you could be a made before the Ordinary ried prior to first January, so of marriage liceness if obtain the company of the truth of the Blande no proof of service and made no proof of service as	affidavits, and that the credit and official scal of of	d Brysn	A. COUNTY. Ordinary of said County, do certify the County of said County, do certify the Applicant for this pension, and that she is the continuing resident of said County and that she is a bona fide continuing resident of said County and that she is a bona fide continuing resident of said County and County
Company Regiment Leus Bask Approved	shall swear applers make to each cases are insuffic of the county of 1881, are entitled inable. If not, 1 e Application Bld was not requir	and that they are truthful and trustworthy all scal of office this 26 day of A	Mac_witness; that both of the for	Cthe applicant for the
	witness in the ons asked you ons asked you , , by some per , by some per , and prove full	and their	eess as to marriage, and I also foregoing were duly sworn l	Ordinary of said County, do certify the applicant for this pension, and that she bona fide continuing resident of said County and
J. W. LINDSEY, Commissioner of Pensions.	following viand the every sape, or by g term of husl	ordinary.	d I also sworn b	rtify t

Byrd Printing Co., State Printers, Atlanta.

10-30-1919

I, JOHN	1 Phope	wine th		y of said County, o	
person she represents he	erself to be, and t	hat she is a bon	a fide continuing	resident of said	County and was
on the day o	0				
That I also know	1113	ywn	lu witnes	ss as to-marriage,	and I also know
				oregoing were dul	ly sworn by me
before signing the respe	ctive affidavits. 1				
are entitled to full faith					
			20	day of BC	10/9
Sworn under my l	and and official	seal of office	week M	lay or Det	
(SEAL.)	, -	Has	nue jes	tange	Ordinary.
		0		tustal	County.
			-11	and the witness in th	a following words:
Norman 1 Defense and our	utions are answered				
you shall give w	all be the truth. So	will true answers help you God.''	make to each of th	e questions asked you	u and the evidence
"You do solem you shall give w 2. Additional affic 3. All affiday is 1	only swear that you cill be the truth. So lavits may be attack must be made befor	will true answers help you God.'' hed if blank space to the Ordinary of	make to each of the s are insufficient, the county of resid	e questions asked you	u and the evidence
"You do solem you shall give w 2. Additional affic 3. All affidavits r 4. Only widows w 5. Attach certified reputation."	anly swear that you rill be the truth. So lavits may be attach must be made befor he married prior to copies of marriage	will true answers help you God." hed if blank space ee the Ordinary of first January, 188 license if obtaina	make to each of the s are insufficient, the county of resided, are entitled, ble. If not, prove t	ence.	u and the evidence
"You do solem you shall give w 2. Additional affife 3. All affidavits r 4. Only widows w 5. Attach certified reputation: 6. Widows of Dis.	anly swear that you rill be the truth. So lavits may be attach must be made befor he married prior to copies of marriage	will true answers help you God." hed if blank space the Ordinary of first January, 188 license if obtaina ust use the Blue A	make to each of the s are insufficient, the county of resided, are entitled, ble. If not, prove the application Blank an	e questions asked you ence. narriage, by some per d state and prove full	u and the evidence
"You do solem you shall give w 2. Additional affife 3. All affidavits r 4. Only widows w 5. Attach certified reputation: 6. Widows of Dis.	anly swear that you cill be the truth. So, lavits may be attack must be made befor the married prior to copies of marriage abled Pensioners mu	will true answers help you God." hed if blank space the Ordinary of first January, 188 license if obtaina ust use the Blue A	make to each of the s are insufficient, the county of resided, are entitled, ble. If not, prove the application Blank an	e questions asked you ence. narriage, by some per d state and prove full	u and the evidence
"You do solem you shall give w 2. Additional affife 3. All affidavits r 4. Only widows w 5. Attach certified reputation: 6. Widows of Dis.	anly swear that you cill be the truth. So, lavits may be attack must be made befor the married prior to copies of marriage abled Pensioners mu	will true answers help you God." hed if blank space the Ordinary of first January, 188 license if obtaina ust use the Blue A	make to each of the s are insufficient, the county of resided, are entitled, ble. If not, prove the application Blank an	e questions asked you ence. narriage, by some per d state and prove full	u and the evidence
"You do solem you shall give w 2. Additional affife 3. All affidavits r 4. Only widows w 5. Attach certified reputation: 6. Widows of Dis.	anly swear that you cill be the truth. So, lavits may be attack must be made befor the married prior to copies of marriage abled Pensioners mu	will true answers help you God." hed if blank space the Ordinary of first January, 188 license if obtaina ust use the Blue A	make to each of the s are insufficient, the county of resided, are entitled, ble. If not, prove the application Blank an	e questions asked you ence. narriage, by some per d state and prove full	u and the evidence
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"You do solem you shall give w 2. Additional affife 3. All affidavits r 4. Only widows w 5. Attach certified reputation: 6. Widows of Dis.	anly swear that you cill be the truth. So, lavits may be attack must be made befor the married prior to copies of marriage abled Pensioners mu	will true answers help you God." hed if blank space the Ordinary of first January, 188 license if obtaina ust use the Blue A	make to each of the s are insufficient, the county of resided, are entitled, ble. If not, prove the application Blank an	e questions asked you ence. narriage, by some per d state and prove full	u and the evidence

Received of V. S. Morgan, Ordinary, Dekalb County, Georgia, One Hundred Fifty and no/100 (\$150.00) Dollars in full settlement for funeral expenses of Mrs. Mary Jane Rawlins, deceased.

This V / day of October, 1936.

by R Johnston

Application for Expenses of Last Illness and Funeral

(UNDER ACT OF 1919)

7. D. Margan,	Ordinary
For: My Many John R. (Name of Pensioner)	
Date of Death: Febry 20,, Amount: \$ 197	Kenne and the second
PAID TO ORDINARY ON THIS DATE 1938 FUND FROM WHICH PAID	CLAIM:
10- 10 CKC	15000 1
1/50. TOTAL.	
TOTAL,	
Approved, and ordered pai	d,
A. L. HENSON	2
Director, Veterans Service	

Georgia, DeKalb County.

0

Personally appeared before me, the undersigned, J. W. Beownlee, who being duly sworn, saws on oath: That the record of the marriage of Mrs. Mary Jane Rawlins, formerly Miss Mary Jane Britt, who was married to W. A. Rawlins in GwinnettCounty, Georgia, was destroyed by fire, together with other records of said County, when the Court House at Lawrenevite was burned im 1871, and for this reason it is impossible for her to get a certified copy of the record.

Sworn to and subscribed before me, 2
this the 22nd day of October, 1919.

tames Regionary.

The first of the f
STATE OF GRORGIA, Leftalle COUNTY.
Personally before me comes HMM Many Jane Rowlins of said County,
who, after being duly sworn, says that she is the widow of WA Rawlins
to whom, in the County of Pellalle State of Georgia she was married on
the Al day of Morrison 1869, and that she remained his wife, and resided with him to the
date of his death in They 20 19/2 and that she has not since his death remarried. At
the time of his death he was a resident of Allala County, in said State
of Georgia, and he was on the freshingers 1910. Pension Roll of the State and paid a pension of \$100 in Milato County for 1914 per annum, on account of being a soldier in
N 102
That, she is now a bona fide resident citizen of said County of Allaca and she
has so continuously resided since /845 day of In the clote all my life Sworn to and subscribed before me, this the
2h day of October 19
James Percenge ordinary Mars Many James Rowlins
Of De Micell County.
(SEAL)
Affidavit of Witnesses to Prove Marriage and to Whom.
Date of Death of Husband
Date of Death of Husband STATE OF OF OFFICE AND ADDRESS OF THE OFFICE AND ADDRESS OF THE OFFICE ADDRESS OF THE
Date of Death of Husband STATE OF OF OFFICE COUNTY.
Date of Death of Husband STATE OF OF OFFICE COUNTY. COUNTY. Personally before mc comes J. W. Brawnelle known to be
Date of Death of Husband STATE OF OF OFFICE COUNTY.
Date of Death of Husband STATE OF OF ORGIA, COUNTY. Personally before me comes J. Branchell known to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that
Date of Death of Husband STATE OF OF ORGIA, COUNTY. Personally before me comes of W. Brownell 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 fame Resulting, who made the foregoing affidavit, is the lawful widow of W. Marwlines who died in Delkalle. County in said State of A. on 20 day of health.
Date of Death of Husband STATE OF OFORGIA, Personally before me comes f. W. Brownels. Rown to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. Many Jane Rowlins, who made the foregoing affidavit, is the lawful widow of W. Arwhins who died in Dellacke County in said State of a on 21 day of history 19/1, and that she has not since remarried. That she became the wife of W. Arwhins on
Date of Death of Husband STATE OF OFORGIA, Personally before me comes of W. Branchell responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. Mary fame County, who made the foregoing affidavit, is the lawful widow of W. A. Rawlins who died in Allele County in said State of a on 20 day of Mrs. 19/1, and that she has not since remarried. That she became the wife of W. A. Rawlins on the A. day of Mrs. 1864, and that she and he had resided together as man and
Date of Death of Husband STATE OF OFORGIA, Personally before me comes of W. Brown L. 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 Janu Regulary, who made the foregoing affidavit, is the lawful widow of W. Arwhans, who made in Deltaste County in said State of a day of him 19/1, and that she has not since remarried. That she became the wife of M. H. Maryland on the Aladay of Mrs. 1864, and that she and he had resided together as man and wife continuously since. Aladay of Aruf 1864, and that the Mrs. was
Date of Death of Husband STATE OF OFORGIA, Personally before me comes f. W. Brown L. Personally before me comes f. W. Brown L. Rown to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. Many January, who made the foregoing affidavit, is the lawful widow of W. Arwhans, who died in Death County in said State of the day of Mrs. County in said State of the day of Mrs. That she became the wife of M. Arwhans, on the day of Mrs. 1864, and that she and he had resided together as man and wife continuously since Aday of Assay, and that the Mrs. Was the same mans who was on the pension roll of said State from D. M. College.
Date of Death of Husband STATE OF OFORGIA, Personally before me comes f. W. Brown L. Personally before me comes f. W. Brown L. Rown to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. Many January, who made the foregoing affidavit, is the lawful widow of W. Arwhans, who died in Death County in said State of the day of Mrs. County in said State of the day of Mrs. That she became the wife of M. Arwhans, on the day of Mrs. 1864, and that she and he had resided together as man and wife continuously since Aday of Assay, and that the Mrs. Was the same mans who was on the pension roll of said State from D. M. College.
Date of Death of Husband STATE OF OFORGIA, Personally before me comes of W. Brownell Rown to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that in the foregoing affidavit, is the lawful widow of W. Manulines, who made the foregoing affidavit, is the lawful widow of W. Manulines, who died in Death County in said State of the foregoing and that she has not since remarried. That she became the wife of W. Manulines, on the Alay of Manulines. That she became the wife of W. Manulines on the Alay of Manulines. The form Death of Political State of the form Death County in the Same man, who was on the pension roll of said State from Death County of the form the Manulines. Sworn to and subscribed before me, this the
Date of Death of Husband STATE OF OFORGIA, Personally before me comes f. W. Brown L. Personally before me comes f. W. Brown L. Rown to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. Many January, who made the foregoing affidavit, is the lawful widow of W. Arwhans, who died in Death County in said State of the day of Mrs. County in said State of the day of Mrs. That she became the wife of M. Arwhans, on the day of Mrs. 1864, and that she and he had resided together as man and wife continuously since Aday of Assay, and that the Mrs. Was the same mans who was on the pension roll of said State from D. M. College.

(SEAL)

Application for

Payment of Expenses of Last Illness and Funeral

(Under Act of 1919)
(To be disbursed by the Ordinary)

GEORGIA,County:
Before me, the Ordinary of said County, comes A. S. Turner
, of said County, who, after being duly sworn, on oath says
Name Tone Berline
that he knew Mary Jane Rawlins late of said County, a Confed-
erate pensioner, and that said person is the identical person named and described in the attached
certified copy of burial certificate; and that said pensioner LEFT NO WIDOW and NO ESTATE of
ANY KIND OR VALUE sufficient to pay the expenses of last illness and funeral, which amounted
to the sum of \$ 197.00 as shown by sworn statements FULLY and COMPLETELY
ITEMIZED, hereto attached.
Sworn to and subscribed before me,
this the 18 day of Sept., 1936.
7. A. Macgan Ordinary.
CERTIFICATE OF THE ORDINARY
GEORGIA. DeKalb County.
Ounty.
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 Mary Jane Rawlins 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 18th day of September , 193 6 .
(Seal of Ordinary). 7. J. Margar, 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.

Oth. The State does not authorize the payment of these expenses in the event a soldier pensioner is survived by a

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

NIGHT AND BUNDAY PHONE DE. 0099 528-27 N. McDONQUGH ST. PHONE DE. 0098 Jumeral Director and Embalmer Prompt Ambulance Service Decetur, Georgia

Funeral Expenses of Mrs Mary Jane Rawlins, 999 Fair St, S E Atlanta, Ga.

February 20, 1936.

To Casket and Burial Box
Embalming
Funeral Notices
Hearse Service and Service Rendered
Flowers

\$197 00

Georgia DeKalb County,

I do hereby certify that the above account is rendered for the funeral expenses of Mrs Mary Jane Rawlins, who died without owning sufficient property to pay this bill,

Sworn to and subscribed before me, I This September 17, 1936.

Ruby Johnston

Notary Public, State at Large, Decarus, Ga. My Commission Expires Non. 1, 1937. af Turner



CERTIFICATE OF DEATH GEORGIA STATE BOARD OF HEALTH

Bureau of Vital Statistics

1373

HEALTH OFFICER

1061 Fulton ...Militia District (Number and Name)... City or Town Atlanta 1034 (Street) Fair St. S. E. (If death occurred in a hospital, give its name instead of street and number) Street and Number (No..... Mary Jane Kawlins 2. FULL NAME. 1034 Fair St. S.E. (Street and Number). Residence (City or Town). PERSONAL AND STATISTICAL PARTICULARS MEDICAL CERTIFICATE OF DEATH 4. COLOR or RACE 5. Single, Married, Widowed, Divorced (write the word) Widowed Febry. 20, 1936 . 6:30 A. M. Female White 2/2/1855 DATE OF BIRTH (month, day, year). 0 The principal cause of death and related causes of importance in the order of onset and duration of each: Valvular insufficiency and (b) Industry or business in which work was done, as cotton mill, sawmill, bank, etc...... sclerosis (c) Date deceased last worked at this occupation (month and year)..... Other contributory causes of importance: 9. BIRTHPLACE Georgia (P. O. Address)... Influenza Pinkston Britt 10. NAME... What test confirmed diagnosis? (Specify whether autopsy, operation, laboratory, or clinical) 11. BIRTHPLACE Georgia If death was due to external causes (violence) fill in also the following: (P. O. Address) ... Was injury an accident, suicide, or homicide?.... Rene Miller Where did injury occur? (Specify city or town, if outside of limits, the county, and also the state) 12. MAIDEN NAME. 13. BIRTHPLACE Did injury occur in a home, public place or industry?..... Georgia (P. O. Address). Manner of injury 14. INFORMANT Mrs. Fred Sheppard Nature of injury..... (Signed)... C. L. Allgood 999 Fair St. S.K. (Address). 19. BURIAL PLACE Scottdale, Ga. Indian Creek Cemetery (Cemetery). (Postoffice) DeKalb Co. (Date) 2/21/36 20. UNDERTAKER A. S. Turner (Signed)... Decatur, Ga. (Address) OFFICE OF THE REGISTRAR OF VITAL STATISTICS For the City of Atlanta 9/17/1936 Atlanta, Gai.... FULTON COUNTY. I hereby certify that the foregoing is a true and correct copy of the record of death Number. 1373 of the series of 1936 for Mary Jane Rawlins as appears on file in the office of the Registrar of Vital Statistics of the fity of Atlanta. SEAL

Confederate

Soldier's Application.

UNDER ACT 1910.

County Dikalb Name W.A. Rowlins

Regiment L'ses Ballation

J. W. LINDSEY,

Confederate

Confederate

Confederate

Soldier's Application.

UNDER ACT 1910.

County Detally

Name W. S. Revelines

Company Detally

Name W. S. Revelles

Company Detally

Name W. Revelles

Questions for Applicants to Answer.

STATE OF GEORGIA,
Mikall County
THE PROPERTY OF THE PARTY OF TH
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
propounted, answers as follows, to wit:
What is your name and where do you reside? (Give County and Post-office).
WA Rollins Delall County Scatte Vale 44
2. How long and since when have you been a continuous resident citizen of this State?
Did you onlist is a VA
b. Did you enlist in the Army of the Confederate Store or of the Organized Militia of this State
from 1861 to 1865? Children aling Cally
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class
of Service & the 1863 famousewell ya Compan D- Lis &
5. How long did you remain in the actual Military Service with said Company and Regiment?
(Give date of discharge) about 18 Months
6. When and where was your Company and Regiment surrendered or discharged from the Service?
mukary + Ballation was Disburded August 104/864
7. Wese you actually present with your Command when it was surrendered or discharged?
S. If you were not actually present, state spedically and clearly where you were
Torre on rech Harrings
a. Where was your Command when you left it? Allanta Ga
b. When did you leave the Command? April 1864
c. For what cause did you leave? Siell four longs
d. By whose authority did you leave? Officery in Commund e. For how long was your leave granted? In what way? 20 days Sick
e. For how long was your leave granted? In what way? 20 days Siek
Woundly .
f. Why did you not return to your Command after leave expired? HAL At U.
g. In what way were you prevented? Rhumalism
h. What effort did you make to return? Made nouse not able to Wake
i. Were you captured during the war? ZD
j. If so, when, and where? In what prison were you held and when were you released?
2 25, wheel, and wheel in what prison were you held and when were you released?
9. What property of every description was owned, in the use, possession and control of yourself
and offe and its each value or the 1 November 2000 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.)
Dalu- 40 one Nove Val 5 per - 2 Hoge
aling 30,00 - House Nold Goods \$ 20 00
10tol 2018 145-00
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? More
7 · · · · · · · · · · · · · · · · · · ·
11. What property of any description of any kind, and of any value now owned and in the use,
possession and control of yourself and wife and its cash value? (Make itemized list). 2 Court 14.
The desire of the state of the
Yald gards \$1200 Of8000 Tal \$141-08
12. What annual or monthly income or earnings of yourself and wife and the source derived have
your Rent Sand have what little I make from I
13. Are you drawing a pension of any amount from this State or the United States?
14. Have you ever applied for the Gordin Pansion and Late of the United States.
14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was
not allowed? There not
Swom to and when it all to still the still
Sworn to and subscribed before me, this the
day of MOV 1910 Ment
with Records a pordinary

State of the control of the expectation of the control of the expectation of the control of the		STATE OF GEORGIA, County,	STATE OF GEORGIA.
were a a witness in report of the application of Mills Medical Seage for the proceeding provided by the Art of 1990, in and State, and start being even from account of the low property that is now in the way, proceeding in the low property that is now in the way, proceeding the start of the significant of the signif		no That	March 11 1 1 (Malaris
by the Act of 1910, in and state, and after being accordence to make the bing question propounded, according to the state of the cost of t			The state of the s
answers as follows: 1. What is your mane and spiner do you made in a sile of the said value to still (that list by tame and value). 2 Called Id I have been the property it and the said value to still (that list by tame and value). 2 Called Id I have been to be spiner to the applicant? 2. Where does he now rights, and give when he is been a bose file, continuing readons in this state and here been you property. It any, has been sold or given away by the applicant or his wife since 4 Nov 1906. 3. Where where and in the companion did I had been the said value of the said value to still the property; it any, has been sold or given away by the applicant of his wife since 4 Nov 1906. 4. When where we will not companion that is serviced before the formation of this serviced before the formation of this serviced before the formation of the serviced before the formation of the serviced before the said that the company and langinestry (five data) (Activity and the serviced before the said that the company and langinestry (five data) (Activity and the serviced before the said that company and langinestry (five data) (Activity and the said that the said that and full values? 3. What was the price paid or estated to be paid. 4. When advisin you only in read in greated the service of			
2. How wing and since when laver gon known. If It Pacifolders the applicant Western Hall of Law And I American the American State and the Company of the American State and the Company and Registers with the Company and Registers with the Company of the State and the New York was the price of the State and the New York was the price of the American State and the New York was the price of the American State and the New York was the price of the American State and the New York was the price of the American State and the New York was the price of the American State and the New York was the price of the American State and the New York was the price of the American State and the New York was the price of the American State and the New York was the price of the American State and the New York was the price of the American State and the New York was the Company of the New York was the Commany. When the applicant percental present with his Company and at surrenders. At the American State and how the New York was the Commany. When the American State and the New York was the Commany of the New York was the Commany. When the American State and the New York was the Commany of the New York was the Commany. When the American State and the New York was the Commany of the New York was the Commany. It is now the applicant percental present with his Commany? The Market State and how the American State Country of the American St	. 4.		
2. How long and since when liver goal known. If I I I I I I I I I I I I I I I I I I	4	1. What is your name and where do yo eside?	
3. Where does he now resist, and gave when Ma he been a local field, continuing readent in this State and now of symphone of Managed M		41 New Sh	
State and low do growthness that the good of the comment of the co			Hougoodgrow ovad g 143-00
4. When, where and in what Company and Deciment that I the Relationing was from 18th to 1853? (We date and places that I the Relationing to the Service Rela		3. Where does he now reside, and gince when has he been a bona fide, continuing resident in this	1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov
4. When, where and in what Company and Regiment did. The Residence build under war from 1981 to 1983? (Give date and place). The Company and Regiment of this Service build and a subscript of the Service build and the Ser			19087 (State it fully by items.)
S. What was the price paid or stated to be paid? 5. How did you obtain your information of this service. Letting the state of the state of the price of stated to be paid? 6. How long within spour own personal knowledge did he perform actival military service with this Company and Regiment? (sive date did of the party of company and Regiment? (sive date did that the title of the state of the proceeds of the sale? 7. When and where were we had Cognified surrendered or disparged (sive date and place) At the supplicant personal by present at the Surrender? 8. Were you personally present at the Surrender? 9. If not, where were you and how came you there? 10. Was the applicant personally present with his Compand at surrender? It unger not be supplicant personally present with his Compand at surrender? 11. When did he leaves to Company. 12. When did he leaves to Company. 13. It what vay on he granted leaver? 14. What reliation is the party to applicant? STATE OF GEORGIA. STATE OF			2 When and to when must add a to 21 at 18 at 18
5. How did you obtain your information of this Service belief ring to Sance Corefy 4. What relation is the party to applicant? 6. How long within gour own personal knowledge did he perform actual military service with this Company and Regiment? Give date of the proceeds of the rade? 7. When and where was his Compand surrendered or displared (type date and place) 8. Were you phonally present at the Surrender? 9. If not, where were you and how came you there? 10. Was the applicant personally present with his Command at surrender? He was a surrender? He was		11 11 11 11 11 11 11 11 11 11 11 11 11	
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6. How long within spour own personal knowledge did he perform actual military service with this company and Regiment? (give dates) ACTUAL DIVENTY (Green and State of the proceeds of the size." 7. When any where was his Companied surrendered disharded (give dates any place) 8. Were you possonally present at the Surrenderd. A TOTAL OF ACTUAL DIVENTY (Green and State of County) 10. Was the applicant personally present with his Command at surrender? A LIGHT (Green and State of County) 11. If not sphere was his applicant personally present with his Command at surrender? A LIGHT (Green and State of County) 12. When did be leave by Company. A LIGHT (Green and State of County) 13. In what way you he prevented from returning to his Command? How do you know all that you have stated to be true? Holytog corp knowledge Cital clearly and specifically) (Surrend and Lie What allowed the myst you be prevented from returning to his Command? The LIGHT HE LIGHT (Green) 14. What all forms of the prevented from returning to his Command? The Light He LIGHT (Green and Light He Light He LIGHT (Green) 15. What almost the prevented from returning to his Command? The Light He LIGHT (Green) 16. Was the disposition was made of this prepared in the prepared of this prepared in the prepared in the prepared of the prevented from returning to command. A life what was prevented from returning to his Command? The Light He LIGHT (Green and Light He Light He LIGHT (Green) 17. What disposition was he bedd? The Light He LIGHT (Green and where the prevented from returning to his Command. A life with the prevented from returning to his Command. The Light He LIGHT (Green and Light He Light He LIGHT (Green) 18. What disposition was nead to this prepared with the prevented of the prevented in the prevented in the prevented of the prevented in the Light He LIGHT (Green and Light He Lig			4. What relation is the party to applicant?
this Company and Regiment? Igive dates of the state of the property made in good faith and full values? 7. When and where was his Company of the company of the state graphes. 8. Were you genously present at the Surrender? In the state of		/	5. What disposition was made of the proceeds of the sale?
7. When and where we she Compared a surrendered or discharged (rate and place) At Managed to obtain a pension. 8. Were you polymonally present at the four-edge. 9. If not, where were you and how came you there? 10. Was the applicant personally present with his Command at surrender? It was not a subscribed before me, this the At Managed Country. 11. If not where we he and how came join there? It was not a surrender? It was not not a surrender? It was not			6. Was the disposition of this property made in good faith and full values?
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10. Was the applicant personally present with his Command at surrender? The supplicant of the survey			11.10.11
ORDINARY'S CERTIFICATE. 12. When did he leave by Compand? If the leave? It was his Command, when he left it it was caused the leave? It was and how long was he granted leave? It was caused the leave? It was and how long was he granted leave? It was caused the leave? It was and how long was he granted leave? It was a price of the witness swearing to the applicant the witness swearing to the service and It was applicant to his Command? The was a price of the was and when released? STATE OF GEORGIA, County. STATE OF GEORGIA, County. STATE OF GEORGIA, County. I was applicant the was a price of the was a price of the winness swearing to the applicant the witness swearing to the witness swearing to the winness swearing to the winness to the witness swearing to the winness the was a price of the was a price of the was applicant to his Command and how do you know? All was applicant as price of the was a price of the was a price of the was and when released? Sworn to and subscripted before me, this the Was and when released? Sworn to and subscripted before me, this the Was and when released? Sworn to and subscripted before me, this the Was and when released? Sworn to and subscripted before me, this the Was applicant can be subscripted before me, this the Was applicant can be subscripted before me, this the Was applicant can be subscripted before me, this the Was applicant can be subscripted before me, this the Was applicant can be subscripted before me, this the Was applicant can be subscripted before me, this the Was applicant can be subscripted before me, this the Was applicant can be subscripted before me, this the Was applicant can be subscripted before me, this the Was applicant can be subscripted before me, this the Was applicant can be subscripted before me, this the Was applicant can be subscripted before me, this the Was applicant can be subscripted before me, this the was applicant can be subscripted before me, this the was		10. Was the applicant personally present with his Command at surrender?	of County.
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By whose authority did he leave? I do your own knowledge (Tell clearly and specifically) whose all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) who all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) who are freeholders, that I also know the applicant of the applicant of the person he represents himself to be and resides in said County. That I also know the witness swearing to the service and R.H. What efforts did he may be to return to his Command and how do you know? The war all truthful and trustworthy and their statements are entitled to full faith and credit. That the war all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Results of shows that and wife yalue for tax is in 1908 when so the part of the command and official seal of office this. It is only that the command and official seal of office this. It is only that the command and official seal of office this. It is only that the command and official seal of office this. It is only that the command and official seal of office this. It is only that the command and official seal of office this. It is only that the command and official seal of office this. It is only that the command and official seal of office this. It is only that the command and official seal of office this. It is command and official seal of office this. It is command and the command and official seal of office this. It is command and the command and official seal of office this. It is command and official seal of office this. It is command and the command and official seal of office this. It is command and the command and official seal of office this. It is command and the command and official seal of office this. It is command and the command a			
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the applicant of the person he represents himself to be and resides in said County. That I also know the witness swearing to the service and P. A. C. C. County. The service and P. A. C.			I, Ordinary of said County, certify that I know
said County. That I also know the witness swearing to the 13. In what way has he prevented from returning to his Command? The command of the witness swearing to the 14. What efforty did he made to return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his Command and how do you know? The return to his			the applicant A. Rembining Pension is the person he represents himself to be and resides in
13. In what way has he prevented from returning to his Command? Machine Months Mark Months Mo		in Service with him	
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Tax Results of shows that and wife 15. Was applicant captured as a prisoner. 21. If so, when and where? In what prison was he held? Sworn to and subscribed before me, this the 2 2 lay of 2 l		How do you know? Deliny him after the war closed	they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and
value for tax is in 1908 * for 1909 * for 1910 * for 19	•	14. What effort did he make to return to his Command and how do you know?	they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the
Sworn to and subscribed before me, this the 7 2 hrs Cates (County.		more that I know of Derry sull of Chemation	
Sworn to and subscribed before me, this the 7 2 hrs Cates (County.		15. Was applicant captured as a prisoner. 215	value for tax is in 1908 \$
Sworn to and subscriped before me, this the 2 2 hrs Cates County.		In what prison was he held?and when released?	Sworn under my hand and official seal of office this
			James Cyrorge Ordinary,
NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words or how burth with the same make to such question saked you and the evidence you shall affidavits must be made before the Ordinary and earlified by him. All affidavits must be made before the Ordinary and earlified by him. If applicant has no property at all in his possession, use or control of self and wife, affidavits of freehelders unnecessary.		Sworn to and subscribed before me, this the	of Aukulla County.
of the well and the self and wife, affidavite of freeholders when the possession, use or control of self and wife, affidavite of freeholders unassessing. All affidavite must be made before the Ordinary and certified by him. If applicant has no property at all in his possession, use or control of self and wife, affidavite of freeholders unassessing.		play of www 1910 marse	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 sach question saked you and the ariders are
will celtify that Wi Cates a country of control of sell and wife, affidavite of freeholders unaccessory. If applicant has no property at all in his possession, use or control of sell and wife, affidavite of freeholders unaccessory.	a	John Williamson Ordinary,	shall give shall be the whole truth; so help you God." 2. Additional affidavits may be attached it blank spaces are insufficient. 3. All affidations.
his right is mented to me the three mind one	.0	celety that Working Tulling County.	4. If applicant has no property at all in his possession, use or control of self and wife, affidavits of freehelders unnecessary.
the William only	his	selected is melited to proceed and and	
	3.4	How twelling on	A STATE OF THE STA

. 9	STATE OF GEORGI		County
	I,	m & Ruwlain	Ordinary of said county, do certify
	is the lawful widow of LIS	Pawline	, the applicant, and that she
			Kalla county, and was paid
. 4	a Pension from	V 4 // /	county for 19_/ and at the time
	of his death on the	day of Hely	
	him and unpaid his Pension of	Winet 9	Dollars from the State
	of Georgia, and I know	(Owen	the within
	witness, and he is of a truthful an	d trustworthy character and entitled this day of A	
(4		120
	Cont. Marie	Jan	All Gulf dinary,
		<u> </u>	Defall County.
-	×		
ë	on Due	To, be paid his Widow or Dependent Children of M. J. County M.	et and paid d and paid J. W. LINDSEY, Commissioner of Pensions. Little Printers, Atlanta.
3.	ensi	epend	Paid paid
6.0	1919 Plication for Pension Deceased Soldier UNDER ACT 1891	1 3 3 3 B	Pegt. J. W. L. Commission Co. Bass Printer.
134	No. 119	To the man of the same of the	Beer Co
3/3	Dec	1 0 3 3	App
33	a jiga	F 20 200	7
RA	4	Mrs Widow	8
1			and the same of th
	GEORGIA,	County.	
	I hereby authorize and constitu		of said county, my
E	· lawful attorney to collect and receip		due me for 191, through my de-
	ceased husband,		A8 On
	Pension Roll and paid from Witness my hand this		for 19
		cay or	, 19
	Attested before me:		
	Assertation Victoria	100 577	

in plane in south

Application for Pension Due Deceased Soldier
To Be Paid to His Widow or Dependent Children
UNDER ACT APPROVED OCTOBER 9, 1891
STATE OF GEORGIA, Wellall County
Personally before me somes Mrs. Alle & Rawlins , of said county,
after being duly sworn, on oath says that she is the widow of
of Bellals and was paid a Pension of \$80.00
of Dillars from Dellars from County for 1975, and that the said W. Rowling died in Dellars county on the 20 day of Dellars from the death a Pension of 20
11) & Rawling died in Rellab county on ?
the 20 day of Alexand, and at the time of his death a Pension of
was due him from Pletallocounty and unpaid for 1916
Applicant further swears that she married the said W. H. Rawline on
the day of Mea 1873 in Juin county and
State of Georgea, and resided with him from the date of marriage to his death as his
lawful wife, and is now his dependent widow, and she asks the Pension so due and unpaid be paid to her.
Sworn to and subscribed before me this 8 day of May, 1917
The Malle County. Was M Rawlins (L. S.)
County.
AFFIDAVIT OF WITNESS
STATE OF GEORGIA, Dellalle County
Personally before me cones f. M. Owens , who
on outh says that he knew. W.A. Rawling while in life
and that he knows. Mrs. Mrs. Mrs. Mrs. Mrs. Mrs. Mrs. Mr
the above applicant; that he knows that the said. W. A. Rosselsiel.
and West M. J. Rawlins were in due form of law married in the county
of Junious in the State of Tast Jia on the 20 day of NOV 18-70 and that they resided together
as husband and wife from date of marriage to the day of his death on the
, 191 , and I now know that she is his dependent widow.
Sworn to and subscribed before me this
Ordinary. County.
County.)

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

Marrieg Ficense Burned in Adwrendeville 187/

Ray, John P. a on No. De Kall G

INDIGENT PENSION, 1902.

Name Ray Jo	hn.P
County DeK	1) b
co.A 384	A Ja Reg'm't
Approved	1902.
JOHN W.	LINDSEY,

WARRANT HANDED TO

Commissioner of Pensions.

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

8/15-199. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

Witness my hand and seal, this	receive and receipt for the p	1,	
eal, this day of	to receive and receipt for the pension allowed, and request that he remit same to	of _	COUNTY.)
1902.		hereby authorize	

STATE OF GEORGIA. STATE OF GEORGIA, DEHall 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) COUNTY. hereby authorize John Pool Kay recise in Delate to receive and receipt for the pension allowed, and request that he remit same to How long and since when have you been a resident of this State? Have been a resident this state fifty seven years since 1845. When and where were you born? Room aug 17 1853 & reenville or Ticken Diet 8 Witness my hand and seal, this. 1902 When and where and in what company and regiment did you enlist or serve? Inlisted Many 1862 in [L. S.] Executed in presence of D' some Rest How long did you remain in such company and regiment? Almanued with them until April 7th 1865 when I was captured by the eneming whole on duty When and where was your company and regiment surrendered and discharged? On the 9th May 10 1505 7. Were you present with your company and regiment when it was surrendered? 200 28. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? That prusones out Petrusburg Va. had been closed by officees on seismie line when we way Captured. 9. How much can you earn (gross) per annum by your own exertions or labor? Turking 10. What has been your occupation since 1865? To triumy when alle to do any treng 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"? A gl. subtrimity of 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? Than Sumber Ridney troublest Scialie poin nearly all the time at times cant walk or get out of bed from ruenmation. I will be 69 HM old next month (aug 1902) What property, real or personal, or income, do you possess, and its gross value? an ved mule What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900 and 1901. and what disposition, if any, by sale or gift, have you made of same? In 1900 how bond for title to So acces (half lesterch) is Government Co. but had to hurrendo it to onne, the heart of the Mass had hatterned better factoring for party 13. In what County did you reside during those years, and what property did you then return for taxation?
Received in Clayton Co in 1896 1895 m. because Co in 1896, 1897,1898 of 16. How were you supported during the years 1899, 1900 and 1901? By any Children all of Whom an over 21 Mars of age toust suffect to my Command 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 75 = per year - I tried to help on farm of should your own labor or income? Let the service of the se Wife & 5 Children . They have no homestead PENSION reviled land odout own any. JOHN W. LINDSEY 20. Are you receiving any pension? If so, what amount and for what disability? 21. Have you ever made an application for pension before? 22. How many applications have you ever made and under what class? INDIGENT will ton

•	STATE OF GEORGIA,)
	2. Kalla
	a e Naw COUNTY)
	Am Haleman Diemeson
/	The County William, of gaid Stary and County, having been presented
	as a witness in support of the analysis of Man () A au for vancion
	ns a witness in support of the application of the application of under Section 1254, Code, and after being daily sworn true answers to make to the following questions, deposes and answers as follows:
	answers as follows:
1	1. What is your name and where do you reside?
	2. Are you acquainted with the first the applicant; if so, how
	· · · · · · · · · · · · · · · · · · ·
	3. Where does he reside, and now log and fines when has he been a resident state?
	The state of the s
	en de fait combs, since 1843
	When, where and in what company and regiment did beenly, and how do you know
	In May 1862 Attanta leg A 38" They hanglesed to
•	
	5. Were you known of the same company and regiment?
	CHAIN CONTRACTOR OF THE SAME O
	6. How long did he perform regular military duty? 11 10 11 11 11 11 11 11 11 11 11 11 11
	7. When and where was his command surrendered? It while the surrendered?
*	Mr. Maria lovi
	Va 1863,
	8. Were you present when it surrendered? We were)
	1/2 2 17
	9. Was applicant present? It was captured on the th
	10. If he was not present, where was he? Mas me as a way as is a way as is a way as a second was
	When did he leave his command? For what cause?
	By what authority he left? How do yook know all of this?
	Me 11.010 The
	We were mere and remove the was tonen
	To prison 11 4 d six six
	11. What property, effects or income has the applicant? (Give your means of knowledge?)
1	. 110
1	weast to forces sworn Says: - A all bloleombe
	12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899, 1900 and 1901, and
	what disposition, if any, did he make of same? Nothing accept small personal property which has been disposed of in same country and of which he orions nothing that a little small a few household arricles. He has never owned any land sure the war cloud
•	a few household articles. Ne have never bound any land there has a lette builte as lette builte as the beginning of his property in the last four years if any though the base of the board cloud.
a	13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom?
	nothing, except a part of his little cropin winter to obtain other necession
	the property of the state of the processioner
	14. What is the applicant's occupation and physical condition? Heir a former that is the was He is old
	and feeble, physically breakle to laton in my opinion. He could not growing
	employ ment on account of physical Consition, is not worth wages.
	15. Is the applicant unable to support himself by labor of any sort, if so, why? He has no health and
	es apparently unable to work, he is Just old to shave Known him
	thirty Tears + Courider him deceroing applicant
	1 / 1 = -/ 1 : 1
	16. How was he supported during the years 1898, 1899, 1900 and 1901? he 1898 he lived the Grant Co.
	tat I know that he has been mainly salmost entirely support, it a
	17. What portion of his support for these four years was derived from his own labor or income?
	4.1 / 417
	18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under
	K. T. I. All applications that entities into a pension under
	Section 1254, Code? Mow him lote old, and feeble, and from Doclory that he
	i dimend the a father was a fine of the
	1. 1. 1.
	and unable to support numely.
	19. What interest have you in the recovery of a pension by this applicant? Abna Whativer
	Swern to and subscribed before me, this the
	Swith wand subscribed before me, this the
	ing of Aufly 1902. \ Witness.

STATE OF GEORGIA,
Dellalla
CQUNTY.
Personally came before me
11-1
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:
General dibility
due to age + agravated by a pase of La time
Allow I de I de la la de la la trop
Sur to age & agravated by a case of La trop
and that we have no interest in said pension being allowed.
Choin to and subscripted before me, this the
15 day offerly 1902. I willy oliving "
MMRagadale Ordinary.
ORDINARY'S CERTIFICATE.
STATE OF GEORGIA,
De Kalk COUNTY.
I. M. Ragglale Ordinary in and for said County, hereby certify
that the applicant I Roy resides in said County, and has
been a bona fide resident of this State since the 12 day of 200 1833.
and that the winesses, viz.: AM. Holcomb and M. H.
Dicheson
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 show that applicant
returned for taxation in his name/in 1899
property, and in 1900 Dollars of property.
In my opinion the foregoing claim ismade in good faith.
Witness my hand and seal of office, this
MmRogsdace Ordinary,
of He Kalk 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 dive 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, hereby authorize M.M. Razelace, of De Kalla Commits to receive and receipt for the pension allowed and request that he remit same to Witness my hand and seal, this 10 Executed in presence of

N. B. White IH Man

(FOR THOSE ALREADY ENROLLED.)

No. Sty

DIER'S PENS WARRANT HANDED TO JOHN W. LINDSEY, WARRANT ISSUED INDIGENT 1903 Name Ray John

POWER OF ATTORNEY

I,				hereby at	thorize		
to receive	and receipt f	or the pe		owed and	request tl	nat he re	mit same t
by			at _		*		
Witnes	s my hand and	seal, this		day of		and constituent and the state of the state of	190-
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Exec	cuted in presen	ice of					
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2		2		8		LINDSEY, Commissioner of Pension.	
LLED.)		3	110				
E ALREADY ENROLLED.)	DIGENT P'C DENGIO	F. 5	095	900	WARRANT ISSUED	JOHN W. LINDSEY,	WARRANT HANDED TO

(FOR THOSE ALREAD

SOLDIER'S

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.	FOR APPLICA
STATE OF GEORGIA, De Vall County. Personally appears form P. Roy of De Kalk County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever since the 1 day of Aug 1833; that he is years old and by occupation a Casacers , 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 9910 in Company D, of 38 th Regiment of Au Val ; that his physical condition is as follows: Age and Infirmity from Jumbla 20.	Personally app County, State of Geo and resident of said since the by occupation a federate States (or of States, and served for of follows:
that his property consists of the following items:	that his property con
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 Kull.	of the value of condition and povert that he receives no population desir 1894, and the Acts are is entitled for the year County been allowed
Sworn to and subscribed before me, this the day of fan 1903. \ MMagelale, Ordinary. John P. Ray	Sworn to and so day of famul R. S.
STATE OF GEORGIA, Le Male County. I. Magsale Printing Ordinary of said County, do certify that I am well acquainted with from Printing Ordinary of said County, the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.	I, John do certos that I am the applicant in the f by him in his said aff to be, and that he res
Given under my official signature and seal, this 10 day of 1903 Affix Junt 1 here Ordinary Le Kelk County.	Giver day o

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,	
DeMall County.	
O. P. P.R.	
Personally appears John, P. Ra	y, of Destall
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 resid	
since the day of Qet 184	(2; that he is 71 years old and
by occupation a Farmer, that he enlist	ed in the military service of the Con-
federate States (or of the State of	during the war between the
States, and served for the term of 312 yearn	Company of 38th Regiment
of Klosgia Vole. a. a. 388	h, that his physical condition is as
follows: age and Disabile	tij
1	
that his property consists of the following items:	
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of the value of D	ollars, that by reason of his physical
condition and poverty he is unable to support himsel	f by his own exertion or labor, and
that he receives no pension but the one herein applied	
Deponent desires to participate in the benefits of	the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes app	
is entitled for the year 1904. I have heretofore as a re	sident of Destalo
County been allowed a pension for the year 1903	11 0 2
Sworn to and subscribed before me, this the	John P. Chay
23 day of Jany 1904.	
Janua R. Gurge Ordi	nary
STATE OF GEORGIA, \	The said to the said
Derrall County.	
1 James P George	grdinary of said County,
do certify that I am well acquainted with	m. P. Pay
the applicant in the foregoing affidavit, and on well	satisfied that the statements made
by him in his said affidavit are true, and I know he is t	
to be, and that he resides in this County.	
Given under my official signature and	seal, this 23"
day of Jany 1	904.
(AMX) Jan	us R. George
Seal bere.	Derall county.
Conditions.	County.

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Note.—The blank spaces must be filled.

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

POWER OF ATTORNEY.

STATE	OF GE	•	COUNTY				ereby authoria
		ceipt for the		allowed, an			remit same t
by		hand and s		*	day of		1905.
Exe	cuted in	the presence	of	*			[L. S
				••••••••••••••••••••••••••••••••••••••) ,	
COR THOSE ALREADY ENROLLED.)	No. 636	SOLDIER'S PENSION	Name John Men	County Luttell!	WARRANT ISSUED (23 3 1905.	JOHN W. LINDSEY, Commissioner of Pensions.	WARRANT HANDED TO CPAN GEO. W. MARRISON, MANAGER, FOR STATE PRINTER, ATLANTA.

,1		COUNTY.	of	* ***		hereby a	uthoriz
o receive and	receipt for the			request	that he	remit	şame t
y			at				
	my hand and se	eal, this		day of	4.	1 2	1906.
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Executed	in the presence	of					
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ENROLLED.)	PENSION	Say Of	and Soften	SUED (2 Z 1908.	DSEY. siner of Pensions.	DED TO	Oto W. Hanneson Wat.
Ged 7	S PENSION	Blay Will	cgiment 35 Ma	VT ISSUED 12 2 19/6.	V. LINDSEY.	HANDED TO	LUMIN CO. DIG W. MARRIEN. MAR.
(FOR THOSE ALREADY ENROLLED.) No. (EV)	IPIGENT IR'S PENSION	m Blay	Regiment 25 Ma	WARRANT ISSUED 12 7 1906.	JOHN W. LINDSEY. Commissioner of Pensions.	WARRANT HANDED TO	in and Parameter Co. Cit.C. W. Mannagor. Man.

STATE OF GEORGIA,
Fritall County.
11 001
Personally appears from May of Zustate.
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 2 years old and
by occupation a, that he enlisted in the military service of the Con-
federate States (or of the State of during the war between the
States, and served for the term of in Company to the figure in Company to the Regiment of 12 Volv. 28th Regiment; that his physical condition is as
follows: Cige Y Saics Cy
The same of the sa
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that his property consists of the following items:
of the value of Dollars. A 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 Dikkell
County been allowed a pension for the year 1904. Swort to and subscribed before me, this the John Ray
Swort to and subscribed before me, this the
4 day of 1005.
Janus Ryllinge Ordinary.
STATE OF GEORGIA,)
Mustall County.
I, James I Very Ordinary of said County,
do certify that I am well acquainted with phus I I am
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know 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 Plus Plus Plus
AMX
your seal here Ordinary Miles County.

Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1905.

State of Georgia,	(Gill 3812 / 19 Har No
De Kalh County.	
Personally appears John P.	Ray of De Kalk
	worn, says on oath that he is a bona fide citizen
	1 has resided in said State continuously ever
	18; that he isyears old and
	he enlisted in the military service of the Con-
federate States (or of the State of	during the war between the
States, and served for the term of	in Company , of 38 th Regiment ; that his physical condition is as
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that his property consists of the following i	iems '
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by my labor,	Dollars per month. That by reason of his
physical condition and poverty he is unabl	e to support himself by his own exertion or
labor, and that he receives no pension but t	he one herein applied for.
	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 hereto	
County, been allowed a pension for the year	
Sworn to and subscribed before me, the	
day of Junuary 19	06.) Kohnel Cay:
James Rycorga	Ordinary.
State of Georgia,	
Nall County	\mathcal{J}^{*} , where \mathcal{J}^{*} , \mathcal{J}^{*} , \mathcal{J}^{*} , \mathcal{J}^{*} , \mathcal{J}^{*} , \mathcal{J}^{*}
1, James R G	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 k	now he is the individual he represents himself
to be, and that he resides in this County.	***************************************
Given under my official signs	ature and seal, this 22
day of famuar	
miles Of the A	James Recional
Affix your see here	Ordinary De Wall County.
Norz.—The blank spaces mus	

POWER OF ATTORNEY.

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WITNESS my	y hand and seal, this		_day of	1
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(1)	NOIS	18		relations.
MOLLED)	NSION .	38.5.5.	- 15	
OV EMPOLLED)	PENSION Z.	Oran Ser Ser	- 15	
CODE BECTION 124. (FOR THOSE ALREADY EMPLIED) No. 747	S PENSION O.Z.	Regiment Skri gr		WARRANT HANDED TO

Personally appears John Ray of Dellars John John John John John John John John	LAK VI	ALTICANTS HEKETARAKE ATTOMED LEUSION	5
Personally appears John Ray of De 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 ince the day of 18; that he is years old and by occupation a that he enlisted in the military service of the Considerate States (or of the State of during the war between the tates, and served for the term of in Company W of 38 th Regiment that his physical condition is as follows: One was a condition in the following items: If the value of Dollars. I am now earning years 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, see and that he Acts amendatory thereof, and makes application for the pension to which he dentitled for the year 1907. I have heretofore, as a resident of county, been allowed a pension for the year 1906. Sworn to and subscribed before me, this the day of Jane 1907. State of Georgia, Ordinary. State of Georgia, Ordinary of said County, or certify that I am well acquainted with the said affidavit are true, and I know he is the individual he represents himself or be, and that he resides in this County. Given under my official signature and seal this Given under my official signature and seal this	State	of Georgia, On a. 38th Figt Sad.	1
Personally appears John Ray of De 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 ince the day of 18; that he is years old and by occupation a that he enlisted in the military service of the Considerate States (or of the State of during the war between the tates, and served for the term of in Company W of 38 th Regiment that his physical condition is as follows: One was a condition in the following items: If the value of Dollars. I am now earning years 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, see and that he Acts amendatory thereof, and makes application for the pension to which he dentitled for the year 1907. I have heretofore, as a resident of county, been allowed a pension for the year 1906. Sworn to and subscribed before me, this the day of Jane 1907. State of Georgia, Ordinary. State of Georgia, Ordinary of said County, or certify that I am well acquainted with the said affidavit are true, and I know he is the individual he represents himself or be, and that he resides in this County. Given under my official signature and seal this Given under my official signature and seal this	. De	NAI B	
County, State of Georgia, who, being duly sworn, sees on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever ince the day of 18; that he is years old and by occupation a , that he enlisted in the military service of the Considerate States (or of the State of) during the war between the tates, and served for the term of in Company of 38 th Regiment ; that his physical condition is as follows: Grant for residue, the residue of the value of Dollars. I am now earning young labor, Dollars per month. That by reason of his hysical condition and poverty he is unable to support himself by his own exertion or bor, 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, 894, and the Acts amendatory thereof, and makes application for the pension to which he entitled for the year 1907. I have heretofore, as a resident of county, been allowed a pension for the year 1906. Sworn to and subscribed before me, this the day of 1907. State of Georgia, County. I, Januar Roberts and 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			
nd resident of said County and State, and has resided in said State continuously ever ince the day of 18; that he is years old nd by occupation a , that he enlisted in the military service of the Considerate States (or of the State of in Company 1, of 38 th Regiment thates, and served for the term of in Company 1, of 38 th Regiment ; that his physical condition is as follows: Office of the value of the value of Dollars. I am now earning years 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, sentiled for the year 1907. I have heretofore, as a resident of county, been allowed a pension for the year 1908. Sworn to and subscribed before me, this the day of 1907. State of Georgia, Ordinary. State of Georgia, Ordinary of said County, or early that I am well acquainted with the early in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself or be, and that he resides in this County. Given under my official signature and seal this Given under my official signature and seal this			
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nat his property consists of the following items: The value of			
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Sworn to and subscribed before me, this the day of 1907. State of Georgia, County. I, Jaruas Rule of Georgia or County. I, Jaruas Rule or Rule or Rule or Rule or Rule or Said County, or certify that I am well acquainted with a capplicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal this	Depor	nent desires to participate in the benefits of the Act approved December 15th	
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County. I, Januar S R Je or ge Ordinary of said County, of certify that I am well acquainted with John Ray of eapplicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal this	110	day of Jany 1907.	
County. I, Januar S R Je or ge Ordinary of said County, of certify that I am well acquainted with John Ray of eapplicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal this	MILLE	Ordinary.	
County. I, Januar Records County. Ordinary of said County, of certify that I am well acquainted with John Ray ne applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal this	34-40	of Coords	
I, Jaius S R Je or Je Ordinary of said County, of certify that I am well acquainted with John Ray of capplicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal this	State	of Georgia,	
the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself be, and that he resides in this County. Given under my official signature and seal this	D	County.	
the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself be, and that he resides in this County. Given under my official signature and seal this	I		y,
ne applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself be, and that he resides in this County. Given under my official signature and seal this	-/		
y him in his said affidavit are true, and I know he is the individual he represents himself be, and that he resides in this County. Given under my official signature and seal this	e applican	t in the foregoing affidavit, and am well satisfied that the statements man	de
be, and that he resides in this County. Given under my official signature and seal this	y him in h	is said affidavit are true, and I know he is the individual he represents himse	elf
		nat he resides in this County.	
day of Janua Ranorge			
James 1 Just 19		day of	
		James 10 Justy	
County.	Hear'		

Nove.—The blank spaces must be filled.

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

Ray, John D. .. De Kalt Co.

1915

Application for Pension Due Deceased Pensioner Under Act 1904.

Janes	Large Ordinary
of Co.	Regiment
Approved	d and ordered paid
	1915.
) J. W	V. LINDSEY,
	Commissioner of Pensions.

M J. J. Ray for Diceased

The Johnson Company,

HARDWARE, FURNITURE, JEWELRY

And Musical Instruments.

Jan 15 La Casket 4000 1 Suit Clars 150 1 Poskly Blum 30 1 Coment Dance 4000 for Father \$89.80

Georgia, Dekalb County.

In person comes A. S. Turner, a member of the firm of The Johnson Company, and being duly sworn, deposes and says on oath. That the above account for casket, Clothes, sooks and gloves, slippers and cement vault, is just and true, due and unpaid.

Sworn to and subscribed } A. S. Turner.

before me, this 8th day of a number of the
May, 1915

Cames Referred from of Johnson Company

James & Granget.

Application for Pension Due to a Deceased Pensioner

UNDER THE ACT OF AUG. 15, 1904, TO BE PAID TO THE ORDINARY FOR FUNERAL EXPENSES AND EXPENSES OF LAST ILLNESS.

Georgia, Dellalh County.
Personally before me, the Ordinary of said county, comes
he knew John A Ray of said County, and that he was on the Dang and Pension Roll Dellalt County at the
time of his death, which occurred in
State, on the State, day of January 1915, and that a Pension of Sucky (700) 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.
Dollars, as per sworn statement, itemized, hereto attached.
Sworn to and subscribed before me this day of May 1915. Onther Pordinary County County
I. James A. County. May S 4915 In James A. County. Ordinary of said County, do certify that I personally know S. Lay , who is a resident
citizen of said County, and that he is of a truthful and trustworthy character, entitled to full faith and
I also knew Sohn Bay while in life; that he
was the same person whose name appears on the
Roll of
of
I now believe him to be dead.
Given under my hand and official seal, this

NAME Ray, John P.

YEAR 1902 COUNTY Dekalb

WHEN AND WHERE BORN? August 17, 1833 - Greenville or Pickens District, South Carolina. Resident of Georgia since 1845

ENLISTED WHEN AND WHERE? May 1862 - Atlanta, jGeorgia

RANK.

COMPANY AND REGILENT? Company A, 38th Ca estiterwards transferred to Company D, same Regt.

NAME OF CAPTAIN AND CULONEL?

WOUNDED?

CAPTURED, WHEN AND WIMLE? April 7, 1865 - near Petersburg, Virginia (while on skirmish duty)

KELEASED. Date not given.

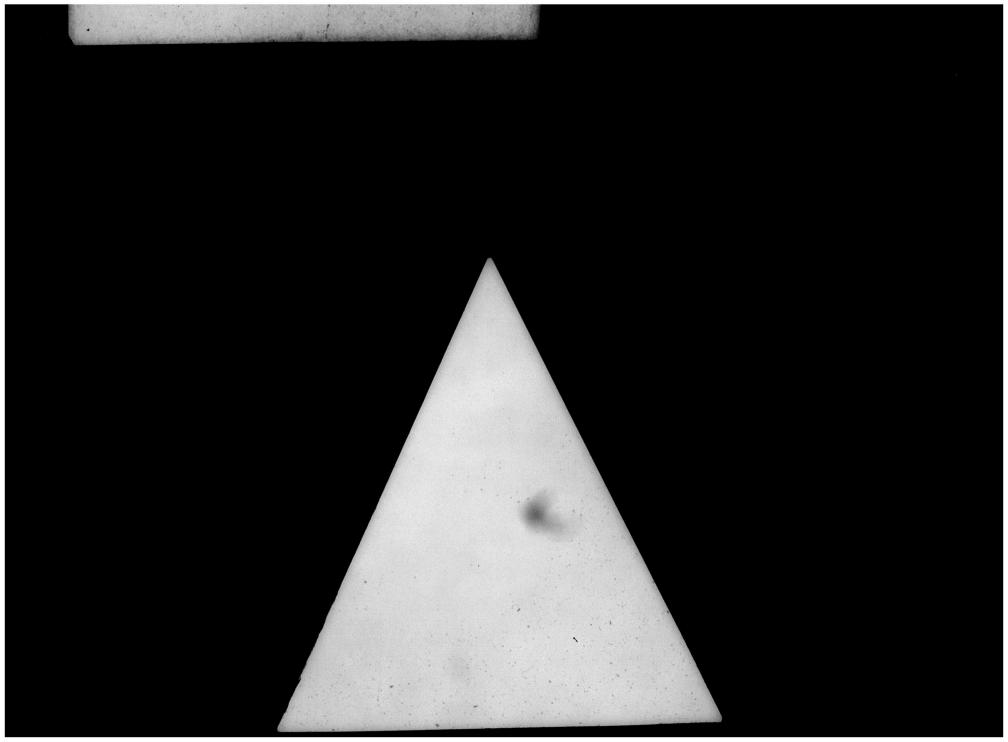
WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? Captured

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. W. F. A. Dickerson, A. M. Holcombe - same command -- No data.



DIRECTIONS.

Mo. 2000 -

Widows' Pension.

for year ending February 15th, 1893,

-PAID TO-

COUNTY. Warrant Issued

AND HANDED TO

County, in said State, do hereby appoint.

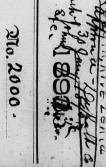
my true and lawful attorney in fact, for of Villatt - Crun 2 me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the

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

Executed in the presence of us:

DIRECTIONS.



prille

Affidavit to be Made by the Widow.

STATE OF GEORGIA.	
0.11	In person came before me, the undersigned Ordinary
	in and for the County of De Male
Mrs. Svegenia Ceague	, who being sworn according to law, says under
oath that she is the widow of Milicare	A Ceagin , who was a soldier in
the service of the Confederate States, and served	as a member of Company, of the
Colly Jegion Regiment of Ji	Volunteers; that he enlisted in said
	y of ceggin 1861, and was in the
Confederate Army up to.	(Celoker 1864 That while in the
Army, he was on the 19th day	of C. Etcher 186 1, (See Note No. 1)
The flad becen from rede	din the sight hand as
	ruck and was detailed
-After his Scarrery de	are excelleng offices
While in the disalinge	al his duties air dualitie
Mass Shiel Die the me	Elling he was such the had
Acid sol dedwill of de	me mere lette were hireion
To be laging in	ir the woods wear Tillani
	want carried illian Heir
icho had been heard	to de That in Comment
	he would get wine.
	willed the 2010 the a Sithe
. Lauc on Hat time 12	one andreste detter he wash
arried to his Milley Mars 1	y he said the said for men him
nd allecared me of them	und Walliam Action de de de
Deponent further swears that she was the wife o	f said deceased soldier during his term of service in
	his death; that she became his wife on the the
day of 1827, and the	hat she has resided in Georgia continuously since the 1825; that Georgia is her home, and was such
	d date she has not lived in any other state or locality.
	husband, applies for the pension provided by Act of
	mber 23d, 1890, for the pension year ending February
	right to receive the allowance granted by said Act
Sworn to and subscribed before me, this, the	(ices ()
3/1 day of 12 1895	A & Bell fish kit his X days to f & 1 the same
109 0	Darn.

Ordinary.

Affidavit for Three Witnesses.

State of Georgia, In person came before me, the undersigned Ordinary
County of De Tall Jin and for said County, witnesses
le to Norton like bran
each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say under bath, that, FROM THEIR OWN PERSONAL KNOWL-
EDGE, Mrs. VE MARCHEAGIN, of the County of Dellatt
State of Georgia, is the widow of Military & Regiment of , who was a soldier in Company of the Color Regiment of , Volunteers.
That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or
about the day of day of 186/ That while in said service, or by
reason of said service in the Army, he lost his life as follows:
Said at the hattle of the Wilderness Va.
distant detailed after he was abge as
and in alling officer While in the discharge
of time dictional such enrolling officer
the was shot from amfrish rear the
Sonn it tithonia on the 19th Dectober
1864 and did from the wonged on
the next day be und at the lineon
the look out for men who were know
to be laying our of service andong their
- int a man normed William Kelley and
see had threatened to take (langing Tile if
ever donce in his way. He was shot near Sain
Mour opportunity for knowing the facts stated in reference to death of applicant's husband were
applicant's husband were
· · · · · · · · · · · · · · · · · · ·
And the second s
· ·
We further swear that Mrs. I'm regenin Weagin was the wife of said
soldier during the service, and that she has not intermarried since his death, and that she resides in
Le l'all County of the State of Georgia,
Sworn to any subscribed before me, this, the
24th days for 1895
MM Rogsolle.
Ordinary. Antohnson
Nors. Witnesses must not testify about things they may believe, but confine their statements to such facts as they per-

2. If the husband died after the war of wounds or disease, state fully and particually how you, as witnesses, know the service as

receive the money, to receipt for same.

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

By order of the Governor.

W. H. HARRISON.

Sec. Ex. Department.

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

State of Georgia,

1, MM Rogsdales Ordinary

State of Georgia, hereby certify that I am acquainted with Mrs. 1220 Clerin Recogni 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

24th day of June Amy Royalie SEAL"

Ordinary.

Form No. 4

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

The law does not provide for any one living out of the State of Georgia, or who did not live in the State at the date of the Act.

The facts to establish a claim must be substantiated by the testimony of three witnesses who personally know of the enlistment of the husband and his death and the immediate cause of the death.

Widows who have married since the service of their husbands in the army are not entitled.

There is no need of employing a lawyer or other agent to attend to these claims. The Department will furnish full and specific instructions, and give ample opportunity to every claimant.

If witnesses live in another County from that wherein applicant resides, they must go before the Ordinary of their County and testify. The attestation of a Justice of the Peace or Notary will not answer, in any case.

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

Fill out Power of Attorney authorizing some one who can call at Treasurer's office in Atlanta and

STATE OF GEORGIA, County of Aestalt	STATE OF STORES STATE OF STATE
I, May lace Ordinary in and for said County of State of Georgia, hereby certify that I am acquainted with Mrs. Arveyeria Reagin 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 wir w of the State-since that date. That she is the wir w of the State-since that date. That she is the wir w of the year ending February 15th, 1895. In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this day of the State-State County of the year ending February 15th, 1896. SEAL Ordinary.	STATE OF GEORGIA, County of Le Kall I, May delea Ordinary in and for said County of State of Georgia, hereby certify that I am acquainted with Mrs. In Wayerra Reagine the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to me by reputable witnesse.) 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 Min Reference to the year ending February 15th, 1896. In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the day of May of Ma
POWER OF ATTORNEY. STATE OF GEORGIA, County. I, hereby authorize	POWER OF ATTORNEY. STATE OF GEORGIA, County. I, hereby authorize
of to receive and receipt for the pension paid hereon and request	ofto receive and receipt for the pension paid hereon and request
In Witness Whereof, I have hereunto set my hand and seal, this	that he remit same to at
day of 1896.	IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
[1.8.]	day of1897,
Executed in the presence of	Executed in the presence of
FOR THOSE HERETOFORE P. 1896. NO. 3772 NO. 3772 NO. 3772 NO. 3772 NO. 3772 NO. 3772 NO. MARRANT ISSUED AND HANDED TO AND HANDED TO	1897. No. 2462 No. 2462 No. 2462 Milboul'S PENS for year ending February 15th, PAID TO Man Six Grant Red grant dow of Milk Med grant RICHARD JOHNSON Commissioner o WARRANT ISSUED AND HANDED TO AND HANDED TO

Kengin aroune

L. Coken

FOR THOSE HERETOFORE PAID.

STATE OF GEORGIA. Dersonally Comes Mrs. County of De Mall Arvegenia Rosgin 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 Dec 19th Reagin of the Cobbs 1835 That she is the Widow of who was a Soldier in Company Regiment of La Volunteers, that he enlisted in said regiment on or about the month of . Rug Qui 186 / and served in the Army up to... day of Oax _____1864 (State here full particulars of the husband's death, when, where and from what cause.) (... De was detailed as an enrolling Spicer and was shot by some deserter while in the discharge of Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 18.57, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of

De rall ...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	10
24 day of Heb 1896.	of recigious.
my species, Ordinary.	A Reagieur

STATE OF GEORGIA,	Dersonally Comes Mrs.
County of A. e. Kall	Arvagena Reagin
De Kall State	bath, that she is a bona fide resident of said county of
continuously ever since see her lig	That she is the Widow of
C of the lookby Le	who was a Soldier in Company
Volunteers, that enlisted in said regiment on or about	it the month of
	(QQ1 186 4 That he lost his
	OCY 186 4, (State here
full particulars of the husband's death, when, where an Me was shor while en rolling of item	d from rehat cause.)
•	
	ed soldier, during his service in the army as a soldier,
	aid, that she became his wife in the year 18_3 Z, is State 23d day of December, 1890, and has not
0 6/100	te. I have been allowed a pension as a resident of year ending February 15th, 1896, and now apply for
the pension provided by law for the year ending Feb	ruary 15th, 1897.
Sworn to and subscribed bafore me, this 3 day of the 1897.	_ A Radejiew

Sworn to and subscribed before me, this	A Raciejiew
3 day of the 1897.	- or very rew
3 day of het 1897.	Post-office

PUWER OF ATTURNEY.

I,hereby authorize ofto receive and receipt for the pension paid hereon and reques that he remit same toat IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of1898.	State of Georgia,		Countu.	
Those Hercetofore Paid. Those Hercetofore Paid. Those Hercetofore Paid. The Paid. The Paid of State of State of Paid. The Paid of State o				
Those Heretofore Paid. 1898. State of the Executed In the besence of County,	I,	hereby authorize		77
Those Heretofore Paid. 1889. PAID THOSE HERETOF PENDLY, 1888. PAID TO County, Count	of	to receive and receipt	for the pension paid hereon as	nd request
Those Heretofore Paid. 1888. 3330 WYS PENSION, rear ending February 16th, 1888. PAID TO AND HANDED TO WARRANT ISSUED 277 ISSUED	that he remit same to	at-		
Those Heretofore Paid. 1888. 3330 WYS PENSION, rear ending February 16th, 1888. PAID TO AND HANDED TO WARRANT ISSUED 277 ISSUED	In Wanna Wannan I have become			
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POWER OF ATTORNEY.

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		(-	of	• • • • • • •	
to receiv	e and rece	ipt for the pensi	on paid hereon a	nd request	that he remi
	•		at		
	WITNES	s whereof,		et my hand	and seal, this
day of			1899.		
2.1	Executed	in presence of			
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	7 - 2 - 2 - 4				
		= .	ounty	naions.	1899.
3 3		SION, 1899.	County	ON,	1
		(WSION, 7 15th, 1899.	County	INSON, issioner of Pensione.	1
	NO.	PENSION, breary 16th, 1899.	County	JOHNSON, Commissioner of Pensions.	1
	2464	S PENSION, ng February 15th, 1889.	Out County	Commissioner of Pensions.	1
For Those Heretofore Paid.	NO. 2 4.67	IDOW'S PENSION, For year ending February 15th, 1899.	County County	RICHARD JOHNSON, Commissioner of Princions.	WARRANT ISSUED AND KADED TO AND KADED TO

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,	Personally Comes Mrs.
County of De Kalh	Arvagena Reagon
Dekalh	nys on oath, that she is a bona fide resident of said county of
continuously ever since Dee 19th	18 35 That she is the Widow of
Cooks Cobbs Legis	who was a Soldier in Company
Volunteers, that he enlisted in said regiment on or about	it the month of Aug
186 / and served in the Army up to	1864 That he lost his
	Olf 1864 (State here
full particulars of the husband's death, when, where	
	doing duly as
Lithonia, Gai	officer firms
a correct of the control of the cont	
	oldier, during his service in the army as a soldier, and that
she has never married since his death aforesaid, and that I have been allowed a pension as a resident of	
February 15th, 1897, and now apply for the pension pro	vided by law for the year ending February 15th, 1898.
Sworn to and subscribed before me, this	
day of Met 1898.	Reesgress
State of Georgia,	I MM Negsulece, Ordinary of said County, certify that I am well acquainted
	Grainary of said County, certify that I am well acquainted
0	e is the individual she represents herself to be, and that she
has continuously resided in this State since the	day of18
Given under my official signature and seal this the	122211
1 1 1	Magadece,
Official Scal. Ordina	ary of Ackach County.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,	Personally Comes Mrs.
County of De Kall	Arvegena Reagin
11 11 01	oath, that she is a bona fide resident of said county of
.0	e of Georgia, and that she has RESIDED in said State
continuously ever since. He 19"	1895 That she is the Widow of
May Neagin	who was a soldier in Company
of the Cooks Le	Adament of
Volunteers, that he enlisted in said regiment on or about the	
186 and served in the Army up to	186 4 That he lost his
life on the 19 day of Q	
full particulars of the husband's death, when, where and	
Was shot and Bill	ed while serving
as an enrolling	officer
	100
7	ecame his wife in the year 18 57. County for the year ending
fied that the facts therein stated are true, and I know she is t	
has continuously resided in this State since the	day of 200 18351
Given under my official signature and seal this the	9 day of Jun 1899.
Im	Man-dee
(Official)	O a al
Seal. Ordinar	of AlCala County.

POWER OF ATTORNEY.

STATE OF GEORGIA, County. hereby authorize to receive and receipt for the pension paid hereon and request that he remit same to IN WITNESS WHEREOF, I have herento set my hand and seal, this [L. S.] Executed in presence of

NO. 727

1900.

WIDOW'S PENSION

For year ending February 15th, 1900.
PAID TO
PAID TO
PAID TO
PAID TO

JNO. W. LINDSEY,

Commissioner of Pensi WARRANT ISSUED

POWER OF ATTORNEY.

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· · · · · · · · · · · · · · · · · · ·	of.	·	nereby aut	пот
o receive and receipt for the pension	naid hereon	and request	that he remit sa	me
o receive and receipt for the pension	at	and request		
IN WITNESS WHEREOF, I	I have hereunto	set my han	d and seal, this	
lay of1901.		, , , ,		
ay orroor.				L. 5
				4.

To Those Heretofore Paid.

1901.

No. 372

WIDOW'S PENSION

JOHN W. LINDSEY, WARRANT ISSUED

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,	Personally Comes Mrs.
County of de Kalh	1 Asiagenia Magin
	are such that the is a home fide wealthant of soil county of
(W. 1/4	on oath, that she is a bona fide resident of said county of
1	State of Georgia, and that she has RESIDED in said State
continuously ever since 5 ee 1911	18.33 . That she is the Widow of
11 " hollegging	who was a soldier in Company
of the Coffe Legi	Regiment of Ja
Volunteers, that he enlisted in said regiment on or about	at the month of care
186 and served in the Army up to	186 That he lost his
life on theday ofday of	CCF 1864 (State here
particulars of the husband's death, when, where and	from what cause)
Marty Chice is	the divaleting
15 11111111111	ensaching is ine
	5 77.
· ·	<u>)</u>
Deponent swears that she was the wife of said deceased so	oldier, 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 2
I have been allowed a pension as a resident of	
	provided by law for the year ending February 15th, 1900.
Sworn to and subscribed before me, this	
	de Recegiace
1900.	Post Office
igitale godeces Ordinary.	
	1 /1. M. lagelace
State of Georgia,	.0
	Ordinary of said County, certify that I am well acquainted
with Mrs. & sagina Men	9/11, who made the above affidavit and am satis-
fied that the facts therein stated are true, and I know sh	e is the individual she represents herself to be, and that she
has continuously resided in this State since the	9 day of Scce 18.35
Given under my official signature and seal, this	the 18" day of 211 1900.
	Milla godace
Sen!	linary of De Hall County.

For Widows Heretofore Allowed Pensions.

County of Le Rall State of Georgia, and that she has ansatzen in said State continuously ever since See 1 1 1 1 8 3 5 . That she is the Widow of Who was a soldier in Company of the early up to 186 . That he enlisted in said regiment on or about the month of 186 . That he lost his 186 . That he los	County of De Rall	
State of Georgia, and that she has RESIDED in said State continuously ever since. State of Georgia, and that she has RESIDED in said State continuously resided in the Army up to. Wolunteers, that he enlisted in said regiment on or about the month of the list his life on the law bear 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, 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, and that she became his wife in the year 18 3 1 Louis for the year ending February 15th, 1 2 and now apply for the pension provided by law for the year ending February 15th, 1901. Sworn to and subscribed before me, this day of the year said County, certify that I am well acquainfed 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 1911 day of Said County, certify that I am well acquainfed 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 1911 day of Said County, Certify that I am well acquainfed 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 1911 day of Said County, Sa		I svisenia Reagin
State of Georgia, and that she has RESIDED in said State continuously ever since. State of Georgia, and that she has RESIDED in said State continuously resided in the Army up to. Wolunteers, that he enlisted in said regiment on or about the month of the list his life on the law bear 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, 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, and that she became his wife in the year 18 3 1 Louis for the year ending February 15th, 1 2 and now apply for the pension provided by law for the year ending February 15th, 1901. Sworn to and subscribed before me, this day of the year said County, certify that I am well acquainfed 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 1911 day of Said County, certify that I am well acquainfed 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 1911 day of Said County, Certify that I am well acquainfed 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 1911 day of Said County, Sa		0
continuously ever since. Select 18.36. That she is the Widow of who was a soldier in Company of the College of the Army up to. 186 and served in the Army up to. 186 That he lost his life on the particulars of the husband's death, when, where and from what cause). 186 State here particulars of the husband's death, when, where and from what cause). 186 State here particulars of the husband's death, when, where and from what cause). 186 State here particulars of the husband's death, when, where and from what cause). 186 That he lost his life on the selection of the select	No IN a UV	
who was a soldier in Company Of the Lore to Seyson. Regiment of 186 Not the Lore to Regiment of 186 Not the Lo	Dea 19th	132
who was a soldier in Company Of the Lore to Seyson. Regiment of 186 Not the Lore to Regiment of 186 Not the Lo	continuously ever since	. That she is the Widow 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 186 (State here 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, and that she became his wife in the year 18 5 // I have been allowed a pension as a resident of Delitah County for the year ending February 15th, 1 // Z, and now apply for the pension provided by law for the year ending February 15th, 1901. Sworn to and subscribed before me, this day of 1901. Ordinary. Post Office State of Georgia, Ordinary. Post Office State of Georgia, Ordinary of said County, certify that I am well acquainted with Mrs. Subspice of the 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 1911 day of 1825,	1 10000	who was a soldier in Company
186 and served in the Army up to. 186 That he lost his life on the particulars of the husband's death, when, where and from what cause) 186 (State here particulars of the husband's death, when, where and from what cause) 188 (State here particulars of the husband's death, when, where and from what cause) 188 (State here particulars of the husband's death, when, where and from what cause) 188 (State here particulars of the husband's death, when, where and from what cause) 188 (State here particulars of the husband's death, when, where and from what cause) 189 (State here particulars of the husband's death, when, where and from what cause) 189 (State here particulars of the husband's death, when, where and from what cause) 189 (State here particulars of the husband's death, when, where and from what cause) 189 (State here particulars of the husband's death, when what cause) 180 (State here particulars of the husband's death, when what cause) 180 (State here particulars of the husband's death, when what cause) 180 (State here particulars of the husband's death, when what cause) 180 (State here particulars of the husband's death, when when cause) 180 (State here husband's death, when, where and from what cause) 180 (State here husband's death, when, where and from what cause) 180 (State here husband's death, when, where and from what cause) 180 (State here husband's death, when, where and from what cause) 180 (State here husband's death, when, where and from what cause) 180 (State here husband's death, when, where and from what cause) 180 (State here husband's death, when, where and from what cause) 180 (State here husband's death, when, where and from what cause) 180 (State here husband's death, when, where and from what cause) 180 (State here husband's death, when, where and from what cause) 180 (State here husband's death, when, where and from what causes) 180 (State here husband's death, when, where husband's death husband's death h	of the Covrodey	Regiment of 79
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 5%. I have been allowed a pension as a resident of Delitar County for the year ending February 15th, 127, and now apply for the pension provided by law for the year ending February 15th, 1901. Sworn to and subscribed before me, this grant and grant grant and grant	Volunteers, that he enlisted in said regiment on or about t	he month of Aug
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 5%, I have been allowed a pension as a resident of Dellad County for the year ending February 15th, 1 12, and now apply for the pension provided by law for the year ending February 15th, 1 201. Sworn to and subscribed before me, this day of Land County, Certify that I am well acquainted with Mrs. State Of Georgia, Ordinary of said County, certify that I am well acquainted with Mrs. Swapen a Reaging , 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 1911 day of Receipts 1835,		
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 5%, I have been allowed a pension as a resident of Dellad County for the year ending February 15th, 1 12, and now apply for the pension provided by law for the year ending February 15th, 1 201. Sworn to and subscribed before me, this day of Land County, Certify that I am well acquainted with Mrs. State Of Georgia, Ordinary of said County, certify that I am well acquainted with Mrs. Swapen a Reaging , 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 1911 day of Receipts 1835,	life on the 19 day of Ot	2/ 1864 (State here
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 5%. I have been allowed a pension as a resident of Delland County for the year ending February 15th, 1977, and now apply for the pension provided by law for the year ending February 15th, 1901. Sworn to and subscribed before me, this day of the pension provided by law for the year ending February 15th, 1901. Post Office State of Georgia, Ordinary. Post Office Ordinary of said County, certify that I am well acquainted with Mrs. Deagle Ordinary. Ordinary of said County, certify that I am well acquainted 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 19" day of 2000.		
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 5%. I have been allowed a pension as a resident of Delland County for the year ending February 15th, 1977, and now apply for the pension provided by law for the year ending February 15th, 1901. Sworn to and subscribed before me, this day of the pension provided by law for the year ending February 15th, 1901. Post Office State of Georgia, Ordinary. Post Office Ordinary of said County, certify that I am well acquainted with Mrs. Deagle Ordinary. Ordinary of said County, certify that I am well acquainted 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 19" day of 2000.	Was enrolling o	Theer and was
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 3%. I have been allowed a pension as a resident of Delland County for the year ending February 15th, 1972, and now apply for the pension provided by law for the year ending February 15th, 1901. Sworn to and subscribed before me, this day of the pension provided by law for the year ending February 15th, 1901. Post Office State of Georgia, Ordinary. Post Office Ordinary of said County, certify that I am well acquainted with Mrs. Deagle Ordinary of said County, certify that I am well acquainted 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 19" day of 2002.	shor while ar	This duty
I have been allowed a pension as a resident of Dellar County for the year ending February 15th, 1 1 2, and now apply for the pension provided by law for the year ending February 15th, 1901. Sworn to and subscribed before me, this day of 1901. Post Office State of Georgia, Ordinary. Post Office I May County, County that I am well acquainted with Mrs. Avagema Post of the year ending February 15th, 1901. Ordinary of said County, certify that I am well acquainted 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 1911 day of 2012.		
I have been allowed a pension as a resident of Dellar County for the year ending February 15th, 1 1 2, and now apply for the pension provided by law for the year ending February 15th, 1901. Sworn to and subscribed before me, this day of 1901. Post Office State of Georgia, Ordinary. Post Office I May County, County that I am well acquainted with Mrs. Avagema Post of the year ending February 15th, 1901. Ordinary of said County, certify that I am well acquainted 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 1911 day of 2012.	1	
I have been allowed a pension as a resident of Dellar County for the year ending February 15th, 1 1 2, and now apply for the pension provided by law for the year ending February 15th, 1901. Sworn to and subscribed before me, this day of 1901. Post Office State of Georgia, Ordinary. Post Office I May County, County that I am well acquainted with Mrs. Avagema Post of the year ending February 15th, 1901. Ordinary of said County, certify that I am well acquainted 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 1911 day of 2012.		
I have been allowed a pension as a resident of Dellar County for the year ending February 15th, 1 1 2, and now apply for the pension provided by law for the year ending February 15th, 1901. Sworn to and subscribed before me, this day of 1901. Post Office State of Georgia, Ordinary. Post Office I May County, County that I am well acquainted with Mrs. Avagema Post of the year ending February 15th, 1901. Ordinary of said County, certify that I am well acquainted 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 1911 day of 2012.	· · · · · · · · · · · · · · · · · · ·	······································
I have been allowed a pension as a resident of Dellar County for the year ending February 15th, 1 1 2, and now apply for the pension provided by law for the year ending February 15th, 1901. Sworn to and subscribed before me, this day of 1901. Post Office State of Georgia, Ordinary. Post Office I May County, County that I am well acquainted with Mrs. Avagema Post of the year ending February 15th, 1901. Ordinary of said County, certify that I am well acquainted 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 1911 day of 2012.		
I have been allowed a pension as a resident of Dellar County for the year ending February 15th, 1 1 2, and now apply for the pension provided by law for the year ending February 15th, 1901. Sworn to and subscribed before me, this day of 1901. Post Office State of Georgia, Ordinary. Post Office I May County, certify that I am well acquainted with Mrs. Avaginary Deagan, 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 19" day of 200.		
I have been allowed a pension as a resident of Della County for the year ending February 15th, 1 12, and now apply for the pension provided by law for the year ending February 15th, 1901. Sworn to and subscribed before me, this day of 1901. Post Office State of Georgia, Ordinary. Post Office Ordinary of said County, certify that I am well acquainted with Mrs. Description, 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 1911 day of 2002.	Deponent swears that she was the wife of said deceased sold	
Sworn to and subscribed before me, this Gay of		
State of Georgia, State of Georgia, County Ordinary of said County, certify that I am well acquainted with Mrs. Avagema Region, 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 19" day of Region 1835,	she has never married since his death aforesaid, and that si	ne became his wife in the year 18 57,
State of Georgia, Ordinary. Ordinary of said County, certify that I am well acquainted with Mrs. Avagemia Reagin, 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 19" day of Deep 1835,	she has never married since his death aforesaid, and that si I have been allowed a pension as a resident of	Delicate his wife in the year 18 57, County for the year ending
State of Georgia, Jeffel County. Ordinary of said County, certify that I am well acquainted with Mrs. Desgrin, 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 19" day of Decgrin 1835,	she has never married since his death aforesaid, and that si I have been allowed a pension as a resident of	Delicate his wife in the year 18 57, County for the year ending
State of Georgia, Julian County. Ordinary of said County, certify that I am well acquainted with Mrs. Aurgenia Reagin, 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 19" day of Dree 1835,	she has never married since his death aforesaid, and that since have been allowed a pension as a resident of	Delicate his wife in the year 18 57, County for the year ending
State of Georgia, Julian County. Ordinary of said County, certify that I am well acquainted with Mrs. Aurgenia Reagin, 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 19" day of Dree 1835,	she has never married since his death aforesaid, and that since his death aforesaid, and that since have been allowed a pension as a resident of February 15th, 1 , and now apply for the pension p Sworn to and subscribed before me, this	Delicate his wife in the year 18 57, County for the year ending
De Roll County. Ordinary of said County, certify that I am well acquainted with Mrs. Avagema Reagem, 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 19" day of Dree 1835,	she has never married since his death aforesaid, and that all I have been allowed a pension as a resident of. February 15th, 1 1 , and now apply for the pension p Sworn to and subscribed before me, this day of 1001.	De became his wife in the year 18 5%. County for the year ending rovided by law for the year ending February 15th, 1901. Arvasania Repair
De Roll County. Ordinary of said County, certify that I am well acquainted with Mrs. Avagema Reagem, 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 19" day of Dree 1835,	she has never married since his death aforesaid, and that all I have been allowed a pension as a resident of. February 15th, 1 1 , and now apply for the pension p Sworn to and subscribed before me, this day of 1001.	De became his wife in the year 18 5%. County for the year ending rovided by law for the year ending February 15th, 1901. Arvasania Repair
with Mrs. Awazinia Reagin, 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 19" day of Die 1835,	she has never married since his death aforesaid, and that all I have been allowed a pension as a resident of February 15th, 1 1 7 and now apply for the pension p Sworn to and subscribed before me, this day of 1801.	De became his wife in the year 18 5%. County for the year ending revided by law for the year ending February 15th, 1901. Avagenia Republication of the Post Office
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 19" day of Die 1835,	she has never married since his death aforesaid, and that af I have been allowed a pension as a resident of. February 15th, 1 77, and now apply for the pension p Sworn to and subscribed before me, this day of 1901. State of Georgia,	De became his wife in the year 18 5%. County for the year ending rovided by law for the year ending February 15th, 1901. Arvasania X Regan Post Office 1. M.M. Ragadale,
has continuously resided in this State since the 19" day of Dice 1835',	she has never married since his death aforesaid, and that at I have been allowed a pension as a resident of. February 15th, 1 1 2 , and now apply for the pension p Sworn to and subscribed before me, this day of 1901. State of Georgia, Lead County.	Delicate County for the year 18 5%. County for the year ending February 15th, 1901. Avagence Representation of the Year ending February 15th, 1901. Post Office Representation of the Year ending February 15th, 1901. I Mill Republication of the Year ending February 15th, 1901. The County of the Year ending February 15th, 1901. The County of the Year ending February 15th, 1901.
a · · · · ·	she has never married since his death aforesaid, and that at I have been allowed a pension as a resident of. February 15th, 1 1 2 , and now apply for the pension p Sworn to and subscribed before me, this day of 1901. State of Georgia, Lead County.	Delicate County for the year 18 5%. County for the year ending February 15th, 1901. Avagence Representation of the Year ending February 15th, 1901. Post Office Representation of the Year ending February 15th, 1901. I Mill Republication of the Year ending February 15th, 1901. The County of the Year ending February 15th, 1901. The County of the Year ending February 15th, 1901.
Given under my official signature and seal, this the hands and seal, this the hands are seal and seal are seal and seal are seal and seal are seal and seal are seal are seal are seal and seal are seal	she has never married since his death aforesaid, and that all I have been allowed a pension as a resident of February 15th, 1 177, and now apply for the pension p Sworn to and subscribed before me, this day of 1901. State of Georgia, County. With Mrs. Avagema Reage that the facts therein stated are true, and I know she is to	County for the year ending rovided by law for the year ending February 15th, 1901. Post Office I My Regalace, brilinary of said County, certify that I am well acquainted the individual she represents herself to be, and that she
	she has never married since his death aforesaid, and that all I have been allowed a pension as a resident of February 15th, 1 177, and now apply for the pension p Sworn to and subscribed before me, this day of 1901. State of Georgia, County. With Mrs. Avagema Reage that the facts therein stated are true, and I know she is to	County for the year ending rovided by law for the year ending February 15th, 1901. Post Office I My Regalace, brilinary of said County, certify that I am well acquainted the individual she represents herself to be, and that she
- Magsakle	she has never married since his death aforesaid, and that all I have been allowed a pension as a resident of February 15th, 1 [72], and now apply for the pension p Sworn to and subscribed before me, this day of 1901. State of Georgia, County. State of Georgia, County. With Mrs. Avagina Resynthat the facts therein stated are true, and I know she is that continuously resided in this State since the 1911	County for the year ending rovided by law for the year ending February 15th, 1901. Arvagency Representation of the Year ending February 15th, 1901. Post Office 1 MM Respected Prilinary of said County, certify that I am well acquainted the individual she represents herself to be, and that she day of Research
Official Beal. Ordinary of De Roll County.	she has never married since his death aforesaid, and that all I have been allowed a pension as a resident of February 15th, 1 [72], and now apply for the pension p Sworn to and subscribed before me, this day of 1901. State of Georgia, County. With Mrs. Avagina Resystate that the facts therein stated are true, and I know she is that continuously resided in this State since the 1911. Given under my official signature and seal, this the	County for the year ending rovided by law for the year ending February 15th, 1901. Arvagency Representation of the Year ending February 15th, 1901. Post Office 1 MM Respected Prilinary of said County, certify that I am well acquainted the individual she represents herself to be, and that she day of Research

STATE OF GEORGIA, County. to receive and receipt for the pension paid hereon, and request that he remit same to In Witness Whereof, I have hereunto so my hand and seal, this. day of Executed in presence of WARRANT ISSUED JOHN W. LINDSEY,

Widow of.

· . · . · · · · · · · · · · · · · · · ·			at		<u> </u>	at he remit san
				to set my m		
	executed in	presence of				[L
1. <u>1. j.</u>	* · · · · · · · · · · · · · · · · · · ·					
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اختا			3	County,	f Pensi	130
aid.		See	2	2-4-12	2. 6.	9 /
To Those Hereiofore Paid.	14.2	IDOW'S PENSIC	GENERA PER .	o de	JOHN W. LINDSEY,	WARRANT ISSUED AND HANDED TO

ror widows heretoiore allowed rensions.

STATE OF GEORGIA, PERSONALLY COMES MRS.
County of Die Kalh I Arvagina Reagin
who begins grown and the best had been all the state of t
Dee Hall . State of Georgia, and that she has RESIDED in said State
continuously ever since Dec 18"1835 . That she is the Widow of
Win & Reagin who was a soldier in Company
C of the leable Legion Regiment of
Volunteers, that he enlisted in said regiment on or about the month of Aug 61
186 /, and served in the Army up to Old 186 4. That he lost his
life on the 19 day of Oct 1864. (State here
participars of the husband's death, when, where and from what cause)
thor while in discharge of his hily
Shor while in discharge of his duty in service 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, and that she became his wife in
the year 18 3 7.
I have been paid a pension as a resident of Le Kalh County for the
year ending December 31, 1901, and now apply for the pension provided by law for the year ending
December 31, 1902.
this 17 day of an 1902. Assignment Reaging WMWogsday, Ordinary. Post-Office
12 la Svasena X Reagin
land in all
Willwogsday, Ordinary. Post-Office
State of Georgia,
Dekath, County. Ordinary of said County, certify that I am well
acquainted with Mrs. Awagena Reagin, who made the above affidavit and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
hereself to be, and that she has continuously resided in this State since the
day of fice 1,35)
in C.
Given under my official signature and seal, this the day of day of 1902.
Official Monday Rale
Ordinary of De Rath County.

NOTE. – All blank spaces must be filled.

Voucher and affidavit must bear date after January 1st, 1902.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA PERSONALLY COMES MRS County of De Math Savagena Reagin
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 Ree 1911/835. That she is the Widow of
of the Cobbe Legion Regiment of La.
Volunteers, that he enlisted in said regiment on or about the month of July
186/, and served in the Army up to Oly 1864. That he lost his
life on the 191 day of OCI 1864 (State here
particulars of the husband's death, when, where and from what cause.) Shot while In duty as an Eurolling of ficer
The same of the sa
soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18 5 I have been paid a pension as a resident of
this 7 day or an 1908. This Land subscribed before me, the concern this Little rica, Ear. Post-Office Little rica, Ear.
State of Georgia, Je Kalk County. Ordinary of said County, certify that I am well
acquainted with Mrs. 4 3 vafena Cagin , 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 Dec 1835, Given under my official signature and sear this the Z day of 1903.
Given under my official signature and seal this the day of My 1903.
(Official) Seal.
Ordinary of Seal County.

NOTE.—All blank Spaces must be filled.

UF ALLUKNET STATE OF GEORGIA, COUNTY. hereby authorize to receive and receipt for the pension paid hereon, and request that he remit same to IN WITNESS WHEREOF, I have hereunto set my hand and seal, this A Executed in presence of Januar P. Gunga WIDOW'S PENSION FOR
YEAR ENDING DECEMBER 31, 1904
PAID TO TO THOSE HERETOFORE PAID. JOHN W. LINDSEY, Commissioner of 1904. WARRANT ISSUED Mus Woogenia AND HANDED TO

, this [L.	nd and seal,	at reunto set my 05.	, I have l	ess Whered		
	5				f	day of
					10	
			ce of	l in presen	Execute	
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		my , of many				
906.	sions.	12,	10			1
1905.	JOHN W. LINDSEY, Commissioner of Pensions.	County,	year ending Dec. 31, 1905.	10		To Those Heretofore Paid.
		8				•

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA.	PERSONALLY COMES MRS.
County of A Wall	awezenia Reagin
2012.11	ath, that she is a bona fide resident of said County of
continuously ever since DER 19	State of Georgia, and that she has RESIDED in said State
11171 X 10.	
	who was a soldier in Company
of the	Verbles Regiment of
Volunteers, that he eniisted in said regimen	nt on or about the month of
186 /, and served in the Army up to	186 . That he lost his
life on theday of	COX 1864 (State here
particulars of the husband's death, when, where	
Shot as ensolling	ey officer
	<u>.</u>
Deponent swears that she was the wife of s	aid deceased soldier, during his service in the Army as a
soldier, and that she has never married s	ince his death aforesaid, and that she became his wife in
the year 18 51	6 L
I have been paid a pension as a reside	ent of A E Kall County for the
year ending December 31, 1903, and now a	pply for the pension provided by law for the year ending
December 31, 1904.	
Sworn to and subscribed before me,	P. 5
Qa	arozurio & Reagin
this day of fully	Post Office With 1
Janus Rejurge Ordin	ary.
	1 James PSerge
State of Georgia,	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
그들은 보고 있는 남자 그림을 내려 되었다면 그리고 있다면 가는 것이 살아 있는데 그는 그리고 있다면 하는데 그리고 있다.	nty. Ordinary of said County, certify that I am well
acquainted with Mrs. Www. junia	Magin, 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 8 0 18 3 3	5
Given under my official signature and	seal, this the day of Jaury 1904.
	Janus R. Gurge
Official Seal	1 1819016
· ~~	Ordinary of A County,

NOTE.—All blank spaces must be filled.

Voucher and Affidavit must bear date after January 1st, 1904.

For Widows Heretofore Allowed Pensions.

County of 1	1. 12. 11 8 11	2
	Sestall & Urregenia	reage
who,	being sworn says on oath, that she is a bona fide resident of said	County of
Destall	State of Georgia, and that she has RESIDED in	said State
ontinuously ever since	. That she is the	
11/1)	Lugin who was a soldier in	
C of the C	obbs Acagion Regiment of	
		* .
	ed in said regiment on or about the month of	
6 , and served in t		he lost his
fe on the	day of18	(State here
irliculars of the husband	's death, when, where and from what cause.)	+186
maca a	s enrolling officer al	1 / 0.0

		*
	pension as a resident of AllTall Cou , 1904, and now apply for the pension provided by law for the y	nty for the
December 31, 1905.		
	peribed before me, Toronesiana F.P.	as
19 day of	lang 1905. and make	10:
anus RK	Post-Office Post-Office	
· · · · · · · · · · · · · · · · · · ·	0 0	6
State of Georgia	i, famo, T.	dun
Distul		
	County. Ordinary of said County, certify the	at I am well
causinted with Mrs	121	
cquainted with Mrs	progenic Ringing Who made the above a	iffidavit and
m satisfied that the fact	Svengenics Magine, Who made the above a stherein stated are true, and I know sho is the individual she	iffidavit and
am satisfied that the fact	Start stated are true, and I know she is the individual she has continuously resided in this State since the	iffidavit and
m satisfied that the fact derself to be, and that sh	s therein stated are true, and I know she is the individual she to has continuously resided in this State since the	iffidavit and
m satisfied that the fact derself to be, and that sh	Start stated are true, and I know she is the individual she has continuously resided in this State since the	iffidavit and
m satisfied that the fact derself to be, and that sh	s therein stated are true, and I know she is the individual she to has continuously resided in this State since the	iffidavit and

NOTE.—All blank spaces must be filled.

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

PUWER OF ALLUMNET STATE OF GEORGIA, COUNTY. hereby authorize to receive and receipt for the pension paid hereon, and request that he remit same to In Witness Whereof, I have hereunto set my hand and seal, this _[L. S.] Executed in presence of WIDOW'S PENSION For year ending Dec. 31, 1906. To Those Heretofore Paid. JOHN W. LINDSEY 19061 WARRANT ISSUED AND HANDED TO No. 347

POWER OF ATTORNEY. STATE OF GEORGIA. DeKALB. COUNTY. hereby authorize to receive and receipt for the pension paid hereon, and request that he remit same to itness Whereo, I have hereunto set my hand and seal, this. Ar Veyerice Reenegical Executed in presence of WIDOW'S PENSIC of W. S. Reag JOHN W. LINDSEY, Regiment AND HANDED TO

Mrs Cowegonia

DeKALB.

WARRANT ISSUED

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,	PERSONALLY COMES MRS.
County of D" Kalk	- Chroesenia Reagin
who boing aways care or an	
· / - / //	th that she is a bona fide resident of said County of
State	of Georgia, and that she has RESIDED in said State
ontinuously ever since X ec 191	/533 That she is the Widow of
M. Meggin	who was a soldier in Company
to of the Cooks Leg	A Price of
olunteers, that he enlisted in said regiment on	
86 and served in the Army up to	
ife on theday	of 1864 (State here
articulars of the husband's death, when, where an	nd from what cause.)
Killed as enro	lling officer
and the same of the same and th	
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
oldier, and that she has never married since his	eceased soldier, during his service in the Army as a s death aforesaid, and that she became his wife in
oldier, and that she has never married since his the year 18 I have been paid a pension as a residen	s death aforesaid, and that she became his wife in at of Nall County, for the
oldier, and that she has never married since his he year 18	s death aforesaid, and that she became his wife in
oldier, and that she has never married since his the year 18 I have been paid a pension as a residen rear ending December 31, 1905, and now apply f	s death aforesaid, and that she became his wife in at of Nall County, for the
oldier, and that she has never married since his the year 18 I have been paid a pension as a residen tear ending December 31, 1905, and now apply for December 31, 1906. Sworn to and subscribed before me	s death aforesaid, and that she became his wife in at of Nall County, for the
I have been paid a pension as a residence are ending December 31, 1905, and now apply for elements 31, 1906. Sworn to and subscribed before me has 22 day of farmy 1906.	s death aforesaid, and that she became his wife in at of Nall County, for the for the pension provided by law for the year ending
oldier, and that she has never married since his he year 18	s death aforesaid, and that she became his wife in at of Nall County, for the for the pension provided by law for the year ending
oldier, and that she has never married since his he year 18. I have been paid a pension as a resident ear ending December 31, 1905, and now apply for December 31, 1906. Sworn to and subscribed before me his 22 day of farmed 1908.	s death aforesaid, and that she became his wife in at of Nall County, for the for the pension provided by law for the year ending
I have been paid a pension as a resident ear ending December 31, 1905, and now apply for the pecember 31, 1906. Sworn to and subscribed before me has 22 day of farmy 1908. State of Georgia,	s death aforesaid, and that she became his wife in at of Nall County, for the for the pension provided by law for the year ending
I have been paid a pension as a resident ear ending December 31, 1905, and now apply for December 31, 1906. Sworn to and subscribed before me his 22 day of farmed 1906.	s death aforesaid, and that she became his wife in at of Nall County, for the for the pension provided by law for the year ending
I have been paid a pension as a resident par ending December 31, 1905, and now apply for the part of t	s death aforesaid, and that she became his wife in at of Nall County, for the for the pension provided by law for the year ending Flanks will Regarded Post Office Land Stanta
I have been paid a pension as a resident parenting December 31, 1905, and now apply for the parenting December 31, 1905, and now apply for the parenting December 31, 1906. Sworn to and subscribed before menting December 31, 1906. Sworn to and subscribed before menting December 31, 1906. State of Georgia, County.	s death aforesaid, and that she became his wife in at of Nall County, for the for the pension provided by law for the year ending Post Office Lant Ollanda Post Office Lant Ollanda Ordinary of said County, certify that I am well Caryin, who made the above affidavit, and
I have been paid a pension as a resident ear ending December 31, 1905, and now apply for the pecember 31, 1906. Sworn to and subscribed before me has 22 day of farmy 1906. State of Georgia, County. Squainted with Mrs Avergence 12 and a subscribed before me has a subscribed before me has 22 day of farmy 1906.	s death aforesaid, and that she became his wife in at of Nall County, for the for the pension provided by law for the year ending Post Office Sant Office Post Office Sant Office Ordinary of said County, certify that I am well County, who made the above affidavit, and e, and I know she is the individual she represents
I have been paid a pension as a resident rear ending December 31, 1905, and now apply for December 31, 1906. Sworn to and subscribed before me his 22 day of January 1908. State of Georgia, County of Coun	s death aforesaid, and that she became his wife in at of Nall County, for the for the pension provided by law for the year ending Post Office Sant Office Post Office Sant Office Ordinary of said County, certify that I am well County, who made the above affidavit, and e, and I know she is the individual she represents
I have been paid a pension as a resident the year 18	s death aforesaid, and that she became his wife in at of Nall County, for the for the pension provided by law for the year ending Flank State since the Law and I know she is the individual she represents led in this State since the
I have been paid a pension as a resident pear ending December 31, 1905, and now apply for December 31, 1906. Sworn to and subscribed before me this 22 day of January 1908. State of Georgia, County of Cou	s death aforesaid, and that she became his wife in at of Nall County, for the for the pension provided by law for the year ending Flank State since the Law and I know she is the individual she represents led in this State since the
I have been paid a pension as a resident ear ending December 31, 1905, and now apply for the pecember 31, 1906. Sworn to and subscribed before me has 22 day of form 1908. State of Georgia, County.	s death aforesaid, and that she became his wife in at of Nall County, for the for the pension provided by law for the year ending Flank State since the Law and I know she is the individual she represents led in this State since the
I have been paid a pension as a resident per sear 18. I have been paid a pension as a resident per ending December 31, 1905, and now apply for ecember 31, 1906. Sworn to and subscribed before mendis 12 2 day of farmy 1906. State of Georgia, County. State of Georgia, County.	county, for the state person of the pension provided by law for the year ending the pension provided by law for the year ending post Office Last Oblasta Post Office Last Oblasta Ordinary of said County, certify that I am well the said County, who made the above affidavit, and e, and I know she is the individual she represents and in this State since the this the 2 day of Jassay 1906.
I have been paid a pension as a resident per ending December 31, 1905, and now apply for the per state of Georgia, State of Georgia, Equainted with Mrs. County. In satisfied that the facts therein stated are true present to be, and that she has continuously resident of the period of the perio	s death aforesaid, and that she became his wife in the state of Rall County, for the for the pension provided by law for the year ending Flank Systemial Regration Post Office Land Ordinary of said County, certify that I am well County, who made the above affidavit, and e, and I know she is the individual she represents and in this State since the

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,	PERSONALLY COMES MRS.
County of DeKALB.	arregenia Reagin
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
W D. Reagin	who was a soldier in Company
C of the Cobbs Legion	
*	그 보이는 아니는 아니는 아니는 아니는 아니는 아니는 아니는 아니는 아니는 아니
Volounteers, that he enlisted in said regiment on or	
186, and served in the Army up to	186 That he lost his
life on the	the second of th
particulars of the husband's death, when, where and fr	om what cause.)
Hilled as enrolling	y office, va. 1007
the year 18	
* I have been paid a pension as a resident of.	
* I have been paid a pension as a resident of.	
* I have been paid a pension as a resident of.	
* I have been paid a pension as a resident of. year ending December 31, 1906, and now apply for	r the pension provided by law for the year ending
* I have been paid a pension as a resident of. year ending December 31, 1906, and now apply for December 31, 1907.	
* I have been paid a pension as a resident of. year ending December 31, 1906, and now apply for December 81, 1907. Sworn to and subscribed before me	Atherenia Reagin Post Office Decating
1 have been paid a pension as a resident of year ending December 31, 1906, and now apply for December 81, 1907. Sworn to and subscribed before me day of Jany 1907. August Reference ordinary.	Atherenia Reagin
1 have been paid a pension as a resident of. year ending December 31, 1906, and now apply for December 81, 1907. Sworn to and subscribed before me this & day of Joury 1907. Authority Ordinary. State of Georgia,	Attrezenia Reagin Post Office De Cally & A. I James R. George
I have been paid a pension as a resident of year ending December 31, 1906, and now apply for December 81, 1907. Sworn to and subscribed before me day of Jany 1907. State of Georgia, DeKALB. County	Post Office Decarry S. George Ordinary of said County, certify that I am well
Thave been paid a pension as a resident of year ending December 31, 1908, and now apply for December 81, 1907. Sworn to and subscribed before me day of Joury 1907. State of Georgia, DeKALB. County.	Post Office Declarate Reagin I James R. George Ordinary of said County, certify that I am well in, who made the above affidavit, and
I have been paid a pension as a resident of year ending December 31, 1906, and now apply for December 81, 1907. Sworn to and subscribed before me day of Joury 1907. State of Georgia, Ordinary. State of Georgia, DeKALB. County. acquainted with Mrs. Awegania Reag. am satisfied that the facts therein stated are true,	Post Office Decarry Seage I. James R. George Ordinary of said County, certify that I am well m. , who made the above affidavit, and and I know she is the individual she represents
Thave been paid a pension as a resident of year ending December 31, 1908, and now apply for December 81, 1907. Sworn to and subscribed before me day of Joury 1907. State of Georgia, DeKALB. County. acquainted with Mrs. Awlgania Rang	Post Office Decarry Seage I. James R. George Ordinary of said County, certify that I am well m. , who made the above affidavit, and and I know she is the individual she represents
Thave been paid a pension as a resident of year ending December 31, 1906, and now apply for December 81, 1907. Sworn to and subscribed before me this subscribed before me th	Post Office Decarry Seager I James R. George Ordinary of said County, certify that I am well and I know she is the individual she represents in this State since the
Thave been paid a pension as a resident of year ending December 31, 1906, and now apply for December 31, 1907. Sworn to and subscribed before me this day of Joury 1907. State of Georgia, Ordinary. State of Georgia, County, acquainted with Mrs Awagania Rang am satisfied that the facts therein stated are true, herself to be, and that she has continuously resident.	Post Office Decarry S. George Ordinary of said County, certify that I am well the said I know she is the individual she represents and I know she is the individual she represents and in this State since the
Thave been paid a pension as a resident of year ending December 31, 1906, and now apply for December 81, 1907. Sworn to and subscribed before me this subscribed before me th	Post Office Decarry Seager I James R. George Ordinary of said County, certify that I am well and I know she is the individual she represents in this State since the

NOTE.—All blanks must be filled.

Vouchers and Affidavits must bear date after January lst, 1907

Stale of Georgias De Roll Conney ? Defere ine came Swith Whittey who upon cath sous that he was living nea I Thomas in he Kall County Leong in the year 1864, that he was then living with his father & that he was requirited with Jul & Reagin and Since him in The Capacity of an entolliers officer. Had seen him at Lithonia no my im this coprector That on The day on the day before saig 14 / 1 Deagin was shot he heave 15 one William Relley 11/10 had been a soldier in service for was then wont home say That if enrolling offices I'm 10 Relagin ever conce so Lithonia he would hill him That on The enging said Reagin was that which huppenes about four hundred yards from said Hellen house, after he was shot he was carried to my Tothers house, deponent heard whim (Kengin) Jay just after heining shot that I dillan lette was the man who shot him. so Sworn to and Subscribed & of autille si before me July 7th /891 Ordinasy.

INDIGENT PENSION, 1902. Name Reagin H.C., County Denable Co. C. Cobbs Legioneg'm't Approved 1902. JOHN W. LINDSEY, Commissioner of Pensions. WARRANT HANDED TO

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

POWER OF ATTORNEY.

STATE OF GEORGIA. COUNTY. hereby authorize to receive and receipt for the pension allowed, and request that he remit same to. Witness my hand and seal, this. day of. 1902. [L. S.] Executed in presence of INDIGENT PENSION W. LINDSEY, JOHN

Questions for Applicant. STATE OF GEORGIA. Bekall 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)

The Reaging State of State County and post office) 2. How long and singe when have you been a resident of this State? 63 years all a When and where were you born? 19EK all County 19th of June 1839 4. When and where and in what company and regiment did you enlist or serve? at the cature garines of the cature gar 5. How long did you remain in such company and regiment? At M. The 1861 to the surrender 6. When and where was your company and regiment surrendered and discharged? 7. Were you present with your company and regiment when it was surrendered? Was 8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? Was with My Command 9. How much can you earn (gross) per annum by your own exertions or labor? \$30.00 state whether you are totally blind and when and where you lost your sight? And the 25 de 13. What property, real or personal, or income, do you possess, and its gross value? I have wellhing 14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900 and 1901, and what disposition, if any, by sale or gift, have you made of same? I owned 37 acres hand during those years was a mortgage on so and and was sold to O Real and florend \$50000 years 1899, 1900 and 1901? by My own Labor those years, and what portion did you contribute thereto by When a your employment during 1898, 1899 and 1901?

Have you a samily? If so, who composes such family? wife daughter 2 sous Rod RHody Are you receiving any pension? If so, what amount and for what disability? 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? Not am Applicant.

STATE OF GEORGIA,
WERall- COUNTY.
factories of said State and County, having been presented
s a witness in support of the application of
nswers as follows: 1. What is your name and where do you reside? 1. A Try bekall
2. Are you requainted with 2 2 1, the applicant; if so, how
ing have you known him? All of Tris lift. 3. Where does he reside, and how long and since when has he been a resident of this State?
I nesidos in DEKalla Co Ga
When, where and in what company and regiment of he bolist, and how do you know? In Intelliged in the bolist Linguis Courts and it is sometimes
5. Were you a member of the same company and regiment?
6. How long did he perform regular military duty? from finite angular 1865 1865
when and where was his command surrendered: Carrendered Carrendered Carrendered
B. Were you present when it surrender ? A was not
Was applicant present? Ye was
). If he was not present, where was he? he was foreset
Then did he leave his command? Not stall For what cause? No Cause he was thin
y what authority he left? Me and Not work How do you know all of this?
of migetron pensonal knowledge
. (Give your means of knowledge?)
he had nuthing at I Know out
2. What property, effects or income did the applican possess in 1896, 1897, 1898, 1899, 1900 and 1901, and land disposition, if any, did he make of same?. I have a walling he
had of my of the Iknocules of the whom? Has he conveyed away only of his property in the last four years, if so, what was it, and to whom?
Willing of my own Knowledge
What is the applicant's occupation and physical condition? . he favores his
Physical Condition is bad
Thysical Condition in bad (A) Is the applicant upable to support aimself by labor of any sort, if so, why? My Nor able to, make a support
Thysical Condition is bad O Is the applicant upable to support himself by labor of any sort, if so, why?
Is the applicant unable to support himself by labor of any sort, if so, why? I have able to Make a support Physical Not able The was be supported during the years 1898, 1899, 1900 and 1901? By fair Lobor And him bullion. Labor What portion of 1968 support for these four years was derived from his own labor or income?
Thysical Condition is bad Is the applicant unable to support himself by labor of any sort, if so, why? The Arthur Arthur Marke a support Physical Not able How was begupported during the years 1898, 1899, 1900 and 1901? By his Labor and his Emilary Labor
If is the applicant unable to support himself by labor of any sort, if so, why? Multiplicated the property of the pears 1898, 1899, 1900 and 1901? Most portion of fire support for these four years was derived from his own labor or income? Most portion of the support for these four years was derived from his own labor or income? Most of 34,94 the first point of the applicant's physical condition that entitles him to a pension under section 1254, Code? his Physical Condition in warmy band
Is the applicant unable to support himself by labor of any sort, if so, why? Why a the property of the years 1898, 1899, 1900 and 1901? How was becaupported during the years 1898, 1899, 1900 and 1901? What portion of its support for these four years was derived from his own labor or income? What portion of the support for these four years was derived from his own labor or income? Out of 31,01 the graph of the support for the applicant's physical condition that entitles him to a pension under
If the applicant upuble to support himself by labor of any sort, if so, why? If the applicant upuble to support himself by labor of any sort, if so, why? If the applicant upuble to support to the years 1898, 1899, 1900 and 1901? By find Lobbs And him Church. Labor. What portion of his support for these four years was derived from his own labor or income? About 1908 and complete estispient of the applicant's physical condition that entitles him to a pension under section 1254, Dode? hid Physical Condition in viving back in the support for the applicant's physical condition that entitles him to a pension under section 1254, Dode? hid Physical Condition in viving back in the support for the applicant's physical condition that entitles him to a pension under section 1254, Dode? hid Physical Condition in viving back in the support for the applicant of the applicant of the applicant?
If the applicant unable to support himself by labor of any sort, if so, why? If the applicant unable to support himself by labor of any sort, if so, why? If the applicant unable to support for the part of the support of the support for years was derived from his own labor or income? What profit of this apport for the applicant's physical condition that entitles him to a pension under section 1254, Dode? his Physical Condition in viving to a support for the applicant's physical condition that entitles him to a pension under section 1254, Dode? his Physical Condition in viving to a support for the applicant's physical condition that entitles him to a pension under section 1254, Dode? his Physical Condition in viving to a support for the applicant's physical condition that entitles him to a pension under section 1254, Dode? his Physical Condition in viving to a support for the applicant's physical condition that entitles him to a pension under section 1254, Dode? his Physical Condition in viving to a support for the applicant's physical condition that entitles him to a pension under section 1254, Dode? his Physical Condition in viving to a support for the applicant's physical condition that entitles him to a pension under section 1254, Dode? his Physical Condition in viving to a support for the applicant's physical condition that entitles him to a pension under section 1254, Dode? his Physical Condition in viving to a support for the applicant's physical condition that entitles him to a pension under section 1254, Dode? his physical condition in viving the section 1254 physicant in viving the section 1254 physic

STATE OF GEORGIA.	
DE/Call COUNTY	
S. S	Campany and
Personally came before me	
Course V. Carrier	, both known to me as reputable physicians
of said County, who being severally sworn, say on oath	that they have examined carefully
He Reagn	applicant for pension under Section 1254, Code, and after
such personal examination say that his precise physical c	ondition is as follows:
Lyloning which	time 90 from which
for his man bully n	corred affecting like side
musuly contrations nur	2 militing Colonies bush
alvini Tom was Rundin	in the second
Makes The make X	
,	
and that we have no interest in said pension being allowed	D.W. Ricusaud M.
Sworn to and subscribed before me, this the	Millian Millian Mil
19 day officely 1902.	Tomin of Carrier
Willowas Race	Ordinary.
Thirt go	
ORDINARY'S	CERTIFICATE.
CEARS OF CEODOLA	
STATE OF GEORGIA,	
De Kall COUNTY	
ump	
, the sage are	Ordinary in and for said County, hereby certify
that the applicant // Congre	16.11
been a bona fide resident of this State since the	191 day of 4 mile 1803)
and that the witnesses, viz.:	20,
are of trustworthy character, and that their statements a	
	ing questions the applicant and each witness took the oath
8	70.00
I further certify that the tax digest of	County show that applicant
returned for taxation in his name in 1899Y	Dollars of
property, and in 1900	Dollars of property.
In my opinion the foregoing claim is	made in good faith.
Witness my hand and seal of office, this	day of Augh 1902.
· /m	
-14,111	Magsale Ordinary,
	of the Kall County.
No	wai
1. Before any questions are answered, the ordinary words: "You shall true answers make to each of the que	shall swear applicant and the witnesses in the following estions asked of you, and the evidence you shall give will be
8. In every case the ordinary must certify to the c as above set out.	naracter of the witness, and as to the execution of the proof

(FOR THOSE ALREADY ENROLLED.)

500

INDIGENT

SOLDIER'S PENSION 1903. Name Reagin H. C. Co. C. Regiment Code Les WARRANT ISSUED (23 1908. JOHN W. LINDSEY, Commissioner of Pension. JOHN W. LINDSEY, Commissioner of Pension. JOHN W. LINDSEY, Commissioner of Pension. JOHN W. LINDSEY, Commissioner of Pension.

POWER OF ATTORNEY.

	٧٠ · .	ereby autho	wine.	
Ti.	of	ereny autho	rize	
receive and receipt for the per	sien allov	ed and re	quest that he	remit same
			man proportion	$[x, \zeta_i]_{\mathcal{H}}$
				1. 1.
Witness my hand and seal, this		day of		18
Executed in presence of	1			
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		Q .		
				23
Programme Control of No.				

JOHN W. LINDS

DIER'S PE

INDIGEN

(FOR THOSE ALREADY EI

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Le Tich County.
1/a P 1 0 51 01
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 19 day of Arthur 189; that he is 64 years old and
by occupation a Mariner, that he enlisted in the military service of the Con.
States, and served for the term of 394 in Company C, of the Regiment 1
of The los ; that his physical condition is as follows; I ge and I referently and ner cons
follows: I and Infirmity and ner vous
debility caused from stroke of
distillaines
that his property consists of the following items:
The state of the s
of the value of Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1903. I have heretofore as a resident of the pension to which he
county been allowed a pension for the year 1
Sworn to and subscribed before me, this the A Reag.
sand the
MM legs de C Ordinary.
STATE OF GEORGIA,
Die Nelle County.
ham w
I, MM Registace He Ordinary of said County,
lo certify that I am well acquainted with // Cogni
he applicant in the foregoing affidavit, and am well satisfied that the statements made by
nim in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.
Given under myofficial signature and seal, this
day of fun 1903.
July Seal Margadale
Ordinary De Mach County.
Nors.—The blank spaces must be filled.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

1501		GIA,			
NUI	Tall co	ounty.			
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			1	h that he is a bona	6de sisione
				said State continu	
since the /				at he is 6 / ye	
	Farm	ed that	he enlisted in	the military service	ars old and
federate State	s (or of the State of	f.	ne entisted in	during the war l	
States, and ser	ved for the term of	33444	assin Comp	any 6 , of Cubbst	Regiment
follows: Q	ge and.	Jufin	nity 0	at his physical con	y Nesve
aebili	ty from	rligh	itning		
	10				1, 11, 1
that his prope	rty consists of the	following ite	ms:		
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Deponer 1894, and the		ipate in the b	enefits of the	Act, approved Dece	
	the year 1904. I	have heretofo	re as a residen	on for the pension	
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Sworn to STATE	the year 1904. I allowed a pension of and subscribed by day of Andrews GEOR	have heretofc for the year 1 efore me, this g190 GIA, County.	ore as a residen 903 a the HA Ordinary.	of Ready	id County,
Sworn to STATE I, do certify tha	the year 1904. I allowed a pension of and subscribed by the subscr	have heretofc for the year 1 efore me, this game 190 GIA, County inted with	ore as a residen 903 the HA Ordinary.	of Ready Ordinary of sa or Reagi	vid County,
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POWER OF ATTORNEY.

	STATE OF C	I,	of	1	hereby authori	
k -	• • • • • • • • • • • • • • • • • • • •		at			A
		my hand and seal	, this	day of		2
	Executed	in the presence of				
					,	
- Cours	CODE SECTION 1394. FOR THOSE ALREADY ENROLLED.) No. (CCT)	ER'S PENSION	6. Magine	WARRANT ISSUED	JOHN W. LINDSEY, Commissioner of Pensions. WARRANT HANDED TO THE COMMISSION ANAMAN AN	

POWER OF ATTORNEY.

	_hereby author
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owed, and request that 1	ne remit same
at	
day of	1908.
	[L.
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	1000
The same of	
	owed, and request that 1

no date

JER'S PENSI 1906. INDIGENT

(183 WARRANT ISSUED

JOHN W. LINDSEY.

WARRANT HANDED TO

LAN WITHINWHIN HEREIA	ימוומומות ז מתאומתע האמו
STATE OF GEORGIA,	
Fillice County.	
	lengine of Certalle
Personally appears UY. U,	Territor of the Trule.
County, State of Georgia, who, being duly s	worn, says on oath that he is a bona fide citizen
and resident of said County and State, an	d has resided in said State continuously ever
since theday of	18 ; that he isyears old and
	he enlisted in the military service of the Con-
federate States (or of the State of	during the war between the
States and served for the term of	in Company Co, of th Regiment
of leoobs Leagues	My Vols; that his physical condition is as
follows dulismiter 1	coesa, y agi
10.000	
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that his property consists of the following i	tems:
that his property consists of the following .	
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- Cather making of	Dollars. I am now earning,
of the value of by my labor,	Dollars per month. That by reason of his
	to support himself by his own exertion or
labor, and that he receives no pension but	
Deponent desires to participate in the	e 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 hereto	ofore as a resident of
County been allowed a pension for the year	
Sworn to and subscribed before me, the	his the
day of July 19	005.
Janua Placeto	Ordinary.
STATE OF GEORGIA,	XI to have gill
Killact County.	
i Janus IT	Ordinary of said County,
do configurated I am well acquainted with	Hellingin
the applicant in the foregoing affidavit, an	d am well satisfied that the statements made
by him in his said affidavit are true, and I	know he is the individual he represents himself
to be and that he resides in this County	
Given under my official sig	nature and seal, this
day of Court	71906.
	Janus R. Guovis
Affix your heal heal	dinary Me ITal 6 County.
{ here }	,

Note.—The blank spaces must be filled. Note.—Affidavit should not be attested before January 1st, 1905.

State of Georgia,	
County.	Deg 11
	gen of Xala
County, State of Georgia, who, being duly swort	
and resident of said County and State, and he	
since the 19 day of June	
	enlisted in the military service of the Con-
	during the war between the
States, and served for the term of	in Company , of th Regiment
	that his physical condition is as
follows: Infilmity, p	overly & age
that his property consists of the following item	18:
A second	
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	
	enefits of the Act approved December 15th,
1894, and the Acts amendatory thereof, and ma	kes application for the pension to which he
is entitled for the year 1906. I have heretofor	
County, been allowed a pension for the year 19	
Sworn to and subscribed before me, this t	the H & Reagns.
11. 50	
James Ryeorge	Ordinary.
State of Georgia,	
Nall County.	
I, James IT you	Ordinary of said County,
do certify that I am well acquainted with	6. Keagin
the applicant in the foregoing affidavit, and a	m well satisfied that the statements made
by him in his said affidavit are true, and I kno	w he is the individual he represents himself
to be, and that he resides in this County.	727
Given under my official signatu	are and seal, this
day of anuary	1906.
	Janus Reinge
[AMP]	rdinary Tack County.
d here	
Nots.—The blank spaces must b Nots.—Affidavit should not be as	ttested before January 1st, 1906.

POWER OF ATTORNEY.

STATE OF GEORGIA, DeKALD,			, hereby authori
to receive and receipt for the			
	at		
WITNESS my hand and seal	, this		
Executed in presence of	ſ ·		

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Cons Secreta 1984. SE ALREADY EMPOLLED, O. A. Z. NDIGENT ER'S PENSION	Reagin		RANT HANDED TO

Barin H. C.

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State	e of Ge	orgia,	1		
D	eKALB.	Count	_ }		
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and resider	at of said Cour	nty and State or	sworn, says on	oath that he	is a bona fide citiz
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and by occu	pation a	0	that he enlisted	in the militar	years or years of the Co
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States, and	served for the	term of	in Com	pany 6	f th Regime
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that his pro	perty consists	of the following	items;		
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Nova.—The blank spaces must be filled. Nova.—Affidavit should not be attested before January 1st, 1907.

LITHONIA, GA. DEC 7th 1926. M. H. C. Reagan, Est. TELEPHONE 5 J.C. Johnson & Sons Dry Goods, Clothing, Phoes, Hardware, Furniture and Groceries COTTON BUYERS UNDERTAKERS Funeral Expenses for A.C. Reagan 2500 Suit clother sturt +80ers 2500 100 00 Seven to psubsenfellere ne Febre 22nd 1926 usais San Ett Weson Clerket Ordinary

Amount \$ / 00

DEKalh County 1925/926

Application for Pension Due Deceased Pensioner

(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

V. L. morgan Ordinary St.C. Reagin Date of Death 1925

Approved and ordered paid

olu to Clark 1925 Hely/3 N. E. HARMS.
Commissioner of Pensions.

Received of 4. S. morgan Ordy

check for \$1000 HE Reagain.

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.

NAME Assgin, H. C.

YEAR 1902 COUNTY Deralb

WHEN AND WHERE BORN? June 19, 1839 - Dekalb County, Georgia

ENLIGHED WHEN AND WHERE? Decatur, corgia - August 1, 1861

RANK:

COMPAIN AND REGINENT? Company C, Copb's Legion

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND MH.E?

RELEASED.

WHEN AND WHERE SURRENDERED? At close of war - Appointtox Court House,

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED:

WITNESSES. J. L. Argo - same command -- No data.

1w

Application for Lension and to a necessed i ensioner

(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 J. C. Johnson.
of said County, who, after being sworn, on oath says that he knew Regime of said County, and that said Pensioner
was on the Pension Roll of said County at the time of death, which occurred in 201 all. County, in this State, on the day of day of 1925, and that a Pension of Ul Island (\$100 cm) Dollars was due pensioner and unpaid at the time of pensioner's death, and that pensioner left no widow or dependent children surviving,
and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$, per sworn statements fully and completely ITEMIZED hereto attached.
Sworn to and subscribed before me this YY day of Puby 1926 U. D. Maram, Ordinary Likall County (Seal of Ordinary)
CERTIFICATE OF ORDINARY GEORGIA, DENALL, County. I, V. J. Morgan , Ordinary of said County, do certify that I researelly know , who is a resident
citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew HC Reagni while in life and that this was the same person whose name appears on the Pension Roll of DeKalk County, and was paid a Pension of One Hundred Torty (\$140.00) Dollars
in said County for 192. 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.
(Seal or Ordinary) Given under my hand and official seal, this day of they 192 of 192

lat. For use in all cases where pensioner died after January 1st, had not been out of State longer than twelve monita, and did not leave sufficient property to pay such expenses. THE WIDOW OF A SOLDIER, IF SHE IS LIVING, HAS PRIOR CLAIM OVER THESE EXPENSES, AND MUST MARK APPLIOR TOOM ON THE LOW BLANK.

value of it, and such date.

And. Running account anothe paid—only those connected with the last illness, just before death when pensioner grew worse to die.

Add. Running account must be sworth to before the Ordinary, and in the following form: (Do not use the terms: "just, true, due, unthin. Each account must be sworth to before the Ordinary, and in the following form: (Do not use the terms: "just, true, due, un-

3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of life, etc."

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 purpose be "substantially and essentially useless."

4. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the works above quoted, to say that unless the injury is such as to require the constant use of crutch or sciels, that the leg is not "substantially and essentially useless."

that the leg is not "substantially and essentially useless."

5. If papers are returned for correction, and amendments are added to any of the affidavits, the amendments be made under oath before an officer, and the proofs must show that the amendments have been duly sworn to.

6. Every application must be certified by the Ordinary of the country of the residence of the applicant.

The ordinaries of the several counties are specially requested to call the attention of the physicians and anticaparts to these values.

Relumed for a Gullen Statement by physiciais for a full proof by applicant INH Hamin

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indik striggar	No	160	72	Z
	APPLICAT	ION FOR A		
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Thohusen

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. It 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

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

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

4. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."

5. If papers are returned for correction, and amendments are added to any of the affidavits, the amendments must be made under oath before an officer, and the proofs must show that the amendments have been date arount to.

6. Every-application must be certified by the dinary of the county of the residence of the applicant.

The certificate of any other will not be received in any case.

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

APPLICATION FOR ALLOWANGE

For Use of Applicants Who Have not Heretofore Drawn.

STATE OF GEORGIA,
DEKall County.
PERSONALLY appears H. J. Regan of Dekalh county,
State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and
resident of said State, and has been such since the 13 day of
January 186/; that he enlisted in the military service of the Con-
federate States (or of the State of Ja) during the war between the
States, and served as a Private in Company 6, of Cots Regiment
of fa, Volunteers harfords 's Brigade; that whilst engaged
in such military service, at the battle of Chanslors Ville in the State
of Va , on the 3 day of May 1868, he was
wounded as follows: With a gun Shott wound in the
right for arm leaving an Extraction
of their inches of the book.
I Amendment: - Whereby said arm is rendered
useless to such an lexter that I am inal
to use it in manual labor.
on to impresence I me huch 234/18893 H.D. Krayin
Deponent desires to participate in the benefits of the Act, approved October 24, 1887,
and the Act amendatory thereof, approved December 24, 1888, and makes application for
the allowance to which he is entitled for the year thereunder ending October 26, 1889.
Sworn to and subscribed before me, this the
16 day of March 1889
9 / / 10
David ragle J.P.
Note.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability.
2 100 . 101
Commissioned Officer's Affidavit.
STATE OF GEORGIA,
Dels 11
PERSONALLY came before me J. L. Wyb of the county
of Denall State of Georgia, who, being duly sworn, says that he was
a commissioned officer in Company 6, of Color Lugar egiment of 4a
Volunteers, and that deponent knows H.T. Reagan, 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 AT Reagan
as stated by him in said affidavit. Deponent further states that said

county.

is a bona fide citizen of this State and resides

STATE OF GEORGIA,	STATE OF GEORGIA, County.
Personally came	I, MNRe zedale Ordinary of said county,
	do certify that I am well acquainted with H.J. Ragan the
citizens of county, in said State,	applicant in the foregoing affidavit, and am well satisfied that the statements made by him
who, being duly sworn, say that they are acquainted with	in his said affidavit are true, and I know he is the individual he represents himself to be,
and know that he received the wounds (or contracted the	and that he resides in this county. I also certify that the foregoing witnesses, are persons
disease) in the military service, as stated by him in the foregoing affidavit; that said wounds	of respectability, and that their statements are worthy of full credit and belief.
(or disease) permanently disables applicant, as stated by him; that said applicant is a bona	I further certify that David leagle before
fide citizen of this State, and resides in county, and we	whom the foregoing affidavits were made and power of attorney was signed, is a
are well satisfied that all the statements in his affidavit are true.	fustice of the Peace of said county, and the said affidavits and signa-
Sworn to and subscribed before me, this	tures thereto are genuine.
day of 188	Given under my official signature and seal, this 18th day of June 1889
	Will Rogeday,
Note.—Above affidavit must be made by three citizens of the county of applicant's residence.	Ordinary De Nall County.
y apprount o requerce.	
STATE OF GEORGIA,	
Le Kalk County.	Power of Attorney.
PERSONALLY comes before me to my Ragsolale Ordinary of said county,	STATE OF GEORGIA,
and Ittayear and Ittreer , both known to	Destall County.
me as reputable physicians of said county, who, being severally sworn, say on oath that	Know all Men by these Presents, That I, H. V. Alongin
they have carefully examined A Reagin and after such	of WEKalf
examination say that the applicant has been injured as follows: By gunrlo	county, in said State, do hereby appoint & A Artical
would af right for arm freeturing both	of GEKall County my true and lawful attorney in fact, for
bone and nexiting resection of three insurely	me and in my name, to receive and receipt for whatever amount of money I may be entitled
of the radious just above the wist joint	to from the State of Georgia by reason of the injury received as aforesaid in the military ser-
hich render the said armentstancially	vice of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby
neless, nereby the said Raigne has been .	authorizing my said attorney to receipt in my name for any Warrant that may be issued by
indered practically in competent to perform	the Governor, or for any sum of money which may be coming to me for the reason aforesaid.
he ordinary manual avocation of life	In witness whereof I have hereunto set my hand and seal, this
Sworn to and subscribed before me, this) Highen M.D.	day of March 1889
18 th day of mich 1889 AS Mayson Me	Executed in the presence of us:
MMRage dale.	Oci R. I.
Ordinary.	Jan Hyunge
READ NOTE.—The physicians will state fully the extent of the wound, and then give facts to show the extent of the disability resulting therefrom.	1849 dr)

and a so that the store described would be from the board of three wisher from the said armed as a smith the said of the said

STATE OF GEORGIA,

D.e Ralb County.

I. M. Rassalule Ordinary of said county,
do certify that I am well acquainted with M.T. Reagain 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 6" day of Lest 1890

M. M. Salule.
Ordinary De Kulh, County.

Defall of Mander of Warrand, Albert of Mander of Mander

STATE C	OF, GEORGIA,	1		
de 1	a ff	nty.		
I,	MInden.	dale.	Ordinary of	said County,
	at I am well acquainted w		Reagin	the
			sfied that the statements	made by him
in his said aff	fidavit are true, and that	he is disabled, to	the extent he claims, and	I know he is
the individua	l he represents himself to	be, and that he re	esides in this County.	
I furthe	r certify that	·		
before whom	n the foregoing affidavi	ts were made an	nd power of attorney was	s signed, is a
+ 44		ol	f said County, and the said	affidavits and
	ereto are genuine.	The Land Country	ar	
Given u	nder my official signature	and seal, this	11" day of Pel	1891.
	-////	Marela	16.	
		Ordinary	De Hath.	County.
				14 1 21 3

Application for Allowance of Warrant, H. & Rach & Land & L

Tappilies the Heretobase allowed to detail

For Applicants Heretofore Allowed Pensions.	ror applicants neretolore allowed rensions.
STATE OF GEORGIA,	STATE OF GEORGIA,
he hall composite	Dellatte County S
PERSONALLY appears N. J. Reagin of he Kall county,	PERSONALLY appears N. J. New your of A. Minds
State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and	County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen an
resident of said State, and has been such continually since the 13" day of	resident of said State, and has resided therein continuously ever since the/3"
Jan 184/; that he enlisted in the military service of the Con-	day of
federate States (or of the State of Let) during the war between the	federate States (or of the State of Herzella) during the war between the States, and served as a Private in Company C, of Colombia
States, and served as a Printe in Company C, of Company	of La Volunteers Woffgrales 's Brigade; that whilst engage
Legion Volunteers 's Brigade; that whilst engaged in such military service, at the battle of Chancellors nell in the State	in such military service at the battle of Ichan ellospice, in the State
of a . on the day of many 1863, he was	in such military service at the battle of Alancellosrice in the State of an on the day of Military 1868, he was
wounded as follows: Gun she I wond in the right	wounded as follows: Mel with a zierze or is fall
Long sym Cansina a diescated of	in sight arm fractils my the lone
contracting and dislocating the wish	-a past of the Tone, which tender
contracting and dislocating the wish	the arm permanently disabled
giring rothich renders the arm	
Substantially and essentially useless.	Deponent desires to participate in the benefits of the Act, approved October 24, 188
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 entitle
and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1890. I have heretofore been allowed a pension	for the year ending October 26, 1891. I have heretofore been allowed a pension of
of Griffly dollars.	Sworn to and subscribed before me, this, the)
Sworn wand subscribed before me, this the HI Reagin	Sworn to and subscribed before me, this, the H. J. Riagin
Milagelel, Ordinary,	Markey sauce Orinney.
Note. State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of	Nors. State fully nature of wound or character of disease which causes the disability, and explain particularly the extent the disability, resulting from the wound or disease.
the disability.	
POWER OF ATTORNEY.	POWER OF ATTORNEY.
STATE OF GEORGIA	STATE OF GEORGIA,
Dehalt county. 1 49 B	County.)
KNOW ALL MEN BY THESE PRESENTS, That I, H T Readily	Know all Men by these Presents, That I, County, State of Georgia, do hereby appoint
county, in said State, do hereby appoint for 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	of County, State of Georgia, do hereby appoi
my true and lawful attorney in fact, for	of my true and lawful attorney in fact, fo
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	me and in my name, to receive and receipt for whatever amount of money I may be entitle to from the State of Georgia by reason of the injury received as aforesaid in the military servi-
and the Confederate States (or of this State), as stated in the foregoing amount;	of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authoring my said attorney to receipt in my name for any Warrant that may be issued by the Gove
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	nor, or for any sum of money which may be coming to me for the reason aforesaid.
aforesaid. IN WITNESS WHEREOF, I have hereunto set my hand and seal, this	IN WITNESS WHEREOF, I have hereunto set my hand and seal, the
6th day of Tela 1890	
H. J. Reugin L. S.	Executed in the presence of us:
Executed in the presence of us:	
7.7. H. George	
Ken Reagins DIRECTION.	DIRECTION.
Send money to me as follows, by	Send money to me as follows, by
to P.O.	County, Georgia.
County, Georgia.	

For Applicants Heretofore Allowed Pensions.

figure in number with opining signature and receipt for the State of Georgia by reason of the inhe Confederate States (or of this State), as say said attorney to receipt in my name for any sum of money which thay be coming INVII WITTINGS IN WHEREOF, I have no sum of money to the coming in the control of t	my true and lawful attorney in whatever amount of money I may be er jury received as aforesaid in the military stated in the biegong and attack in the biegong and the lawful of the cay warrant that may, be issued by the Goy to me for the reason aforesaid.
th and in my came, to meanine and receipt for om the State of Georgia by reason of the in the Confederate States (or of this State), as s my said attorney to receipt in my name for any sum of money which may be coming the common of the comm	or whatever amount of money I may be en jury received as aforesaid in the military stated in the foregoing affidabily herebyland my Warrapt that may be issued by the Goy, to me for the reason aforesaid.
	Contraction of the Contraction o
oplicant in the foregoing affidavit, and am we Executed in the breaence of as: and that he is disabled,	to the extent he dams, and I know the is
a certify that I am well acquainted with	
PRI	Ordinary of said
Send money to me as follows; by	
TATE OF GEORGIA.) -	0
	, Georgia.
Not re-State fully rature of wound or character of decrae	which causes the disability, and explain perticularly the es-
ounded as follows: On the conditional form of the partie	Gonny, Allack Son
\ \text{olunteers.}	's Brigade; that whilst eng
ates, and served as a	in Company of the Re
derate States (or of the State of) during the war betw
y of 18 ; tha	t he enlisted in the military service of th
sident of said State, and has resided therein	
ounty, State of Georgia, who, being duly swo	rn. says on oath that he is a bona fide citis
	OI ,
Personally appears	

POWER OF ATTORNEY. STATE OF GEORGIA, }

Tot applicants nototototo mionoa tonoto	
STATE OF GEORGIA, County, S	
PERSONALLY appears He Acagain of De Sal	9-
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/3	
day of184/; that he enlisted in the military service	
federate States (or of the State of) during the war	
States, and served as a Britis in Company O, of Company	th Regiment
of Volunteers Wolf of 's Brigade; that whilst	engaged in
such military service at the battle of bling celles gille	in the State
of 24 , on the 3th day of Mary 18	6.3., he was
wounded as follows: All the state of the sta	
Milangle Medinglish district	3 -
Just a time to the med Bermone	ully
and was sound will and select	727
With daine dublantially and	
Afficial Colony was Cody	
Deponent desires to praticipate in the benefits of the Act, approved October 24	th, 1887, and
the acts amendatory thereof, and makes application for the allowance to which he is the year ending October 26, 1893. I have heretofore been allowed a pension of	entitled for
And a dollars, for I walked all	m.
Sworm to and subscribed before me, this, the	,
1893.	
I family it	
NOTE—State fully nature of wound or character of disease which causes the disability, and emplain particularly disability, resulting from the wound or disease.	the extent-of the
disability, resulting from the wound or disease,	
STATE OF GEORGIA,)	
O Tradition County.	
1. 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	ne is the in-
dividual he represents himself to be, and that he resides in this County.	
I further certify that	1 11
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.	a min
Given under my official signature and seal, this 20 day of 1	1893.
	a Acar
Ordinary De Cali-	County.
NUME OF OLD OF ORDER	1 1
POWLP OF ALTORNEY, SEATE OF GEORGIA.)	
DOMED OF ATTOCAMEN	

STATE OF GEORGIA. Ordinary of said county, do certify that I am well acquainted with A. He carin 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 scal, this f day of Mas ah 1892.

Ordinary D. County. SOLDIER'S PENSION 1892

POWER OF ATTORNEY.

STATE OF GEORGIA

County, State of f	Georgia, do hereby a me, to receive and re by reason of an inju- is State), as stated my name for any Wo oming to me for the re ESS WHEREOF, 1	ppoint or whatevery received as after in the foregoing arrant that may be seen afteresaid.	my t er amount of mo presaid in the n g affidavit; her e issued by the C	rue and lawful ney I may be illitary service eby authorizit iovernor, or for	attorney in fact, entitled to from of the Confeder or my said Att	the ate
		2		· · · · · · · · · · · · · · · · · · ·	[1.,	s.]
Execut	ted in the presence of	us				
: 4						1
S-1-		DIRECT	IONS.	7711		1
Send mone	y to me as follows, b		*		P.	o.
		County, Geo	rgia.			100
or Those Aready Enrolled.)	Soldier's Pension.	Reagin. H.T. De Kalb,	Disability Hound, in Arms, Amount, & 20 00	W: H. HARRISON, Secretary Executive Department.	WARRANT HAS DED TO	Geo. W. Harrawa, Mars Frinter, Atlanta.

STATE OF GEORGIA,	
Vie Call County.) 6/ Or D	
Personally appears T. J. league	
f County, State of Georgia, who, being dul	
on oath that he is a bona fide citizen and resident of Georgia, and has been such	continuously
ince the 13 day of 1/2/11/22 184/; the	
the military service of the Confederate States (or of the State of)
uring the war between the States, and served as a 12 2 vale in (Company C,
of th Regiment of Colly Loin Volunteers	's
Brigade; that whilst engaged in such military service at the battle of Lolland	ecconsin
	day of
1863, he was wounded as follows: Le	
Short remend in the Eight	23112
which prostured the force car	wing.
a lost of three in ohes of the	porte,
Midenting the drin lanks	antiaci
and estenticity necless.	
Describing to neutralizate in the hearfter of the Ast approved October	24 1882 224
Deponent desires to participate in the benefits of the Act, approved October he acts amendatory thereof, and makes application for the allowance to which he	is entitled for
he year ending October 26, 1892. I have heretofore been allowed a pension of	
Tifty Dollars for Near-id	62216
Sworn to and subscribed before me this the 76.7. Reaga	<u>.</u>
day of March 1892.	
Norse-State fully nature of wound or character of discuss which causes the disability, and explain	
Norse-State fully nature of wound or character of discuss which causes the disability, and explain	
Note:—State fully nature of wound or character of disease which causes the disability, and explained of the disability. POWER OF ATTORNEY.	
Note.—State fully nature of wound or character of disease which causes the disability, and explorate of the disability. POWER OF ATTORNEY. STATE OF GEORGIA.	
Note.—State fully nature of wound or character of disease which causes the disability, and ceptarist of the disability. POWER OF ATTORNEY. STATE OF GEORGIA. County.	
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Note.—State fully nature of wound or character of disease which causes the disability, and ceptarist of the disability. POWER OF ATTORNEY. STATE OF GEORGIA. County.	
Norm.—State fully nature of wound or character of disease which causes the disability, and ceptarent of the disability. POWER OF ATTORNEY. STATE OF GEORGIA. County. Know all Men by these Presents, That I,	
Note.—State fully nature of wound or character of disease which causes the disability, and explorate 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. my true and lawful attories.	in particularly the
Norm.—State fully nature of wound or character of discusse which causes the disability, and explorate of the disability. POWER OF AITORNEY. STATE OF GEORGIA, County. Know all Men by these Presents, That I, of County, in said State, do hereby appoint. my true and lawful attorn me and in my name, to receive and receipt for whatever amount of money I may	in particularly the
Norm.—State fully nature of wound or character of disease which causes the disability, and explorate 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. my true and lawful attornee and in my name, to receive and receipt for whatever amount of money I may from the State of Georgia by reason of the injury received as aforesaid in the mi	ney in fact, for
Norman State fully nature of wound or character of discusse which causes the disability, and exploratent of the disability. FOWER OF ATTORNEY. STATE OF GEORGIA. County. Know all Men by these Presents, That I, of County, in said State, do hereby appoint. my true and lawful attorned and in my name, to receive and receipt for whatever amount of money I may from the State of Georgia by reason of the injury received as aforesaid in the min the Confederate States (or of this State), as stated in the foregoing affidavit; here my said attorney to receipt in my name for any Warrant that may be issued by	ney in fact, for
Norman State fully nature of wound or character of discusse which causes the disability, and explorate of the disability. FOWER OF ATTORNEY. STATE OF GEORGIA. County. Know all Men by these Presents, That I, of County, in said State, do hereby appoint. my true and lawful attorned to receive and receipt for whatever amount of money I may from the State of Georgia by reason of the injury received as aforesaid in the mile Confederate States (or of this State), as stated in the foregoing affidavit; here my said attorney to receipt in my name for any Warrant that may be issued by or for any sum of money which may be coming to me for the reason aforesaid.	ney in fact, for
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Norman State fully nature of wound or character of disease which causes the disability, and explorate of the disability. POWER OF AITORNEY. STATE OF GEORGIA, County. Know all Men by these Presents, That I, of County, in said State, do hereby appoint. my true and lawful attorn me and in my name, to receive and receipt for whatever amount of money I may from the State of Georgia by reason of the injury received as aforesaid in the mi he Confederate States (or of this State), as stated in the foregoing affidavit; her my said attorney to receipt in my name for any Warrant that may be issued by 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	ney in fact, for y be entitled to litary service of eby authorizing the Governor,
Nore:—State fully nature of wound or character of disease which causes the disability, and exploration 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. my true and lawful attorned as a foresaid in the mine and in my name, to receive and receipt for whatever amount of money I may rom the State of Georgia by reason of the injury received as aforesaid in the mine Confederate States (or of this State), as stated in the foregoing affidavit; herny said attorney to receipt in my name for any Warrant that may be issued by 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 lay of 1892. Executed in the presence of us:	ney in fact, for y be entitled to litary service of eby authorizing the Governor,

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.	
De Nath County. }	
PERSONALLY appears 7 J. Ker	equil of to Kall
	sworn, says on oath that he is a bona fide citizen
and resident of said State, and has resided	
	he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the in Company C, of th Regiment
States, and served as a Private of Jal Volunteers Work	for a 's Brigade; that whilst engaged in
such military service at the battle of	Chancellars ville in the State
of LA son the 3	day of May 1863, he was
wounded as follows: Shot with	Ra of May 1863, he was
Merough The sig	lu arme fracturing
fore cutting l	enders aild mijorates
week formit re	udering some
South artially de	desse attally useked
Depoyent desires to participate in the	benefits of the Act, approved October 24th, 1887,
	tes application for the allowance to which he is
	104. I have heretofore been allowed a pension of
	ollars, for the year 1895,
Sworn to and subscribed before me, t	Heil . Is cas in
12th day of Wigreh	1894.
Milandale, Ord	inas to
Nore-State fully the nature of wound or character of	lisease which causes the disability, and explain particularly the extent
of the disability, resulting from the wound or disease.	
STATE OF GEORGIA, 1	
STATE OF GEORGIA, County.	
I, M.M. Cageda	Cen Ordinary of said County.
do certify that I am well accurainted with	1/01/11
applicant in the foregoing affidavit, and a	m well satisfied that the statements made by him
in his said affidavit are true, and I know	he is the individual he represents himself to be
and that he resides in this County.	A. T. Carlotte and the second
	official signature and seal, this
day of fill the	
Affix your seal	Millogs clace
(here.)	0 11 0
	Ordinary Se Kall- County.

		POTA	ER OF A	TTOP	MEN		
			EK OF F	LITOR	MEY.		
STATE	OF GE	EORGIA,	1	. ;			
************************		Cou	nty.∫				
Kno	W ALL M	IEN BY THES	E PRESENTS, T	hat ,I,			
-				of			and the second section of the second
County, S	tate of Geo	orgia, do hereb	y appoint.				
of				my	true and l	awful attor	ney in fact, for
State of G States (or in my nan be coming	eorgia by roof this State ne for any V to me for t	eason of an inju- e) as stated in the warrrant that no the reason afore	receipt for whatevery received as after the foregoing affiding be issued by esaid. J have hereunts a	foresaid in the avit; hereby a the Governor	e military so uthorizing n , or for any	ervice of toy said Att	he Confederate orney to receipt
day of	VIINESS	WHEREOF,	J have hereunto	set my hand a	nd seal, this		
						· · ·	[L. s.]
	Executed in	n presence of us			4 2.3		
						2"	
							7. · . · . · . · .
• •							
			DIRECT	ions.			1
Send	money to n	ne as follows, b	y				P. O.
			County, Geo	orgia			P.O.
			county, dec)	
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eady Enrolled.)	\$ c	PENSION SECTION SECTIO	Jan William	Wound		y Executive Departme	ANDED TO
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(For Those Aiready Enrolled.)	No. 25 %	LDIER'S PENSION	Name H. O. Read in	Disability Som Menued		Secretary Executive Departmen	HANDED

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TALE O	F GEORGI.	A, County.	1				
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to receive a	nd receipt fo	or the pe	nsion paid		request t	at he rem	it same to
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day of	TNESS WH	EREUF,			hand and	seal, this_	
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e Aiready Enrolled.)	R'S PENSIO	396.	Stagni.	in Wings	124	Secretary Executive Department	Man
hose Already Enrolled.)	ER'S PENSIO	896.	O. Kagin	Fran Mewa	Plyt	Secretary Executive Dep	all of the state o
or Those Already Enrolled.)	DIER'S PENSIO	1896.	Y. Magin	Strin William	Plythe RICHARD IOHNSON	Secretary Executive Dep	Off M. Harrison, State Printer, Albana.
(For Those Already Enrolled.)	LDIER'S PENSIO	1896.	Name H. J. Ruce give	Disability From William		Secretary Executive Dep	Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions

Tot Approunts Horotororo introduce I chorons.
STATE OF GEORGIA, {
De Malt County.
personally appears H.J. Reagin of De Walk
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the
day of 18#/; that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served as a Private in Company C, of while Regiment
of La Volunteers, Walth A 's Brigade; that whilst engaged in
such military service at the battle of Mana Merz ville, in the State
of the gon the 23 day of May 1863, he was,
wounded as follows: Shot with a minic fale through
the Right arm pacturing hove and culting
muscle eausing in to moute flesh and
rendering the arm Substantially and
essentially naless
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 Hifty dollars, for the year 1894,
Sworn to and subscribed before me, this, the 16.7 Resym
1 day of March 1895.
MM Rossdale Ordinus
Note-State fulls the nature of wound or character of disease which causes the disability, and explain particularly the extent
f the disability, resulting from the wound or disease.
STATE OF CEOPCIA
STATE OF GEORGIA,
Se Kall County.
I, M.M. Rogsdale, Ordinary of said County,
do certify that I am well acquainted with H. Meagin the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
n his said affidavit are true, and I know 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 Musel 1895.
\sim
Affix pour peal . Mill Mogsolale,
and the state of t
Ordinary De Kalk County.

For Applicants Heretofore Allowed Pensions.
STATE OF GEORGIA, Schalb County.
personally appears M. T. Reagin of De Rath
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 (222 18/7/: that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the

1863, he was wounded, injured or diseased as follows:

minnie ball through

will the same of t
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
dollars, for the year 189 5.
Sworn to and subscribed before me, this, the 2 4th day of Hel 1896.
Nors-State fully the nature of wound or character of disease which causes the disability, and explain particularly the exten

STATE OF GEORGIA, Se Nall County County. Ordinary of said County, do certify that I am well acquainted with_______ applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this_

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

hereby authorize to receive and receipt for the pension paid hereon and request that he remit same to IN WITNESS WHEREOF, I have hereunto set my hand and seal, this

Executed in presence of

SOLDIER'S PENSI

INVALID

RICHARD JOHNSON, WARRANT HANDED

POWER OF ATTORNEY.

- Land Committee Com	Count	y. J	· . ·	· ' ·	
I,	*	he	reby authorize		.,,
21 12 / 1 1 1		• of			
receive and	eceipt for the pe	neion maid has	non and roome		
receive and i	eccipt for the pe	ension paid ner	eon and reques	t that he remi	same
		by	'		
IN WITHIN	ee wiiddboi	7 1 1			
IN WITNE	ess whereou	F, I have hereu	nto set my hand	and seal, this	
		F, I have hereus	nto set my hand	and seal, this	<u></u>
IN WITNE			nto set my hand	and seal, this	[t.

SOLDIER'S PENSION 1898.

RICHARD JOHNSON,

For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA. Dulath Dersonally appears A. Meagin of & Kalh 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 13" 184/; 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 Wrivate in Company C, of Cantegament grow of Ja Volunteers, Wiffor W's Brigade; that whilst engaged in such military service in the State of , on the 3d day of /// 1863, he was wounded, injured or diseased of follows: has iled with minine diace, in the wight fore arin causing the arm to be substantially and essentially 1120 Cc 21 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 the lach county been allowed an invalid pension of Dollars, for the year 189. H. J. Reesin Sworn to and subscribed before me, this, the 15th day of theh Mossdale Ordra incary Note-State fully die nature of wound or character of disease which esses the disability, and explain particularly the extent of the disability, resulting from the wound or disease. STATE OF GEORGIA. Do Keek County. WM Kassdace, Ordinary of said County. do certify that I am well acquainted with A J. Reagin applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County. Given under my official signature and seal, this

MM Regodece,

For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA, Dersonally appears M. S. Reagan of De Rall 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 13 184/; 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 free in Company C, of Can Regiment of Legion Volunteers, 's Brigade; that whilst engaged in such military service in the State of Va , on the 3 day of (11214 1863, he was wounded, injured or diseased as follows: hing uneveded at the feattle Chancecorries in the sight wrist and fore arm fractioning rendering some substantially and essentially piscless 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 Se Kach county been allowed an invalid pension of Dollars, for the year 189 Sworn to and subscribed before me, this, the H.J. Kosgin 22 day of Hick STATE OF GEORGIA, Sellecte County. I, Magadalling Ordinary of said County, do certify that I am well acquainted with 3. J. Reaging applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County. Given under my official signature and seal, this 224

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

SOLDIER'S PENSION

1899

INVALID

(For Those Aiready Enrolled.)

No. 3202

Marka John

RICHARD JOHNSON,

POWER OF ATTORNEY.

T	County.	hereby a	uthorize		
		of		·	
to receive and recei	pt for the pension	paid hereon a	nd request th	at he remit	same
· · · · · · · · · · · · · · · · · · ·	-	by			
at		-			
IN WITNESS	WHEREOF, I have	ve hereunto se	t my hand and	seal, this	
					\ :
day of	1900.				

Executed in presence of

SOLDIER'S PENSION 1900.

JOHN W. LINDSEY,
Commissioner of Pension

WARRANT HANDED TO

10.3

For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA. Delath County. personally appears & Mesgin of Hestalk 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 1; 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 Arivate in Company C , of Coth Regiment 's Brigade; that whilst engaged in such) military service in the State of Ha on the 8 hay 1863, he was wounded, injured or diseased as follows: right fore arm frasturing bones. ender sentiaces 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 County been allowed an invalid pension of Dollars, for the year 1898. Sworn to and subscribed before me, this, the 363 Revyine day of Held 1899. Post office MM agrille, CM issay, Note-State fully be nature of wound or character of disease which pages the disability, and explain particularly the of the disability resulting from the wound or disease. STATE OF GEORGIA, do certify that I am well acquainted with // Reagin applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County. Given under my official signature and seal, this.

For Applicants Heretofore Allowed Pensions.

Dersonally appears A Regine of Se Kalls Intry, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen to resident of said State and County, and has resided therein continuously ever since the state of day of the State of the State of the State of the States, and served as a in Company C, where the states, and served as a in Company C, where the states in such military service in the State of the State	State of GE	County.	
Deponent makes application for the pension to which he is entitled for the year ding October 26th, 1900. I have heretofore under said law as a resident of and subscribed before me, this, the day of Least Market of Least of Leas	Dergonally an	.1 2. 1	2
Deponent makes application for the pension to which he is entitled for the year ding October 26th, 1900. I have heretofore under said law as a resident of County been allowed an invalid pension of Dollars, for the year 1897. Sworn to and subscribed before me, this, the day of Local County of the disability resulting from the wound or character of the said fally the nature of wound or character of the said said and carplain particularly the not of the disability resulting from the wound or disease. FATE OF GEORGIA, County. Ordinary of said County. Given under my official signature and seal, this day of Local County. Given under my official signature and seal, this day of Local County. Given under my official signature and seal, this day of Local County. Given under my official signature and seal, this day of Local County. Given under my official signature and seal, this day of Local County. Given under my official signature and seal, this day of Local County. Given under my official signature and seal, this day of Local County. Given under my official signature and seal, this day of Local County.	County, State of Geometric Grand resident of said	orgia, who being duly State and County, an	wworn, says on oath that he is a bona fide citizen d has resided therein continuously ever since the 844; that he enlisted in the military service of
Deponent makes application for the pension to which he is entitled for the year ding October 26th, 1900. I have heretofore under said law as a resident of County been allowed an invalid pension of Dollars, for the year 189 f. Sworn to and subscribed before me, this, the day of the heretofore the heretofore under said law as a resident of County been allowed an invalid pension of Dollars, for the year 189 f. Sworn to and subscribed before me, this, the day of the heretofore the heretofore under said law as a resident of Dollars, for the year 189 f. Sworn to and subscribed before me, this, the day of the heretofore under said law as a resident of Dollars, for the year 189 f. Sworn to and subscribed before me, this, the day of the heretofore under said law as a resident of Dollars, for the year 189 f. Sworn to and subscribed before me, this, the day of the heretofore under said law as a resident of Dollars, for the year 189 f. Sworn to and subscribed before me, this, the day of the heretofore under said law as a resident of Dollars, for the year 189 f. Sworn to and subscribed before me, this, the day of the heretofore under said law as a resident of Dollars, for the year 189 f. Sworn to and subscribed before me, this, the day of the heretofore under said law as a resident of Dollars, for the year 189 f. Sworn to and subscribed before me, this, the day of the heretofore under said law as a resident of Dollars, for the year 189 f. Sworn to and subscribed before me, this, the day of the heretofore under said law as a resident of Dollars, for the year 189 f. Sworn to and subscribed before me, this, the day of the heretofore under said law as a resident of Dollars, for the year 189 f. Sworn to and subscribed before me, this, the day of the heretofore under said law as a resident of the year 189 f. Sworn to and subscribed before me, this, the heretofore under said law as a resident of the year 189 f. Sworn to and subscribed before me, this, the heretofore under said law as a resident of the year 189 f. Sw	he Confederate Stat	es (or of the State of	during the war be-
Deponent makes application for the pension to which he is entitled for the year ding October 26th, 1900. I have heretofore under said law as a resident of County been allowed an invalid pension of Dollars, for the year 189 f. Sworn to and subscribed before me, this, the day of the heretofore the heretofore under said law as a resident of County been allowed an invalid pension of Dollars, for the year 189 f. Sworn to and subscribed before me, this, the day of the heretofore the heretofore under said law as a resident of Dollars, for the year 189 f. Sworn to and subscribed before me, this, the day of the heretofore under said law as a resident of Dollars, for the year 189 f. Sworn to and subscribed before me, this, the day of the heretofore under said law as a resident of Dollars, for the year 189 f. Sworn to and subscribed before me, this, the day of the heretofore under said law as a resident of Dollars, for the year 189 f. Sworn to and subscribed before me, this, the day of the heretofore under said law as a resident of Dollars, for the year 189 f. Sworn to and subscribed before me, this, the day of the heretofore under said law as a resident of Dollars, for the year 189 f. Sworn to and subscribed before me, this, the day of the heretofore under said law as a resident of Dollars, for the year 189 f. Sworn to and subscribed before me, this, the day of the heretofore under said law as a resident of Dollars, for the year 189 f. Sworn to and subscribed before me, this, the day of the heretofore under said law as a resident of Dollars, for the year 189 f. Sworn to and subscribed before me, this, the day of the heretofore under said law as a resident of Dollars, for the year 189 f. Sworn to and subscribed before me, this, the day of the heretofore under said law as a resident of the year 189 f. Sworn to and subscribed before me, this, the heretofore under said law as a resident of the year 189 f. Sworn to and subscribed before me, this, the heretofore under said law as a resident of the year 189 f. Sw	ween the States, and	l served as a	Sive C in Company C; See the
Deponent makes application for the pension to which he is entitled for the year ding October 26th, 1900. I have heretofore under said law as a resident of County been allowed an invalid pension of Dollars, for the year 189 . Sworn to and subscribed before me, this, the day of Law Deficiency of the disability, and explain particularly the nature of wound or disease. TATE OF GEORGIA, County. Co	Pendintent of	4 Volunte	eers. 's Brigade: that whilst
Deponent makes application for the pension to which he is entitled for the year ding October 26th, 1900. I have heretofore under said law as a resident of County been allowed an invalid pension of Dollars, for the year 189 . Sworn to and subscribed before me, this, the day of 1900. POST OFFICE Litturical Norze-State fully the nature of wound or character of tilpase which causes the disability, and explain particularly the not of the disability resulting from the wound or disease. FATE OF GEORGIA, County. I, M. Magdica County. County. I, M. Magdica County or said County the plicant in the foregoing affidavit, and am well satisfied that the statements made by hir his said affidavit are true, and I know he is the individual he represents himself to be d that he resides in this County. Given under my official signature and seal, this day of 1900.			
Deponent makes application for the pension to which he is entitled for the year ding October 26th, 1900. I have heretofore under said law as a resident of County been allowed an invalid pension of Dollars, for the year 1897. Sworn to and subscribed before me, this, the day of 1900. Post office Litturation Norz.—State fully the nature of wound or character of the same which causes the disability, and explain particularly the not of the disability resulting from the wound or disease. TATE OF GEORGIA, County. I, Make John County. County. Ordinary of said County, the plicant in the foregoing affidavit, and am well satisfied that the statements made by hir his said affidavit are true, and I know he is the individual he represents himself to be defined that he resides in this County. Given under my official signature and seal, this 14 day of 1900.			
Deponent makes application for the pension to which he is entitled for the year ding October 26th, 1900. I have heretofore under said law as a resident of County been allowed an invalid pension of Dollars, for the year 189 . Sworn to and subscribed before me, this, the day of Law 1900. Post office Little Law Norse. State fully the nature of wound or character of flipsee which causes the disability, and explain particularly the nature of wound or disease. FATE OF GEORGIA, County. County. County. County. County. County. Given under my official signature and seal, this Law 1900. Given under my official signature and seal, this Lay County. Given under my official signature and seal, this Lay County. 1900. County			
Deponent makes application for the pension to which he is entitled for the year ding October 26th, 1900. I have heretofore under said law as a resident of County been allowed an invalid pension of Dollars, for the year 189 . Sworn to and subscribed before me, this, the day of Line 1900. Post office Litturial Nore State fully the nature of wound or character of dispase which causes the disability, and explain particularly the notion of the disability resulting from the wound or disease. FATE OF GEORGIA, County. Ordinary of said County the plicant in the foregoing affidavit, and am well satisfied that the statements made by his his said affidavit are true, and I know he is the individual he represents himself to be disability and of Litture and seal, this layer of the day of Litture and seal, this layer of the day of Litture and Litture and seal, this layer of the day of Litture and Litture and seal, this layer of the day of Litture and Litture and seal, this layer of the day of Litture and Litture and Seal, this layer of the day of Litture and Litture and Seal, this layer of the day of Litture and Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and S	and dist	de ating	wish joint terides
Deponent makes application for the pension to which he is entitled for the year ding October 26th, 1900. I have heretofore under said law as a resident of County been allowed an invalid pension of Dollars, for the year 189 . Sworn to and subscribed before me, this, the day of Line 1900. Post office Litturial Nore State fully the nature of wound or character of dispase which causes the disability, and explain particularly the notion of the disability resulting from the wound or disease. FATE OF GEORGIA, County. Ordinary of said County the plicant in the foregoing affidavit, and am well satisfied that the statements made by his his said affidavit are true, and I know he is the individual he represents himself to be disability and of Litture and seal, this layer of the day of Litture and seal, this layer of the day of Litture and Litture and seal, this layer of the day of Litture and Litture and seal, this layer of the day of Litture and Litture and seal, this layer of the day of Litture and Litture and Seal, this layer of the day of Litture and Litture and Seal, this layer of the day of Litture and Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and Seal, this layer of the day of Litture and S			
Deponent makes application for the pension to which he is entitled for the year ding October 26th, 1900. I have heretofore under said law as a resident of County been allowed an invalid pension of Dollars, for the year 189 . Sworn to and subscribed before me, this, the day of Line 1900. Post office Litturial Nore State fully the nature of wound or character of dispase which causes the disability, and explain particularly the notion of the disability resulting from the wound or disease. FATE OF GEORGIA, County. Ordinary of said County the plicant in the foregoing affidavit, and am well satisfied that the statements made by his his said affidavit are true, and I know he is the individual he represents himself to be disability and of Litture and seal, this layer of the day of Litture and Litture and Seal, this layer of the day of Litture and Lit			3.
County been allowed an invalid pension of Dollars, for the year 189 Sworn to and subscribed before me, this, the day of live of the year 189 Nore.—State fully the nature of wound or character of the year the disability, and explain particularly the not of the disability resulting from the wound or disease. FATE OF GEORGIA, County. Ordinary of said County certify that I am well acquainted with his said affidavit are true, and I know he is the individual he represents himself to be day of lay of la		The second secon	
County been allowed an invalid pension of Dollars, for the year 189 Sworn to and subscribed before me, this, the day of live of the year 189 Nore.—State fully the nature of wound or character of the year the disability, and explain particularly the not of the disability resulting from the wound or disease. FATE OF GEORGIA, County. Ordinary of said County certify that I am well acquainted with his said affidavit are true, and I know he is the individual he represents himself to be day of lay of la	promised granter of the state of	A A CONTRACTOR	en a consequencia e con esta de consequencia de la consequencia della consequencia della consequencia della consequencia della
County been allowed an invalid pension of Dollars, for the year 189 Sworn to and subscribed before me, this, the day of live of the year 189 Nore.—State fully the nature of wound or character of the year the disability, and explain particularly the not of the disability resulting from the wound or disease. FATE OF GEORGIA, County. Ordinary of said County certify that I am well acquainted with his said affidavit are true, and I know he is the individual he represents himself to be day of lay of la			
County. I. M. Magdac. County. Ordinary of said County of said affidavit are true, and I know he is the individual he represents himself to be defined in this County. Given under my official signature and seal, this of the said and said of the said affidavit are true, and I know he is the individual he represents himself to be defined as a said county. Given under my official signature and seal, this of the said County. Affine Said County of said County of said County of the said County of the said County of the said County of the said County of said County of the said County of said County of the said County of the said County of said County of the said County of said County of the said County o		ubscribed before me,	this, the
County. I. M. Magdac. County. Ordinary of said County of said affidavit are true, and I know he is the individual he represents himself to be defined in this County. Given under my official signature and seal, this of the said and said of the said affidavit are true, and I know he is the individual he represents himself to be defined as a said county. Given under my official signature and seal, this of the said County. Affine Said County of said County of said County of the said County of the said County of the said County of the said County of said County of the said County of said County of the said County of the said County of said County of the said County of said County of the said County o	Norg.—State fully th	e nature of wound or charact	er of disease which causes the disability, and explain particularly the
I, Ordinary of said County. I, Ordinary of said County certify that I am well acquainted with Holicant in the foregoing affidavit, and am well satisfied that the statements made by hir his said affidavit are true, and I know he is the individual he represents himself to be determined to the day of the statement of the individual he represents himself to be day of the statement of the individual he represents himself to be day of the statement of the individual he represents himself to be day of the statement of the individual he represents himself to be day of the statement of the individual he represents himself to be day of the statement of the individual he represents himself to be day of the statement of the individual he represents himself to be day of the statement of the individual he represents himself to be day of the statement of the individual he represents himself to be day of the statement of the individual he represents himself to be day of the statement of the individual he represents himself to be day of the statement of the individual he represents himself to be day of the statement of the individual he represents himself to be day of the statement of the individual he represents himself to be day of the statement of the individual he represents himself to be day of the statement of the individual he represents himself to be day of the statement of the individual he represents himself to be day of the statement of the individual he represents himself to be day of the statement of the individual he represents himself to be day of the statement of the individual he represents himself to be day of the statement of the individual he represents himself to be day of the statement of the individual he represents himself to be day of the statement of the individual he represents himself to be day of the statement of the individual here.	xtent of the disability result	ing from the wound or disease	
I, M. M. John Ordinary of said County certify that I am well acquainted with H. Magnet the plicant in the foregoing affidavit, and am well satisfied that the statements made by hir his said affidavit are true, and I know he is the individual he represents himself to be defined that the resides in this County. Given under my official signature and seal, this day of the da	STATE OF GE	ORGIA.)
Ordinary of said County certify that I am well acquainted with Hill Reagree the plicant in the foregoing affidavit, and am well satisfied that the statements made by hin his said affidavit are true, and I know he is the individual he represents himself to be defined that the resides in this County. Given under my official signature and seal, this day of 1900.	D: 11.1.		HJ Rayen
certify that I am well acquainted with Hill Reagran the plicant in the foregoing affidavit, and am well satisfied that the statements made by him his said affidavit are true, and I know he is the individual he represents himself to be defined that he resides in this County. Given under my official signature and seal, this day of 1900.		,	
certify that I am well acquainted with Hill Reagran the plicant in the foregoing affidavit, and am well satisfied that the statements made by him his said affidavit are true, and I know he is the individual he represents himself to be defined that he resides in this County. Given under my official signature and seal, this day of 1900.	I. W. H.	1. Na police	Ordinary of said County
plicant in the foregoing affidavit, and am well satisfied that the statements made by hin his said affidavit are true, and I know he is the individual he represents himself to be defined that he resides in this County. Given under my official signature and seal, this day of 1900.			11 11 11
his said affidavit are true, and I know he is the individual he represents himself to be defined that he resides in this County. Given under my official signature and seal, this day of 1900.			
Given under my official signature and seal, this day of 1900.	n his said affidavit	are true, and I know	he is the individual he represents himself to be
Given under my official signature and seal, this day of lare 1900.			
day of less 1900.	and that he resides		y official signature and seal, this
1 Magarlace		1 .	
	Affix your soal here.	day of Jali	11, 12
Ordinary — County			0 2
			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 [L. S.]

SOLDIER'S PENSION. No. 620 No. 620 SOLDIER'S PENSION. 1901. TOWN W. LINDSEY. Commission of Protest. Commission of Prote

POWER OF ATTORNEY.

[1] [2] [1] [4] [2] [1] [2] [2] [2] [2] [2] [2] [2] [2] [2] [2	hereby authorize	The same of the same of
.2	of	
		+ 1
o receive and receipt for the pension	paid hereon and request that he remit sa	une
	by	
ut 1		
IN WITNESS WHEREOF, I ha	ve hereunto set my hand and seal this	- A
lay of1902.		
TINITE LEGISLE		

FRACTIONS () 3. 3. (FOR THOSE ALREADY ENFOLLED.)	To Was Brien 903	SOLDIER'S PENSION 1902.	Name Reagin H.T., County D. & Regiment College Co. C. Regiment College District P. T. W.	11, 5 50.	JOHN W. LINDSEY, Commissions of Positions.	Con. S. Handel, State Printer, Aliefan
To The Table	on St	SOLDI	Name Re County Co.	Amount, \$	Ö	W eap

STA PLOS DEORGIA

FOR APPLICANTES HERETOLORIA MEDICAL PENSION

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA	1 ,
Se Kall C	County.
	Reagan of De Kalk
	duly sworn, says on oath that he is a bona fide citizen
	esided therein continuously ever since the 13"
	; that he enlisted in the military service of the Con-
federate States (or of the State of	during the war between the
	in Company C, of th Regiment
of colle Jeg in Volunteers,	's Brigade; that whilst engaged
in such military service in the State	of da, on the 321 day
of //// 1863	he was wounded, injured or diseased as follows:
The Shot in The	esight fore arm at
bettee of Chan	cellor ville hendering
The arme Dut	stantiacey peles
	The first of the second
. *	
Deparent makes application for	the pension to which he is entitled for year end-
Dipty	c heretofore under said law as a resident of County been allowed an invalid pension of Dollars, for the year 1900.
Sworn to and subscribed before	
day of Will	1901. Postoffice Lichonia
Magslaced	Edinasy
NoteState fully the nature of the wound	or character of disease which causes the disability, and cruluin partic-
ularly the extent of the disability resulting from	the wound or disease.
STATE OF GEORGIA,	
I, W.M. Ragoel	with S. C. Cagin the
I, M.M. Ragare	Ordinary of said County
do certify that I am well acquinted	with Meagin the
	nd am well satisfied that the statements made by him
in his said affidavit are true, and I ki	now he is the individual he represents himself to be
and that he resides in this County.	
Given under my	official signature and seal, this 9th
· day of lan	1901,
~~	MMResedae.
Affix { your }	- Jakob Galler
here }	Ordinary Le Malle County.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA.
Le Kall County.
Will William
Personally appears I. Coagin of Le Mach
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 13"
day of 1841; that he enlisted in the military service of the Con-
federate States (or of the State of A) during the war between the States, and served as a living in Company of Com Regiment 92
of Volunteers, 's Brigade; that whilst engaged
in such military service in the State of, on the day
of May 1863, he was wounded, injured or diseased as follows:
Is talle Defiancellarsville
mas shor in sight urm fraction.
world and sendering do all
In les tantialles mollens
And the second s
The state of the s
Deponent makes application for the pension to which he is entitled for the year
ending October 20th, 1902. I have heretofore, under said law, as a resident of
Lie Kath County, been allowed an invalid pension of
Dollars, for the year 1901.
Sworn to and subscribed before me, this the M.J. Kenyin
15 day of lan 1802. Post-office Littoria
umila a silace. Os dinam
Nore.—State fully the nature of the wound or character of disease which causes the disability, and expluin particularly the extent of the disability resulting from the wound or disease.
particularly the extent of the discounty resulting from the wound or discase.
STATE OF GEORGIA,
De Kalk County.
www.
do certify that I am well acquainted with 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 1902.
{Anx your
Ordinary Le Kalh County
Norz.—Fill all blanks and of Company and Regiment. Norz.—All vouchers and affidavite must bear date after January 1, 1902.
Note,—All vouchers and affidavits must bear date after January 1, 1902.

Audited March 27 1889.

Woucher No. 1667

Amount. & SO,

Paid to H. T. Reggin

For Right Gern

Serible

Med 27 1889.

Included in Warrant No.

issued to Treasurer.

De KallMaimed Soldiers.

Voucher No. 1016

Amount \$ 50

Paid to N. J. Re again

For Arrn disabled

Reby 12 1890

Included in warrant No.

issued to Treasurer.

WARRANT CLERK

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

102

WARRANT CLER

Of Cambell, Sate Printer Constitution John Office.

Reagin, H. J.

1891.

Maimed Soldiers.

Voucher No. 683

Amount \$ 50 Paid to H. J. Reagan

For Ulru di;

1891

Included in warrant No.

issued to Treasurer.

1891.

WARRANT-CLERK.

applicant

1889 COUNTY DeKalb

WHEN AND WHERE BORN?

ENLISTED WHEN AND WIERE?

RANK.

COMPANY AND REGIMENT? Private Co. C, Cobb's Legion Georgia Vols. Lieutenant J.L. Argo.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? Chancellorsville, Va. May 3rd. 1863 Shot in the right arm.

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SUPRENDERED?

IF NOT PRESENT AT SURRENDER, WHIRE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. J.L. Argo Lieutenant. No data.

No. 1659 Allanta, Ja Moh 27 STATE OF GEORGIA. EXECUTIVE DEPARTMENT.

of Achalh har of the County having filed his application in the Executive

Department for an allowance under the Act approved October 24, 4887, as amended by Act,

Dec. 24, 1888, and the same having been allowed for

Kight arm Desable He is entitled to receive the sum of

Dollars

for such disability, the same being the allowance que or the year ending October 24, 1880.

The Treasurer will pay the same and hald his receipt this oucher, and return same to Executive Department for warrant.

By the Governor Homes in

CLERK EXECUTIVE DEPARTMENT.

150

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Dollars.

per above voucher, this 27 of Macch.

HI Reagin

per Symformson

Atlanta, Sa. Hely 12 1890. STATE OF GEORGIA, EXECUTIVE DEPARTMENT. Mr. J. J. Reagin of the County of De Kalk 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 Um desabled He is entitled to receive the sum of for such disability, the same being the answare 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. GOVERNOR. By the Governor, Mr Hamsen CLERK EXECUTIVE DEPARTMENT. RECEIVED OF STATE TREASURER, R. U. HARDEMAN Deefly 100/ 3 2/6 Dollars,

	1001.				
AZa (683			·	
		th	カ		
			te	1 ;	1
	Atlan	ta, Sa.	Ul	14/2	1

Mr. H. J. Reaguer having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Acts approjed Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for Arm Oxsal Milly +00 He is entitled to receive the sum of. for such disability, the same being the allowance due for the year ending October 24, 1891. The Treasurer will pay the same and hold its receipt on this vouces and return same to Executive Department for warrant. How Win By the Governor, MM Hamson SEC'Y EXECUTIVE DEPARTMENT

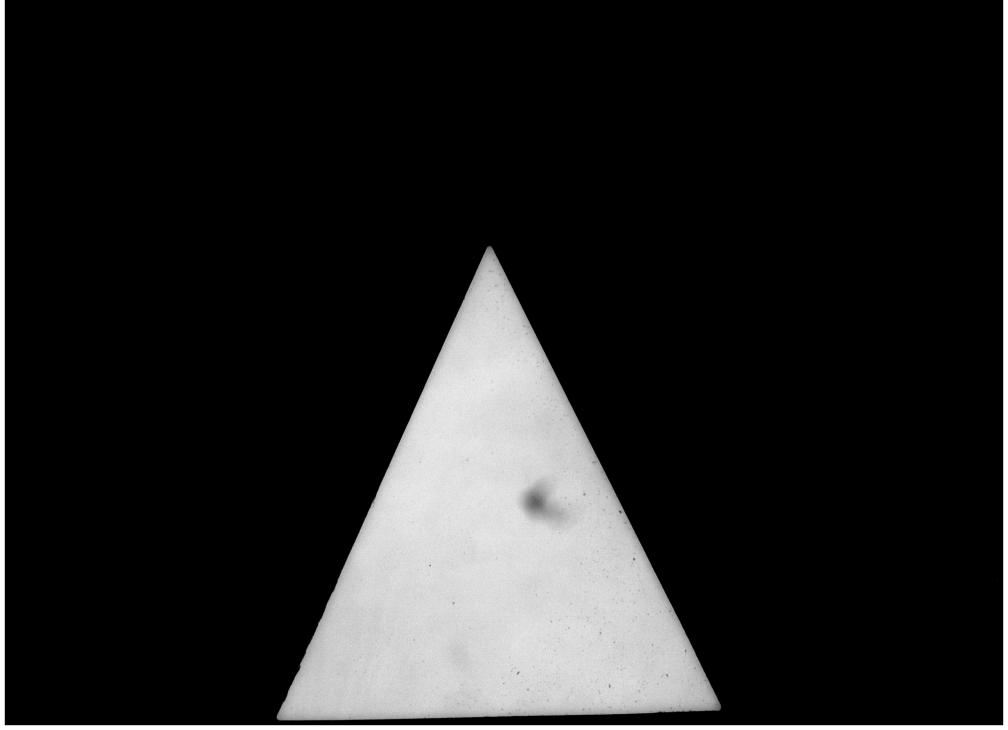
15000 RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia.

Oleflis tool per above voucher, this 12 of Hely 18

Dollars

STATE OF GEORGIA.

EXECUTIVE DEPARTMENT.



POWER OF ATTORNEY.

Reaghe, J. J.	where the witness resides. I w Lindsey. Oem. Ok Pensions, I receive the witness resides.	STAT
NDIGENT PENSION,	Witner my hand and Executed in presence was a second with a second with a second with the second was a second was a second with the second was a second with the second was a se	E OF GEOKU
1900.	county. S county. S county. S county at a seal this a cut was a cut with a cut was a cut with a cut	IA,
Name J.J. Reagin County De Kalb Co 2 - 42 9 a Approved 1900.	day of the the remit of the	
JOHN W. LINDSEY, Commissioner of Pensions,	Pension Office -6-26-1901.	
WARRANT HANDED TO	The law provides that all witnesses whose affidavits are to be obtained out of this state must swear before a Judge of the Probate Court showing the pharacter of the witness and must be certified to by the Judge un- der the seal of his court. That	
Geo. W. Hardsoh, State Frinter, Atlanta.	der the seal of his court. That potationed in any other way can not go gong industrial written to he was the way of the w	

tion is not sworn to as to the

POWER OF ATTORNEY.	Questions for Applicant.
STATE OF GEORGIA,	STATE OF GEORGIA,
County.	La Cleagin
I,	of said State and County, desiring to avail himself of the Pension Act (Section 1254, Code), hereby submits his proofs, and after being duly sword 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) 1. Congression of the Pension Act (Section 1254, Code), hereby submits his proofs, and after being duly sword true answers as follows: 1. What is your name and where do you reside? (give State, County and post office)
to receive and receipt for the pension allowed, and request that he remit same to	2/ Hope long and singe when have you been a resident of this State? 100 5 th 1837
at by	Hope long and since when have you been a resident of this State? Nov 5th 1837
Witness my hand and seal thisday of1900.	3. When and where were you born? 1025"/(37 in the lially le
Executed in presence of	4. When and where and in what company and regiment did you enlist or serve? 1204 1862.
(L. S.)	5. How long did you remain in such company and regiment? There Ilare
Beharlo e a file chisted in Co J. 42 ga regiment	i Thay 1865
Thay the 12th 1862 and was staled in the fall of The year 1863	
	6. For how long a period did you discharge regular military duty? Mile Call
To Stephens left alley from my company	May 1865 of Meridian Misso at Surger
I Seven to and subscribed Moummites (top to	
& before are this rece 26/01 (1/4)	8. What is your present occupation? & love walker
Sound wilkerion	9. How much can you carn (gross) per annum by your own exertions or labor? \$2.5 22.50 22. 10. What has been your occupation since 1865? Elizabeth Affine Called.
	11. Upon which of the following grounds do you base your application for pension, viz: first, "age and
is a restaint citizen of Fredom to and his statement is country of full credit	poverty," second, "infirmity and poverty," or third, "blindness and poverty" Life function 12. If upon the first ground, state how long you have been in such condition that you could not earn
a fitte the street of the land of and	your support? If upon the second, give a full and complete history of the infirmity and its extent? If
he scale is corner of full credit	upon the third, state whether you are totally blind and when and where you dost your sight? Informuty caused is on Rhamadien
thelief tohn floillumin - 1999 7 1998	I also rejection eglisials so that &
Trefor Cotuans 198 19 19 19 19 19 19 19 19 19 19 19 19 19	I mable to work as my Bake to make along
the season of th	13. What property, effects or income do you possess, and its gross value?
Transport	14. What property, effects or income did you possess in 1894, 1895, 1896, 1897, 1898 and 1899, and
the same of the sa	what disposition, if any, did you make of same? A The transforded dis
Fig. 19 of the state of the sta	6 2000
The per series of the series o	15. In what County did you reside during those years, and what property did you then return for faxation?
100 1111 1114 1114 1114 1114 1114 1114	16. How were you supported during the years 1898 and 1899? By were your grant
nne	1 Lavor and welk of my chiledren
We the transfer of the transfe	17. How much did your support cost for each of those years, and what portion did you contribute thereto
The sale of the sa	by your own labor or income? A CAN \$100. Would one in cach year?
	a) Die Caller And bei Wille Cola.
	19. Have you a family? If so, who composes such family? Give their means of support? Have they
	a homestend? Lee Will the Chicalian,
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	will an allandian monde.
LINDS COMMISSION COMMI	20. Are you receiving any pension? If so, what amount, and for what disability?
F C 3 2 2 8 8 8 0 1 3	Sworn to and subscribed before me this the)
	29 (Receptor
SOUND TO THE STATE OF THE STATE	day of 1900.) Applicant.
	of He Ch. County.

QUESTIONS TO Applicant

QUESTIONS FOR WITNESS STATE OF GEORGIA, COUNTY. , of said State and County, having been presented Meagin as a witness in support of the application of 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? And what is Your name and where do you reside? - Hollath Co 2. Are you acquainted with... the applicant; if so Jes, how long have you known him?____ 3. Where does he reside, and bow long and since when has he been a resident of this State ? In De Mall long you all of his life When, where and in what company and regiment did he enlist, and how do you know? In Mayor In Newton leo, les F 47 & La. 5. Were you a member of the same company and regiment? 6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? do Clo Ll V was about Three sears 7. What property, effects or income has the applicant? (Give your means of knowledge.) More Am his neighbor) 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? Would will no dio Nos ilin o 9. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? 10. What is the applicant's occupation and physical condition? eas mullion to an extent that Constantly complain 11. Is the applicant unable to support himself by labor of any sort, if so, why? de Bount 12. How was he supported during the years 1898 and 1899 ?-List children 13. .- What portion of his support for these two years was derived from his own labor or income? with more wan rice or with 14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under, Section 1254, Code? Il Long Plat age discuse le is A jumie or miniet or 15. What interest have you in the recovery of a pension by this applicant? Sworn to and subscribed before me, this?

Illiand all,

AFFIDAVIT OF PHYSICIANS

icians

after

STATE OF GEORGIA,	
Dellall COUNTY	
Peraonally came before me & R. Oil	isto.
(Me (1) Inhance	known to me as reputable phy
of said County, who, being severally sworn, say on oath that they	have examined carefully
applicant for pensi	on under Section 1254, Code, and
such personal examination say that his precise physical condition is	as follows:
That he is Suffering	from Run
alim and Fath Del	eneration of
The Heart.	general and the second
And the second s	
They further say on oath that the physical condition of appl	icant renders him unable to la
any work or calling sufficient to earn a support for himself, and the	at we have no interest in said pe
being allowed.	de bush Mil
Sworn to and subscribed before me this the day of the d	Company - 2 - 4
day of 1900.)	1 Farmer
Millegedace, Ordinary.	
ORDINARY'S CERTIF	ICATE.
STATE OF GEORGIA,	
0 11 01	
De Mall COUNTY.	
I, M. Magolace, Ordinary	in and for said County, hereby co
	resides in said County, an
been a bona fide resident of this State since the day	of.** 189
and that the witnesses, viz: D.S. Chaing	es
are of trustworthy character, and that their statements are entitled to	full faith and credit
I further certify that before answering the foregoing question	
the oath hereon prescribed, and that the full text of the affidavits	was read to the applicant and wi
before same was signed.	1: 1
I further certify that the tax digests of De Mall	County show that appl
of property, and in 1899	Do
	Dollars of propert

. .____

Witness my hand and seal of office, this ...

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.

	County.)	1		
I,	here	by authorize	•	
	of			
	The state of the s		tomosta je osamo nagranjama	Committee and the second
eceive and receipt for	the pension allowed	and reque	st that he re	mit same
	at			
	**			
Witness my hand and	seal, thisda	y of		1903.
			7.	
				[L.

(FOR THOSE ALREADY ENROLLED.)

378

LDIER'S PENSION

INDIGENT

1903.

WARRANT HANDED TO JOHN W. LINDSEY, WARRANT ISSUED

POWER OF ATTORNEY.

STATE OF GEORGIA, hereby authorize to receive and receipt for the pension allowed and request that he remit same to Witness my hand and seal, this Executed in presence of

> SOLDIER'S PENSIO INDIGENT

(FOR THOSE ALREADY ENROLLED.)

JOHN W. LINDSEY.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, Le Kalle A County
Personally appears & le Ceagin of de Well
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since the 5 day of Nov 1837; that he is 65 years old and
by occupation a Me Shanie , that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served for the term of 3 Years in Company , of 424 Regiment
of La Val
follows: Ise and Infirmity landed from
heary lisease
that his property consists of the following items:
· C
of the value of OO Dollars, that by reason of his physical
of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1903. I have heretofore as a resident of De Kalh
county been allowed a pension for the year 1 Hirsh Payneed,
Sworn to and subscribed before me, this the
Gay of Jun 1903.
STATE OF GEORGIA,
La Hall County.
I, WM Raysday 1 prinary of said County,
do certify that I am well acquainted with he leasing
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know 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 AM 19032
(Allix) WWW. Marsday
Ordinary De Malle County
Ordinary See Calle County.

Note .- Affidavit should not be attested before January 1st, 1903.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	
Dekall County	
100	, of Dikall-
County, State of Georgia, who, being duly sworn, say	
and resident of said County and State, and has re-	
since the 5 day of November 18	
by occupation a MALCANIC , that he enli	
federate States (or of the State of Surgion) during the war between the
States, and served for the term of Juni	n Company 77, of 42 th Regiment
of Ga Volo	; that his physical condition is as
follows:	1
Infinitely & the he	ant ald age
Infinencity & Money.	with the second second
that his property consists of the following items:	Nous.
of the value of Norse	
condition and poverty he is unable to support hims	
that he receives no pension but the one herein appli	
Deponent desires to participate in the benefits	
1894, and the Acts amendatory thereof, and makes a	
is entitled for the year 1904. I have heretofore as a	
Sworn to and subscribed before me, this the	Cill Kelyn
13 day of Jerry 1904.	
James Rywige or	rdinary.
STATE OF GEORGIA,	
Dekad- County.	
1 00	
I, Janus Rywrgy	Ordinary of said County
do certify that I am well acquainted with	Juagen
the applicant in the foregoing affidavit, and am	
by him in his said affidavit are true, and I know he	is the individual ne represents filmsel
to be, and that he resides in this County. Given under my official signature as	ed seed this 1.2
	1004
day of January	_1004.
{ Amx }	un to George

Note.—The blank spaces must be filled.

Note.-Affidavit should not be attested before January 1st, 1904.

POWER OF ATTORNEY.

-							ereby author
		eceipt for	the pension				remit same
				at	\$ - <u> </u>		
y		· · · · · · · · · · · · · · · · · · ·		i.			
Wı	TNESS I	ny hand and	l seal, this		lay of		1905.
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Ex	ecuted i	n the preser	ice of				
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LED.)		Į)	13	- 64.	2,1805.	ensions.	O TEATH,
WOLLED.)	m.	NSION	grave grave	6.6. ·	0 2 1905.	X, r of Pensions.	D TO
V ENROLLED.)	2	PENSION	D.	ide 6.	Ssued 1/4.3 1905.	IDSEX,	
TON 1934. EADY ENROLLED,)	248	S PENSION	05.	spinent 42.94.	т issueр (123 1905.	LINDSEY, mmissioner of Pensions.	TORSTATE
E RECTION 1254. ALREADY ENROLLED.)	5	P'S PENSION	305. Thagan	Mills.	PRANT ISSUED	I W. LINDSEY, Commissioner of Pensions.	TANDE
CODE RECTION 1294. (FOR THOSE ALREADY ENROLLED.)	No. 113	INDIGENT IER'S PENSION	905.	Regiment 42-51.	WARRANT ISSUED	JOHN W. LINDSEY, Commissioner of Pensions.	WARRANT HANDED TO

Name -County.

Reagin of

POWER OF ATTORNEY.

I,		hereby author
	of	
receive and receipt for the pen	sion allowed, and request	hat he remit same
	at"	
WITNESS my hand and seal, th	day of	1906,
	day of	

no data

COOR SECTION 1254 (FOR THOSE ALREADY ENROLLED.)

SOLDIER'S PENSION INDIGENT No. 179

Se Hack Nampf. J. Plea County X

1906.

Regiment # ?

JOHN W. LINDSEY. WARRANT ISSUED

.. 1906.

WARRANT HANDED TO

Note.—The blank spaces must be filled.

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

LAN WILDIAWILD HENEIGLAND WPPAME	LEUDIUU2	
----------------------------------	----------	--

State of Georgia.	
De Kall County.	
2 country.	
	in of all Hall
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	
since the 45 day of 1000	18.3%; that he is 65 years old and
by occupation a, that he en	ilisted in the military service of the Con-
federate States (or of the State of	
States, and served for the term of	in Company , of 42th Regiment
of Georgia Dols	that his physical condition is as
follows: Japannety	I have to
	<u> </u>
that his property consists of the following items	· ·
	A Company of the Comp
*	
of the value of	Dollars. I am now earning
by my labor,Do	ollars per month. That by reason of his
Deponent desires to participate in the bene 1894, and the Acts amendatory thereof, and make is entitled for the year 1906. I have heretofore, County, been allowed a pension for the year 1905	s application for the pension to which he as a resident of La
Sworn to and subscribed before me, this the	
James Regeorge	Ordinary.
State of Georgia, County.	
I, fames It yea	Ordinary of said County,
do certify that I am well acquainted with	Keagin,
the applicant in the foregoing affidavit, and am	well satisfied that the statements made
by him in his said affidavit are true, and I know h	te is the individual he represents himself
to be, and that he resides in this County.	as represents miniself
Given under my official signature	and seal, this
day of January	
	Tanus R George
(vour)	
neal here } Ordin	ary County.

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

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POWER OF ATTORNEY.

STA	ATE OF G	EORGIA,	Cot	INTY.		,	hereby autho
. to 1	receive and	receipt for	the pensi	of	and request	that 1	ne remit sam
				at	4.		
by_							
	WITNESS	my hand and	d seal, this_		day of_		190
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	Execu	ited in presen	ice of				
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) -						
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	6	3		The same	1907	sions	
1	ALREADY ENROLLED	S		1 191		LINDSEY, Commissioner of Pensions	a la
	M BO			1 / 5	9,00	X,	DT O
	0 E	E E	14	i i	Ssur	W. LINDSEY,	VDE
11 5	REAL	5 2		Regiment	17 T	LIN	HAL
	Code Section 1254. SE ALREADY El. D. 79/	0 &	7 6	R C	WARRANT ISSUED	₩.	REANT HANDED TO
,	HOSE J/o	ZE	3		WAI	OHN	C

FUK APPLICANTS HERETUFUKE ALLUWED PENSIONS
State of Georgia,
Downing. County.
Personally appears J. J. Reagin of De
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 Con-
federate States (or of the State of) during the war between the
States, and served for the term of in Company J, of 42 th Regiment
of; that his physical condition is as
follows: Infirmity and poverty
Tonoms.
that his property consists of the following items;
that his property consists of the following feeting
<u> </u>
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
19 day of Jany 1907. & Design
Lanus Pluota Ordinary.
State of Georgia,
County.
I, Janut R George Ordinary of said County,
do certify that I am well acquainted with 9.9 Reague
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know 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
James Rhings
Affix Ordinary County.
Pour County. County. County.

Nors.—The blank spaces must be filled. Nors.—Affidavit should not be attested before January 1st, Stati of Maryland \ 5.8.

Bulto. Ciej.

Thereby certify that on this of Let. 1401 before me the su

Thereby certify that on this s'll day of Let. 1901 before me the subscribes to notory Publice in and for the city and State aforesaid personaley appeared Welliam L. Pritter. to me personaley Known, and much adjusted that the matters and facts set for the in the annexed certificate are but to the best of this Knowledge and belief. Witness my hand and hotenat seal.

Clarence W Perkins

Hereby certify that for Treague, a private in Company of the Seorgia Regiment of Infantry, was detailed by order of Mayor Guntal C. I. Stevenson, Commanding Division in the Army of Vinnocese, some time daving the Hours of November 1863, to serve as a driver in Tronvants battery of Light Artitlery, afterwards Metter's lattery, and continued in that capacity in the scient battery to the 10th day of May 1865, colon he was paroled as a prisoner, of war, at Morridian, Kensissippi.

Communing Buttery of Light Arty CA.
at the close of the North between the State,

WILLIAM L. RITTER, 841 N. CARROLLTON AVENUE, DALTIMORE, MD. NAME Reagin, J. J.

YEAR 1902 COUNTY Dekalb

WHEN AND WHERE BORN? November 5, 1837 - DeKalb County, Georgia

ENLISTED WHEN AND WHERE? May 1862 - Newton County, Georgia

RANK.

COMPANY AND REGIMENT? Company F, 42nd Georgia
(Witness states a plicant was detailed during November 1863 to serve as
driver in Rowan's Battery Light Artillery afterwards Ritter's Battery)

NAME OF CAPTAIN AND COLONEL? Captain William L Ritter -Ritter's Battery
Captain J. M. Summers - Co. F, 42nd Ga:Regt.

WOUNDED?

CAPTURED, WHEN AND MILLE?

RELEASED.

WHEN AND WHERE SURRENDERED? Discharged May 1865 - Meridian, Mississippi.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

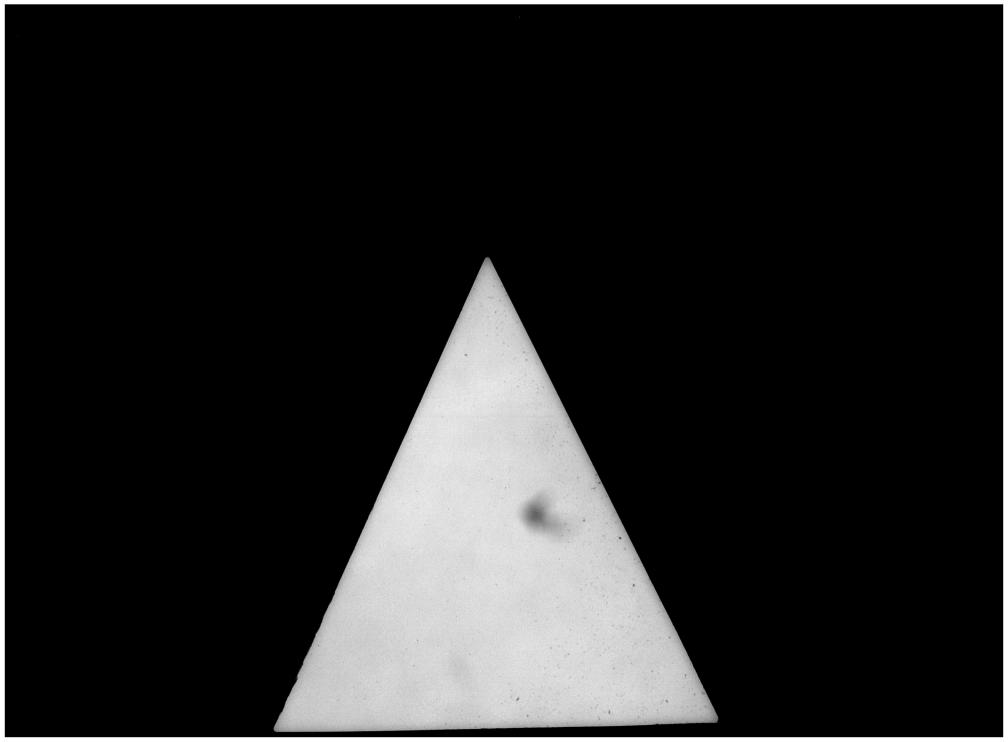
BURIED.

WITNESSES. L. S. Grainger - same command -- No data.

George Savage.
H. Lee Griffith.
M. J. Block.

The Orphans' Court of Bultimore City. Com Riller fexsonally wa High Jaw familia Morth his trander King and signa. ture; and Stake pleasure to the certificate dated Felico.
1981, in be half of the Reagin Capi Deller has assured any that the Reagin war a brave and faithful, dollier.

(high proge)



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 Destalle Name Her? Kittie & Reagin Widow of J. J. Reagin Company F = 4 L. Jako J. W. LINDSEY, Commissioner of Pensions CHAS. P. BYRD, State Printer, Atlanta.

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.

Name Here Kittie & Reaging
Widow of July Mangain
Company Selection

Approved

J. W. LINDSEY.
Commissioner of Pensions

CHAS P. BYPD, State Prince, Atlanta.

STATE OF GEORGIA, County.
2-1-21
Personally before me comes Julie J. Russian of said County,
who, after being duly sworn, on oath says, that she is the wide of head to whom in the County of Stall State of she was married on the
in the County of Nestall State of 40 she was married on the
day of Alexand that she remained his wife, and resided with him to the date of his death
n 19.4 and that she has not since his death remarried. At the time of his death
he was a resident of halfalla County, in said State of Georgia, and he
was on the
County for 19/4per annum, or account of being a soldier in Company
(Volunteers of State Militia.)
At the death of A. Ragin he was in the use and possession of the following
property Mulhing
of the cash value of 8. Mulhing
What property of any kind and of any value have you in your use, control and possession now, and
the cash value, (State fully.)
one Acres land and house on Jame \$100
Mouse Horses and Mules muche Country 8
Hogs, Cows, etc.
Total Cash value of all property
That she is now a bona fide resident citizen of said County of Meskall and she
has so continuously resided since. 2 day of Ale
Sworn to and subscribed before me, this the Lillie At Reaging
day of Africa 1915 Marie
Janus P. Gunge Ordinary,
Janus P. Gunge Ordinary,
Janus A George Ordinary, of Sellall County.
Janus P. Gunge Ordinary,
Affidavit of Witnesses to Prove Marriage and to WhomDate of Death of Husband.
Affidavit of Witnesses to Prove Marriage and to WhomDate of Death of Husband. STATE OF GEORGIA,
Affidavit of Witnesses to Prove Marriage and to Whom-Date of Death of Husband. STATE OF GEORGIA, County.
Affidavit of Witnesses to Prove Marriage and to Whom-Date of Death of Husband. STATE OF GEORGIA, County. Personally before me come Herriage and to known to be responsible
Affidavit of Witnesses to Prove Marriage and to Whom-Date of Death of Husband. STATE OF GEORGIA, County. Personally before me come the County who after having duly sworn on oath, say: that of their
Affidavit of Witnesses to Prove Marriage and to Whom-Date of Death of Husband. STATE OF GEORGIA, County. Personally before me come the company of the company of the county of the co
Affidavit of Witnesses to Prove Marriage and to Whom-Date of Death of Husband. STATE OF GEORGIA, County. Personally before me come the company of the county of the cou
Affidavit of Witnesses to Prove Marriage and to Whom-Date of Death of Husband. STATE OF GEORGIA, County. Personally before me come the whom 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. Whom the foregoing affidavit, is the lawful widow of the whom the foregoing affidavit, is the lawful widow of the whom the foregoing affidavit is the lawful widow of the whom the foregoing affidavit is the lawful widow of the whom the foregoing affidavit is the lawful widow of the whom the foregoing affidavit is the lawful widow of the whom the foregoing affidavit is the lawful widow of the whom the foregoing affidavit is the lawful widow of the whom the whom the foregoing affidavit is the lawful widow of the whom the whom the whom the foregoing affidavit is the lawful widow of the whom
Affidavit of Witnesses to Prove Marriage and to Whom-Date of Death of Husband. STATE OF GEORGIA, County. Personally before me come the whom 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. Whom the foregoing affidavit, is the lawful widow of the whom the foregoing affidavit, is the lawful widow of the whom the foregoing affidavit is the lawful widow of the whom the foregoing affidavit is the lawful widow of the whom the whom the said State of the whom the whom the said State of the whom the whom the whom the said State of the whom the whom the whom the whom the said State of the whom th
Affidavit of Witnesses to Prove Marriage and to Whom-Date of Death of Husband. STATE OF CEORGIA, County. Personally before me come that the persons, residing in said County, who after having duly sworn on oath, say: that of their own personal knowledge Mrs. who died in Assistant County in said State of the county of the
Affidavit of Witnesses to Prove Marriage and to Whom-Date of Death of Husband. STATE OF GEORGIA, County. Personally before me come that the lawful widow of the law
Affidavit of Witnesses to Prove Marriage and to Whom-Date of Death of Husband. STATE OF GEORGIA, County. Personally before me come who who and truthful persons, residing in gaid County, who after having duly sworn on oath, say: that of their own personal knowledge Mrs. Who died in Affidavit, is the lawful widow of the who died in Affidavit, is the lawful widow of the whole of the who died in Affidavit is and that she has not since remarried. That she became the wife of the form on the first was the same man who was on the pension roll of said State. State of the was the same was the same man who was on the pension roll of said State.
Affidavit of Witnesses to Prove Marriage and to Whom-Date of Death of Husband. STATE OF GEORGIA, Personally before me come County. Personally before me come Whom and the foregoing affidavit, is the lawful widow of the county of the county of the county in said State of County of the county of
Affidavit of Witnesses to Prove Marriage and to Whom-Date of Death of Husband. STATE OF GEORGIA, County. Personally before me come the company of the company of the company of the county of the
Affidavit of Witnesses to Prove Marriage and to Whom-Date of Death of Husband. STATE OF GEORGIA, County. Personally before me come who after having duly sworn on oath, say: that of their own personal knowledge Mrs. Who died in Affidavit, is the lawful widow of the said State of
Affidavit of Witnesses to Prove Marriage and to Whom-Date of Death of Husband. STATE OF GEORGIA, County. Personally before me come the company of the company of the company of the county of the

State of Georgia,)

Dekalb County.) To any Minister of the Gospel, Judge, Justice of the Inferior Court of Justice of the Peace:

You are herey authorized to join James J. Reagin & Miss Indiana New 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.

Civen under my hand and seal this 24th day of Decm 1856.

(Seal)

Alex Johnson, Ordinasry

No Certificate.

Georgia, Dekalb County.

I, James R. George, Ordinary in and for said county, do hereby certify that the above and foregoing, copy of marriage license is a true, correct and complete copy of marriage license issued to James J. Reagin and Miss Indianan New, and is a complete transcript of the record in Book B. Record of Marriages in and for said county. on Page 32.

In Testimony Thereof, I have hereto set my hand and affixed the seri of said Court of (reinery at Decatur, Georgia, this June 14th, 1915.

STATE OF GEORGIA			
DoKalle	County.		
Personally before me con oath says, that they are freehold	nes Ale Reagin 4 27 g	At they know Lette a Reaging	0
said County and knew her said hu	usband I Neas	at his death on the	20
day of	that she and he were in the	use, possession and control of the fo	ollowin
property to wit: One a	That she is now in the	he use, possession and control of the fo	ollowing
of the value of \$ 200		• 1	
Sworn to and subscribed i	perfore me, this the	& Williams	
June 1	of DAY	County.	
OR	DINARY'S CERT	CIEIC A TE	
STATE OF GEORGIA		IFICATE.	

know Mrs delle a Rengine the applicant for this pension and that she is the person
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
That I also know Ne Acain 2 , witness as to marriage and I also know
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 Detroit County shows that returned property to the
amount of 100 for 1908 \$ 100 for 1909 \$ 100 for 1910 \$ 100
Sworn under my hand and official spal of office this day of the 19K. (SEAL.)
(SEAL.) James Levyle Ordinary.
a Malla 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 belp 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 1370, are entitled.

5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some present, or by general reputation.

County.

Reagin, L. A. (MRS.).
DeKalb Copso
1021

Application for Pension Due Deceased Pensioner

Under Act 1904

(To pay expenses	of	last	illness	or	funeral	١
------------------	----	------	---------	----	---------	---

V. S. Morgan Ordinar
For Mrs. Little A. Reagin
ofCount
of Co Regimen
Died March 28, 1930
Amount \$ 100.00.
Approved and ordered paid. Of , Set 18,1930 R. det. Lawrd#8
. Commissioner of Pensions.
Received of 7. D morgan Ordinary Oll Sundul Salla Lumas espons, Magutha Ring.
D. A. St John

Ordinary: Fin out above in full and send this blank to Pension Office for approval before pay out the money.

Atlanta Printing Co., Atlanta, Ga.

Application for Pension Due to a Deceased Pensioner

Under the Act of August 15, 1904

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

GEORGIA,DeKalbCounty.	
Personally before me, the Ordinary of said Count	ty, comes
J. H. St John of said	
that he knew Mrs. Little A. Reagin	of said County, and that he was on
the Widow's Pension Roll	
time of his death, which occurred inDekalb	
State, on the	Merch 19.30, and that
a Pension of Fitty (\$50.00)	
unpaid at the time of the death. That he left no wide	ow or dependent children surviving him, and
no estate of any value sufficient to pay his funeral exp	enses, which amounted to the sum of
Dollars, as per sworn statement, itemized, hereto att	ached.
Sworn to and subscribed before me	
this 6 day of Oatober 1930	g It It John
V. A. Morgan Ordinary.	
DeKalb County.	
AFFIDAVIT OF	ORDINARY
GEORGIA, DeKalb County.	
I, V. S. Morgan	Ordinary of said County, do certify
that I personally know J. H. St. John	, 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 Mrs. Little A. Reagin	while in life; that he
was the same person whose name appears on the	W1dow's Pension
was the same person whose name appears on the Roll of	
Roll ofDeKalb	County, and was paid a Pension
Roll of	County, and was paid a Pension
Roll ofDeKalb	County, and was paid a Pension Dollars in said County for 19.29., and
Roll of	County, and was paid a Pension Dollars in said County for 19.29, and day of Cotober , 98x 193
Roll of	County, and was paid a Pension Dollars in said County for 19.29, and

The State who pay such only must see that an affidavit as been made on the face or back of each bill submitted for payment, and must then attach such bills to this voucher and send to the Pension Offfice so that his account may be given credit for the money thus paid out. If you have any doubt about a claim, write to this Office for instructions. Do not pay out any george in the cases until the completed voucher—this blank and the bills attached hereto have first been sent to the Pension Office and approved and cash back to you as your

J. 15. St. July & Sont

Juneal Piretois and Liversed Embalmers
NIGHT PHONE 104-W 14500

CO	Orkalli G ved for 35 NFEDERATE
	THE DEPOSITE OF THE
SOLDIE	R'S APPLICATIO
Under Act of 1919, and	1910—As Amended by Act Constitutional Amendment
	of 1920.
	6 .7 .7
County /	reKala nou a. Redwin
Name Ly	non a, Redwin
Company	11 th & a. Car
Regiment	11 to La. Car
Annuoved A	de ul Color
Approved	· the
	7 June 16
	ohn W. Clar
	e of anny Ser

Ordinary's Certificate

STATE OF GEORGIA,

me before signing the foregoing affidavits, and they are truthful and trustworthy and their he Vepresents himself to be, and that he has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know "to cottract,", the witness, who swears to the service; that both of them are now residents of said County and were duly sworn by DE GEORGE WAR WAR OF THE PROPERTY OF THE PARTY OF THE PAR ...the applicant for pension; that he is the person ., Ordinary of said County, certify that I know

statements are entitled to full faith and credit. 19 day of Upril

Sworn under my hand and official seal of office this.

(SEAL OF ORDINARY.)

Instructions:

re ala.

County

morgan Ordinary

1. Before any questions are inguered the Ordinary shall swear applicant and the witness in the following words: "You do solomily school 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."

Additional artifactis may be attached if blank spaces are insufficient.

All affidivitis must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.

A Fill out the back of the application carefully.

SOLDIER'S APPLICATION

Ordinary's Certificate

STATE OF GEORGIA,
Le COUNTY. Ordinary of said County, certify that I know Lungue & Redwicel the applicant for pension; that he is the person
1. V. D. Morgan , Ordinary of said County, certify that I know
Lyman 4 Redwice the applicant for pension; that he is the person
he represents himself to be, and that he has been, continuously, a bona fide resident citizen of said
State since January 1st, 1920; that I also know Wo witness, who
swears to the service; that both of them are now residents of said County and were duly sworn by
me before signing the foregoing affidavits, and 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 19 day of April 19 20. Morgan Ordinary
4. O. Morgan Ordinary
(SEAL OF ORDINARY.) of Descala, County

Instructions:

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words:

"You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you give shall be the whole truth. So help you God."

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

4. Fill out the back of the application carefully.

APPLICATION FOR PENSION BY A SOLDIER

Under Act of 1910, as Amended by Act of 1919, and Constitutional Amendment of 1920.

QUESTIONS FOR APPLICANT TO ANSWER:

	TATE OF GEORGIA,
ona	COUNTY.
a	Personally appears before me. A your and before me. of said State and county, and hereby applies for the pension allowed by the Act of 1910, as amended by the Act of 919 and the Constitutional Amendment of 1920, and submits testimony to support the same and fter being duly sworn true answers to make to the questions propounded, answers as follows, to-it:
	1, What is your name and where do you reside? (Give County and Post Office)
	duman a Red on 21 Pricar Sept.
	2. How long and since when have you been, continuously, a bona fide resident citizen of the State
0	f Georgia? all may life
	3. Did you enlist in the Army of the Confederate States, or in the organized militia, of this State
ſ	rom 1861 to 1865? Quality
	4. When and where, and in what Company and Regiment did you enlist? (State the arm and
c	Class of service, and give name of Colonel and Captain.)
	5. How long did you remain in the actual military service with said Company and Regiment?
	6. How long did you remain in the actual military service with said company and negiment.
	(Orve date of discharge.)
	6. When and where was your Company and Regiment surrendered or discharged from the Service?
	7. Were you personally present with your Command when it was surrendered or discharged?
	8. If you were not actually present, state specifically and clearly where you were
	a. Where was your Command when you left it?
	b. When did you leave the Command?
	c. For what cause did you leave?
	d. By whose authority did you leave?
	e. For how long was your leave of absence 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 by the enemy at any time?
	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? VI
	10. Have you ever applied for the Georgia Pension and had it refused? If so, for what cause was
	it not allowed?
	Sworn to and subscribed before me, this the
	19 day of Warel 1926. Applicant.
	/ V. D. morgan Ordinary)
	of LeKalk, county
	(SEAL OF ORDINARY)

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, DeKalb County.	w. belowa in the control of
I, V. S. Morgan	Ordinary of said County, do certify
that I personally know Mrs. Amelia V. Redwine	, the applicant, and that she
is the lawful widow of Lyman A. Redwine	
	County, and was paid
a Pension from DeKalb	
of his death on the 13th day of September	192.7, there was due to
him and unpaid his Pension of Fifty	
of Georgia, and I know	the within
witness, and he is of a truthful and trustworthy character and e	ntitled to full credit.
Given under my hand and seal this 20th of	September , 1925.
(Seal of Ordinary)	. D. morgan Ordinary
	Description ordinary Ordinary

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	185 1927
	於
	TK
,	T

cation for Pension (UNDER ACT 1891) paid to his Widow Children)

GEORGIA, I hereby authorize and constitute lawful attorney to collect, and receipt for me in my name, for the Pension due me for 192____, Pension Roll and paid from Witness my hand this _____day of Attested before me:

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

	Cersonally before me, the Ordinary of said County, comes Mrs. Amelia V. Radwine	
	id County, who after being duly sworn, on oath says that she is the widow of Lyman A.	
*	wine, deceased, late resident of DeKalb County,	
and t	hat said Pensioner was on the Pension Roll ofCo	oun
	vas paid a Pension of Fifty (\$.50.00) Dod quarter of 1927 said County for 1927, and that the said Pensioner died in DaKalb	olla
	County on the 13th day of September , 19	2
and a	t the time of his death a Pension of \$ 50.00 was due him from DeKalb	oun
and t	unpaid for 1925. Applicant further swears that she married the said Lyman A. Redwin	10
	eday of, 18, inFulton County	
State	of Georgia, and resided with him from the date of marriage to his death a	s l
	il wife, and is now his dependent widow, and she asks that the Pension so due and unpai to her.	id
S	sworn to and subscribed before me this 20th day of September	192
	V. D. Morgan, Ordinary) M. 1. 1. 110	,
-	V. D. Morgan Ordinary Mrs. Amelia M. Gesti (Seal of Ordinary) DeKalb (Seal of Ordinary)	u
	AFFIDAVIT OF WITNESS TE OF GEORGIA, County.	
r	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
on oa	th says that he knewwhile in	n l
and t	hat he knows Mrs.	, 1
above	applicant; and knows that the half	
and	were in due form of law married in the Co	oui
of	the State of	
	day of, 18, and that they were res	idi
	00	
togeti		-
	19, and that she is his dependent widow.	
8	sworn to and subscribed before me thisday of,	19
	, Ordinary	
	, County	
	(Seal of Ordinary)	
	INSTRUCTIONS:	
	. This form is for widows of Service and Disabled Soldier pensioners, who died after November 1st. If pensioner died after	er
uary 1s 2nd 3rd	i. This form is for widows of Service and Disabled Sodier pensioners, who died after November 1st. If pensioner died after, it is the state of the s	ram
lat uary 1s 2nd 3rd Such ce license	st, leaving dependent children but no widow, their guardian may use this form in their behalf. A Poof of marriage must be made. If no not use the enormously large form of marriage certificate in common vogue throughout the State, suitable only for furtificate is estimately too bulky for use in any pension application. A plain certificate written on the back of the copy of marriages in the property of the prop	180

Sept 23 DECATUR, GA

Judge John W Clarke, Pension Commissioner, Atlanta, Ga.

Dear Judge:

Enclosed please find application for pension due deceased soldier for widow of Lyman A Redwine who was on the roll and died September 13, 1927. Will appreciate if you can get her on the next roll for the last payment of the year.

With kindest regards, I am

Very truly yours,

V. D. Morgan Ordinary.

ENCL.1 VSM-RP



MAJOR L. A. REDWINE, Treasurer Camp A, Wheeler's Confederate Cavalry 92 South Pryor Street

Care Descharty-Little-Redwine Co.

ATLANTA, GA

92 AND 94 SOUTH PRYOR ST.

Wholesale Dry Goods and Notions

Atlanta, Ga. June 11, 1926,

State of Georgia, Fulton County,

Personally appeared Dr. Arch Avery and Dr. T. D. Longino who make affidavit that they are personally acquainted with L: A. Redwine, and while they are not familiar with his services as a Confederate Veteran, they make affidavit that they know that L. A. Redwine was a nember of Camp "A" Meelers Cavalry, which is in their opinion sufficient proof that he was actually in the service of the Confederate Army.

arch. avary Private Colo Region Car Thomas uno Provale Bu pard ger Sworn to and subscribed before se this 14 day Curoling

of June 1926. Pladace TIP



Georgia Soldier Roster Commission

COMMISSION:
CLIFFORD WALKER, Governor
JOHN W. CLARK, Commissioner of Pensions
CHARLES H. COX, Adjutant General

LILLIAN HENDERSON,

Acting Superintend

ATLANTA, GA., May 27, 1926

The name Lyman A Redwine has not been found on the muster roll of Captain Moore's Battery Ga. Artillery, C.S.A., for (period not stated), Athens, July 15, 1864, (only roll on file). Nor has any record been found of his service, capture or parole as of that organization. Service in this battery was rendered in Athens and vicinity.

L. A. Redwine, Co. K, 11th Ga. Cavalry, C. S. A., enlisted Aug. 20, 1864, at Athens, Ga., mustered in Aug. 20, 1864, to serve in North Eastern part of Georgia.

Muster-in roll dated Aug. 20, 1864, (only roll on file) shows him a private.

Capture, parole or later record not found. Not found as Lyman A Redwine.

Age; 17. Height: 5 ft. 6 in. Complexion: fair. Eyes: dark. Hair: light. Nativity: Ga. Occupation; Farmer.

Court of Ordinary Fulton County STATE OF GEORGIA

CERTIFIED COPY OF

MARRIAGE LICENSE

AND

CERTIFICATE OF MARRIAGE

/ O

Mr. Lyman Alonzo Redwine

Miss Amelia Virginia Rogers

Thos. H. Jeffries

Ordinary.

MARRIAGE LICENSE

State of GeorgiaFult	on County
To any Minister of the Cospel, Judge Person authorized to Solemnize,	of the Superior Court, Instice of the Peace, or other
You are hereby author	ized and permitted to join in the
honorable state of Mat	trimony Mr. Lyman Alonso Redwine
and Miss Amelia Virg	inia Rogers
cording to the Constitution and Laws of this	provided there be no lawful cause to obstruct the same, ac- State; and for so doing this shall be your sufficient License. CERTIFICATE THEREON TO MY OFFICE FOR RECORD
Given under my Hand and Seal this	14 day of Sept. 1921
	Patrick H. Calhoun L. S.
	oc Ordinary
I hereby certify that	Mr. Lyman Alonzo Redwine
	irginia Rogers
were joined together in the HOLY BANS on the 14 day of Sept.	192_ 1 ., by me.
	H. C. Hammond, M.G.
· · · · · · · · · · · · · · · · · · ·	
State of Georgia,	ORDINARY'S OFFICE
Fulton County.	ATLANTA, GA., Sept. 23rd 192.7
/, 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
	Er. Lyman Alonso Redwine
and	Miss Amelia Virginia Rogers
as the same a	ppears of record in this office.
Given un	nder my official Signature and Seal of the Court of Ordinary, the day
	year aforesgid
	Clerk Court of Ordinary

and Niss Amelia	a Virginia Rogers
According to the Rites of your C	hurch, provided there be no lawful cause to obstruct the same, ac-
	os of this State; and for so doing this shall be your sufficient License.
RETURN THIS LICENSE, WIT	H YOUR CERTIFICATE THEREON TO MY OFFICE FOR RECORD
Given under my Hand and	Seal this 14 day of Sept. 1921
	Patrick H. Calhoun L. S.
I hereby certify that	Mr. Lyman Alonzo Redwine
und Miss Ame	elia Virginia Rogers
pere joined together in the HOLY	BANS OF MATRIMONY
the 14 day of Se	
	H. C. Hammond, M.G.
	the state of the s
	ORDINARY'S OFFICE
Itate of Georgia,	B. B.
Fulton Count	ATLANTA, GA., Sept. 23rd 192.7
1, Claude C. Mason	Clerk Court of Ordinary of said County, hereby certify
that the foregoing is a t	rue copy of the Marriage License and Certificate of Marriage of
	Mr. Lyman Alonso Redwine
and	Miss Amelia Virginia Rogers
as t	he same appears of record in this office.
	Given under my official Signature and Seal of the Court of Ordinary, the day
2	and year aforespid
The state of the s	Clerk, Court of Ordinary.
TARAK I	
₩.	
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Given under my Hand and Seal	this 14 day of Sept. 1921
	Patrick H. Calhoun L. S.
	GC Ordinary L. S.
411	
I hereby certify that_	Mr. Lyman Alonzo Redwine
and Miss Ameli	a Virginia Rogers
were joined together in the HOLY BA	NS OF MATRIMONY
on the 14 day of Sept	• 192 1, by me.
drawn to the second	H. C. Hammond, M.G.
(基本) (100 m) (100 m) (100 m)	Company of the second second
State of Georgia,	ORDINARY'S OFFICE
State of Gentilia'	6. 6.
Fulton County.	ATLANTA, GA., Sept. 23rd 192 7
s.	
/ Claude C. Mason	Clerk Court of Ordinary of said County, hereby certify
that the formation to a second	
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	Mr. Lyman Alonso Redwine
and	Miss Amelia Virginia Rogers
3	
as the sa	ame appears of record in this office.
Gid	ven under my official Signature and Seal of the Court of Ordinary, the day
	and year aforesoid.
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